

(A) Utilize a process to make recommendations to the Secretary regarding research, advanced research, development, procurement, stockpiling, deployment, distribution, and utilization with respect to countermeasures, as defined in section 247d-6b(c) of this title, including prioritization based on the health security needs of the United States. Such recommendations shall be informed by, when available and practicable, the National Health Security Strategy pursuant to section 300hh-1 of this title, the Strategic National Stockpile needs pursuant to section 247d-6b of this title, and assessments of current national security threats, including chemical, biological, radiological, and nuclear threats, including emerging infectious diseases. In the event that members of the PHEMCE do not agree upon a recommendation, the Secretary shall provide a determination regarding such recommendation.

(B) Identify national health security needs, including gaps in public health preparedness and response related to countermeasures and challenges to addressing such needs (including any regulatory challenges), and support alignment of countermeasure procurement with recommendations to address such needs under subparagraph (A).

(C) Assist the Secretary in developing strategies related to logistics, deployment, distribution, dispensing, and use of countermeasures that may be applicable to the activities of the strategic national stockpile under section 247d-6b(a) of this title.

(D) Provide consultation for the development of the strategy and implementation plan under section 300hh-10(d) of this title.

(2) Input

In carrying out subparagraphs (B) and (C) of paragraph (1), the PHEMCE shall solicit and consider input from State, local, Tribal, and territorial public health departments or officials, as appropriate.

(July 1, 1944, ch. 373, title XXVIII, §2811-1, as added Pub. L. 116-22, title IV, §402(a), June 24, 2019, 133 Stat. 942.)

PRIOR PROVISIONS

A prior section 300hh-10a, act July 1, 1944, ch. 373, title XXVIII, §2811A, as added Pub. L. 113-5, title I, §103, Mar. 13, 2013, 127 Stat. 168; amended Pub. L. 116-22, title III, §305(a), June 24, 2019, 133 Stat. 936, which related to the National Advisory Committee on Children and Disasters, was transferred to section 300hh-10b of this title.

§ 300hh-10b. National Advisory Committee on Children and Disasters

(a) Establishment

The Secretary, in consultation with the Secretary of Homeland Security, shall establish an advisory committee to be known as the “National Advisory Committee on Children and Disasters” (referred to in this section as the “Advisory Committee”).

(b) Duties

The Advisory Committee shall—

(1) provide advice and consultation with respect to the activities carried out pursuant to section 300hh-16 of this title, as applicable and appropriate;

(2) evaluate and provide input with respect to the medical, mental and behavioral, and public health needs of children as they relate to preparation for, response to, and recovery from all-hazards emergencies; and

(3) provide advice and consultation with respect to State emergency preparedness and response activities and children, including related drills and exercises pursuant to the preparedness goals under section 300hh-1(b) of this title.

(c) Additional duties

The Advisory Committee may provide advice and recommendations to the Secretary with respect to children and the medical and public health grants and cooperative agreements as applicable to preparedness and response activities authorized under this subchapter and subchapter II.

(d) Membership

(1) In general

The Secretary, in consultation with such other Secretaries as may be appropriate, shall appoint not to exceed 25 members to the Advisory Committee. In appointing such members, the Secretary shall ensure that the total membership of the Advisory Committee is an odd number.

(2) Required non-Federal members

The Secretary, in consultation with such other heads of Federal agencies as may be appropriate, shall appoint to the Advisory Committee under paragraph (1) at least 13 individuals, including—

(A) at least 2 non-Federal professionals with expertise in pediatric medical disaster planning, preparedness, response, or recovery;

(B) at least 2 representatives from State, local, Tribal, or territorial agencies with expertise in pediatric disaster planning, preparedness, response, or recovery;

(C) at least 4 members representing health care professionals, which may include members with expertise in pediatric emergency medicine; pediatric trauma, critical care, or surgery; the treatment of pediatric patients affected by chemical, biological, radiological, or nuclear agents, including emerging infectious diseases; pediatric mental or behavioral health related to children affected by a public health emergency; or pediatric primary care; and

(D) other members as the Secretary determines appropriate, of whom—

(i) at least one such member shall represent a children’s hospital;

(ii) at least one such member shall be an individual with expertise in schools or child care settings;

(iii) at least one such member shall be an individual with expertise in children and youth with special health care needs; and

(iv) at least one such member shall be an individual with expertise in the needs of

parents or family caregivers, including the parents or caregivers of children with disabilities.

