

116TH CONGRESS  
1ST SESSION

# H. R. 3073

To provide assistance to combat the escalating burden of Lyme disease and other tick and vector-borne diseases and disorders.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 3, 2019

Mr. SMITH of New Jersey (for himself and Mr. PETERSON) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To provide assistance to combat the escalating burden of Lyme disease and other tick and vector-borne diseases and disorders.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Ticks: Identify, Con-  
5 trol, and Knockout Act” or the “TICK Act”.

6 **SEC. 2. OFFICE OF OVERSIGHT AND COORDINATION FOR**  
7 **VECTOR-BORNE DISEASE.**

8 (a) ESTABLISHMENT.—The Secretary of Health and  
9 Human Services (referred to in this Act as the “Sec-  
10 retary”) shall establish in the Office of the Secretary an

1 Office of Oversight and Coordination for Vector-Borne  
2 Diseases (referred to in this Act as the “Office”), to be  
3 headed by a director to be appointed by the Secretary.

4 (b) DUTIES OF THE OFFICE.—

5 (1) IN GENERAL.—The Director of the Office  
6 shall—

7 (A) oversee the creation and maintenance  
8 of a national strategy to address Lyme disease,  
9 and other tick and vector-borne diseases as pro-  
10 vided for in paragraph (2); and

11 (B) oversee and coordinate Lyme disease  
12 and other tick and vector-borne disease and dis-  
13 order programs and activities across the agen-  
14 cies and offices of the Department of Health  
15 and Human Services and other Federal agen-  
16 cies outside of the Department of Health and  
17 Human Services, as appropriate.

18 (2) NATIONAL STRATEGY.—

19 (A) IN GENERAL.—The Director of the Of-  
20 fice shall provide for the conduct of an annual  
21 assessment of the progress of the United States  
22 in preparing for the escalating burden of Lyme  
23 disease and other tick and vector-borne diseases  
24 and disorders, including an assessment of all  
25 Federally funded programs and activities re-

1           lated to surveillance, diagnosis, treatment, edu-  
2           cation, or prevention, as well as implementation  
3           steps, and recommendations for priority actions,  
4           with appropriate benchmarks to measure  
5           progress, based on the assessment.

6           (B) NON-FEDERAL PERSPECTIVES.—In de-  
7           veloping the strategy under subparagraph (A),  
8           and maintaining it, the Director shall consult  
9           with non-Federal individuals with appropriate  
10          expertise, which may include—

11                 (i) epidemiologists with experience in  
12                 surveillance, treatment, education, or pre-  
13                 vention of vector-borne diseases;

14                 (ii) representatives of national patient  
15                 advocacy and research organizations that  
16                 focus on vector-borne diseases, and those  
17                 that focus specifically on tick-borne disease  
18                 and have demonstrated experience in re-  
19                 search, data collection, or patient access to  
20                 care;

21                 (iii) health information technology ex-  
22                 perts or other information management  
23                 specialists;

24                 (iv) clinicians, entomologists, vector-  
25                 management professionals, integrated pest

1 management professionals, public health  
2 professionals, and others with expertise in  
3 vector-borne disease, including Lyme dis-  
4 ease or other tick-borne diseases or dis-  
5 orders; and

6 (v) research scientists with experience  
7 conducting translational research or uti-  
8 lizing surveillance systems for scientific re-  
9 search purposes.

10 (c) OBJECTIVE OF THE OFFICE.—In carrying out  
11 subsection (b), the Director of the Office shall facilitate  
12 and work to ensure the accomplishment of the following  
13 activities:

14 (1) Expansion and enhancement of epidemiolog-  
15 ical research and basic, translational, and clinical bi-  
16 ological and biomedical research.

17 (2) Expansion and improvement of tick surveil-  
18 lance, linking tick surveillance to surveillance of  
19 Lyme disease, and reporting of Lyme disease and  
20 other tick- and vector-borne diseases, including co-  
21 infections with agents of more than one tick or vec-  
22 tor-borne diseases.

23 (3) Development of effective diagnostic tests to  
24 accurately and timely diagnose Lyme disease and

1 other tick- and vector-borne diseases, including di-  
2 rect detection tests.

3 (4) Development of treatments to cure or im-  
4 prove the lives of those who are infected with Lyme  
5 disease or other tick-and vector-borne diseases or  
6 who suffer from a tick-induced disorder (such as tick  
7 PIM programs).

