- (A) The Assistant Secretary for Preparedness and Response.
- (B) The Administrator of the Administration for Community Living.
- (C) The Director of the Biomedical Advanced Research and Development Authority
- (D) The Director of the Centers for Disease Control and Prevention.
- (E) The Commissioner of Food and Drugs.
- (F) The Director of the National Institutes of Health.
- (G) The Administrator of the Federal Emergency Management Agency.
- (H) The Chair of the National Council on Disability
- (I) The Chair of the United States Access Board.
- (J) The Under Secretary for Health of the Department of Veterans Affairs.
- (K) At least 2 non-Federal health care professionals with expertise in disability accessibility before, during, and after disasters, medical and mass care disaster planning, preparedness, response, or recovery.
- (L) At least 2 representatives from State, local, Tribal, or territorial agencies with expertise in disaster planning, preparedness, response, or recovery for individuals with disabilities.
- (M) At least 2 individuals with a disability with expertise in disaster planning, preparedness, response, or recovery for individuals with disabilities.

(d) Meetings

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

(e) Disability defined

For purposes of this section, the term "disability" has the meaning given such term in section 12102 of this title.

(f) Coordination

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

(g) Sunset

(1) In general

The Advisory Committee shall terminate on September 30, 2023.

(2) Recommendation

Not later than October 1, 2022, the Secretary shall submit to Congress a recommendation on whether the Advisory Committee should be extended

(July 1, 1944, ch. 373, title XXVIII, §2811C, as added Pub. L. 116–22, title III, §305(c), June 24, 2019, 133 Stat. 939.)

§ 300hh-10e. Advisory Committee Coordination

(a) In general

The Secretary shall coordinate duties and activities authorized under sections 300hh-10b, 300hh-10c, and 300hh-10d of this title, and make efforts to reduce unnecessary or duplicative reporting, or unnecessary duplicative meetings

and recommendations under such sections, as practicable. Members of the advisory committees authorized under such sections, or their designees, shall annually meet to coordinate any recommendations, as appropriate, that may be similar, duplicative, or overlapping with respect to addressing the needs of children, seniors, and individuals with disabilities during public health emergencies. If such coordination occurs through an in-person meeting, it shall not be considered the required in-person meetings under any of sections 300hh-10b(e), 300hh-10c(e), or 300hh-10d(d) of this title.

(b) Coordination and alignment

The Secretary, acting through the employee designated pursuant to section 300hh-16 of this title, shall align preparedness and response programs or activities to address similar, dual, or overlapping needs of children, seniors, and individuals with disabilities, and any challenges in preparing for and responding to such needs.

(c) Notification

The Secretary shall annually notify the congressional committees of jurisdiction regarding the steps taken to coordinate, as appropriate, the recommendations under this section, and provide a summary description of such coordination

(July 1, 1944, ch. 373, title XXVIII, \$2811D, as added Pub. L. 116–22, title III, \$305(d), June 24, 2019, 133 Stat. 941.)

§300hh-11. National Disaster Medical System

(a) National Disaster Medical System

(1) In general

The Secretary shall provide for the operation in accordance with this section of a system to be known as the National Disaster Medical System. The Secretary shall designate the Assistant Secretary for Preparedness and Response as the head of the National Disaster Medical System, subject to the authority of the Secretary.

(2) Federal and State collaborative System

(A) In general

The National Disaster Medical System shall be a coordinated effort by the Federal agencies specified in subparagraph (B), working in collaboration with the States and other appropriate public or private entities, to carry out the purposes described in paragraph (3).

(B) Participating Federal agencies

The Federal agencies referred to in subparagraph (A) are the Department of Health and Human Services, the Department of Homeland Security, the Department of Defense, and the Department of Veterans Affairs.

(3) Purpose of System

(A) In general

The Secretary may activate the National Disaster Medical System to—

(i) provide health services, health-related social services, other appropriate human services, and appropriate auxiliary