(3) Federal members

The Advisory Committee under paragraph (1) shall include the following Federal members or their designees (who may be nonvoting members, as determined by the Secretary):

(A) The Assistant Secretary for Preparedness and Response.

(B) The Director of the Biomedical Advanced Research and Development Authority.

(C) The Director of the Centers for Disease Control and Prevention.

(D) The Commissioner of Food and Drugs.

(E) The Director of the National Institutes of Health.

(F) The Assistant Secretary of the Administration for Children and Families.

(G) The Administrator of the Health Resources and Services Administration.

(H) The Administrator of the Federal Emergency Management Agency.

(I) The Administrator of the Administration for Community Living.

(J) The Secretary of Education.

(K) Representatives from such Federal agencies (such as the Substance Abuse and Mental Health Services Administration and the Department of Homeland Security) as the Secretary determines appropriate to fulfill the duties of the Advisory Committee under subsections (b) and (c).

(4) Term of appointment

Each member of the Advisory Committee appointed under paragraph (2) shall serve for a term of 3 years, except that the Secretary may adjust the terms of the Advisory Committee appointees serving on June 24, 2019, or appointees who are initially appointed after such date, in order to provide for a staggered term of appointment for all members.

(5) Consecutive appointments; maximum terms

A member appointed under paragraph (2) may serve not more than 3 terms on the Advisory Committee, and not more than two of such terms may be served consecutively.

(e) Meetings

The Advisory Committee shall meet not less than biannually. At least one meeting per year shall be an in-person meeting.

(f) Coordination

The Secretary shall coordinate duties and activities authorized under this section in accordance with section 300hh-10e of this title.

(g) Sunset

The Advisory Committee shall terminate on September 30, 2023.

(July 1, 1944, ch. 373, title XXVIII, §2811A, as added Pub. L. 113-5, title I, §103, Mar. 13, 2013, 127 Stat. 168; amended Pub. L. 116-22, title III, §305(a), June 24, 2019, 133 Stat. 936.)

CODIFICATION

Section was formerly classified to section 300hh-10a of this title.

AMENDMENTS

2019—Subsec. (b)(2). Pub. L. 116-22, §305(a)(1), inserted “, mental and behavioral,” after “medical”.

Subsec. (d)(1). Pub. L. 116-22, §305(a)(2)(A), substituted “25 members” for “15 members”.

Subsec. (d)(2) to (5). Pub. L. 116-22, §305(a)(2)(B), added pars. (2) to (5) and struck out former par. (2) which related to required members of the Advisory Committee.

Subsec. (e). Pub. L. 116-22, §305(a)(3), inserted at end “At least one meeting per year shall be an in-person meeting.”

Subsec. (f). Pub. L. 116-22, §305(a)(5), added subsec. (f). Former subsec. (f) redesignated (g).

Subsec. (g). Pub. L. 116-22, §305(a)(4), (6), redesignated subsec. (f) as (g) and substituted “2023” for “2018”.

§300hh-10c. National Advisory Committee on Seniors and Disasters

(a) Establishment

The Secretary, in consultation with the Secretary of Homeland Security and the Secretary of Veterans Affairs, shall establish an advisory committee to be known as the National Advisory Committee on Seniors and Disasters (referred to in this section as the “Advisory Committee”).

(b) Duties

The Advisory Committee shall—

(1) provide advice and consultation with respect to the activities carried out pursuant to section 300hh-16 of this title, as applicable and appropriate;

(2) evaluate and provide input with respect to the medical and public health needs of seniors related to preparation for, response to, and recovery from all-hazards emergencies; and

(3) provide advice and consultation with respect to State emergency preparedness and response activities relating to seniors, including related drills and exercises pursuant to the preparedness goals under section 300hh-1(b) of this title.

(c) Additional duties

The Advisory Committee may provide advice and recommendations to the Secretary with respect to seniors and the medical and public health grants and cooperative agreements as applicable to preparedness and response activities under this subchapter and subchapter III.

(d) Membership

(1) In general

The Secretary, in consultation with such other heads of agencies as appropriate, shall appoint not more than 17 members to the Advisory Committee. In appointing such members, the Secretary shall ensure that the total membership of the Advisory Committee is an odd number.

(2) Required members

The Advisory Committee shall include Federal members or their designees (who may be nonvoting members, as determined by the Secretary) and non-Federal members, as follows:

(A) The Assistant Secretary for Preparedness and Response.

(B) The Director of the Biomedical Advanced Research and Development Authority.