8 (5) Address the quality of patient care, treat-  
9 ment affordability, and public awareness of Lyme  
10 disease and other tick or vector-borne diseases.

11 (6) Design and conduct clinical trials of suffi-  
12 cient size and duration to support clinical rec-  
13 ommendations.

14 (7) Systematic documentation of the experi-  
15 ences of health care professionals in diagnosing and  
16 treating tick- and vector-borne disease, including di-  
17 agnostic and treatment outcomes.

18 (8) Development and maintenance of one or  
19 more registries of patients and their experiences re-  
20 lating to exposure to, diagnosis for, and treatment  
21 of tick- and vector-borne disease, including out-  
22 comes, such that the confidentiality and safety of  
23 patient data is protected.

1           (9) Access to data and enable emerging tech-  
2           nologies to improve patient care, sharing data with  
3           researchers and care providers.

4           (10) Coordination with other Federal depart-  
5           ments to address tick- and other vector-borne dis-  
6           eases including the Department of Defense, the De-  
7           partment of Agriculture, the Environmental Protec-  
8           tion Agency, the Department of Interior, and the  
9           Department of Homeland Security.

10          (11) Coordination with the Tick-Borne Disease  
11          Working Group established under section 2062 of  
12          the 21st Century Cures Act (42 U.S.C. 284s) to de-  
13          velop and implement recommendations.

14          (12) Coordination with international bodies to  
15          integrate and inform the fight against Lyme disease,  
16          and other tick- and vector-borne diseases globally.

17 **SEC. 3. REGIONAL CENTERS OF EXCELLENCE IN TICK AND**  
18 **VECTOR-BORNE DISEASES.**

19          (a) IN GENERAL.—The Secretary, in coordination  
20          with the Director of the Centers for Disease Control and  
21          Prevention and the heads of other agencies as appropriate,  
22          shall award grants, contracts, or cooperative agreements  
23          to eligible entities (such as institutions of higher edu-  
24          cation, State, tribal, and local health departments, asso-  
25          ciations, or other appropriate entities) for the establish-

1 ment or support of Regional Centers of Excellence in Tick  
2 and Vector-Borne Diseases. Such Regional Centers shall  
3 be designed to address Lyme disease and other tick and  
4 vector-borne diseases by—

5           (1) building collaboration between academia  
6           and public health agencies for surveillance, preven-  
7           tion and response to Lyme disease and other tick  
8           and vector-borne diseases;

9           (2) providing training for public health ento-  
10          mologists to deal with Lyme disease and other tick  
11          and vector-borne diseases; and

12          (3) conducting applied research to develop and  
13          validate prevention and control tools and methods,  
14          and to anticipate and respond to outbreaks of Lyme  
15          disease and other tick and vector-borne diseases.

16          (b) ELIGIBILITY.—To be eligible to receive a grant,  
17          contract, or cooperative agreement under this section, an  
18          entity shall prepare and submit to the Secretary an appli-  
19          cation at such time, in such manner, and containing such  
20          agreements and information as the Secretary may require,  
21          including a description of how the entity will—

22                (1) coordinate, as applicable, with existing Fed-  
23                eral, State, and tribal programs related to Lyme dis-  
24                ease and other vector-borne diseases;

1           (2) examine, evaluate, and promote evidence-  
2           based interventions for individuals with Lyme dis-  
3           ease and other tick- and vector-borne diseases, in-  
4           cluding those in rural and underserved populations,  
5           and those who provide care for such individuals; and

6           (3) prioritize activities relating to—

7                   (A) expanding efforts, as appropriate, to  
8                   implement evidence-based practices to address  
9                   Lyme disease and other tick- and vector-borne  
10                  diseases, including through the training of  
11                  State, local, and tribal public health officials  
12                  and other health professionals on such prac-  
13                  tices;

14                   (B) supporting surveillance of vectors, and  
15                   early detection and diagnosis of Lyme and  
16                   other tick- and vector-borne diseases, including  
17                   improving the quality and reliability of diag-  
18                   nostic tools at all stages of disease progression,  
19                   and developing a Lyme disease test capable of  
20                   distinguishing between past and active infec-  
21                   tions;

22                   (C) improving the safety and efficacy of  
23                   any new, renewed, or modified human vaccine  
24                   for Lyme disease, other tick- and vector-borne  
25                   diseases, or a combination of such diseases;



1 (D) developing a standardized screening  
2 protocol for Lyme disease and other tick- and  
3 vector-borne diseases;

4 (E) enhancing studies and activities on  
5 tick biology, disease ecology, and surveillance,  
6 and tick management; and

7 (F) supporting other relevant activities  
8 identified by the Secretary or the Director of  
9 the Centers for Disease Control and Prevention,  
10 as appropriate.

11 (c) CONSIDERATIONS.—In awarding grants, con-  
12 tracts, and cooperative agreements under this section, the  
13 Secretary shall consider, among other factors, whether the  
14 entity—

15 (1) provides services to rural areas or other un-  
16 derserved populations;

17 (2) is able to build on an existing infrastructure  
18 of services and public health research;

19 (3) is located in an area with a high prevalence,  
20 or in any area predicted to have a high prevalence,  
21 of Lyme disease or other tick- and vector-borne dis-  
22 eases; and

23 (4) has experience with conducting research re-  
24 lated to Lyme disease and other tick- and vector-  
25 borne diseases.

1 (d) AUTHORIZATION OF APPROPRIATIONS.—For the  
2 purpose of carrying out this section, there are authorized  
3 to be appropriated \$10,000,000 for each of fiscal years  
4 from 2021 through 2026. Amounts appropriated shall be  
5 allocated under this section to diseases in a manner that  
6 proportionately matches the disease burden of those dis-  
7 eases in the United States, which shall be reassessed and  
8 adjusted annually.

9 **SEC. 4. COOPERATIVE AGREEMENTS WITH THE CENTERS**  
10 **FOR DISEASE CONTROL AND PREVENTION.**

11 (a) IN GENERAL.—The Secretary, in coordination  
12 with the Director of the Centers for Disease Control and  
13 Prevention and the heads of other agencies, as appro-  
14 priate, shall enter into cooperative agreements between the  
15 Centers for Disease Control and Prevention and health de-  
16 partments of States, political subdivisions of States, and  
17 Indian tribes and tribal organizations, to address Lyme  
18 Disease and other tick- and vector-borne diseases, and to  
19 support the development and implementation of evidence-  
20 based research, interventions, and treatment with respect  
21 to—

22 (1) educating and informing the public, based  
23 on evidence-based public health research and data,  
24 about Lyme Disease and other vector-borne diseases;

25 (2) supporting early detection and diagnosis;

1 (3) supporting prevention;

2 (4) improving treatment;

3 (5) supporting care planning and management  
4 for individuals with Lyme disease and other tick-  
5 and vector-borne diseases; and

6 (6) supporting other relevant activities identi-  
7 fied by the Secretary or the Director of the Centers  
8 for Disease Control and Prevention, as appropriate.

9 (b) ELIGIBILITY.—To be eligible to enter into a coop-  
10 erative agreement under this section, an entity described  
11 in subsection (a) shall prepare and submit to the Secretary  
12 an application at such time, in such manner, and con-  
13 taining such information as the Secretary may require, in-  
14 cluding a plan that describes—

15 (1) how the applicant proposes to develop or ex-  
16 pand programs to educate individuals through part-  
17 nership engagement, workforce development, guid-  
18 ance and support for programmatic efforts, and  
19 evaluation with respect to Lyme disease and other  
20 tick- or vector-borne diseases, and how the applicant  
21 proposes to support other relevant activities identi-  
22 fied by the Secretary or the Director of the Centers  
23 for Disease Control and Prevention, as appropriate;

24 (2) the manner in which the applicant will co-  
25 ordinate with Federal, tribal, and State programs

1 related to Lyme Disease and other vector-borne dis-  
2 eases, and appropriate State, tribal, and local agen-  
3 cies, as well as other relevant public and private or-  
4 ganizations or agencies; and

5 (3) the manner in which the applicant will  
6 evaluate the effectiveness of any program carried out  
7 under the cooperative agreement.

8 (c) AUTHORIZATION OF APPROPRIATIONS.—For the  
9 purpose of carrying out this section, there are authorized  
10 to be appropriated \$20,000,000 for each of fiscal years  
11 2021 through 2026. Amounts appropriated shall be allo-  
12 cated under this section to diseases in a manner that pro-  
13 portionately matches the disease burden of those diseases  
14 in the United States, which shall be reassessed and ad-  
15 justed annually.

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