

115TH CONGRESS
1ST SESSION

S. 849

To support programs for mosquito-borne and other vector-borne disease
surveillance and control.

IN THE SENATE OF THE UNITED STATES

APRIL 5 (legislative day, APRIL 4), 2017

Mr. KING (for himself, Mr. BURR, Mr. NELSON, and Mr. RUBIO) introduced
the following bill; which was read twice and referred to the Committee
on Health, Education, Labor, and Pensions

A BILL

To support programs for mosquito-borne and other vector-
borne disease surveillance and control.

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 “Strengthening Mos-
5 quito Abatement for Safety and Health Act” or the
6 “SMASH Act”.

7 **SEC. 2. REAUTHORIZATION OF MOSQUITO ABATEMENT FOR**
8 **SAFETY AND HEALTH PROGRAM.**

9 Section 317S of the Public Health Service Act (42
10 U.S.C. 247b–21) is amended—

1 (1) in subsection (a)(1)(B)—

2 (A) by inserting “including programs to
3 address emerging infectious mosquito-borne dis-
4 eases,” after “control programs,”; and

5 (B) by inserting “or improving existing
6 control programs” before the period at the end;

7 (2) in subsection (b)—

8 (A) in paragraph (1), by inserting “, in-
9 cluding improvement,” after “operation”;

10 (B) in paragraph (2)—

11 (i) in subparagraph (A)—

12 (I) in clause (ii), by striking “or”
13 at the end;

14 (II) in clause (iii), by striking the
15 semicolon at the end and inserting “,
16 including an emerging infectious mos-
17 quito-borne disease that presents a se-
18 rious public health threat; or”; and

19 (III) by adding at the end the
20 following:

21 “(iv) a public health emergency due to
22 the incidence or prevalence of a mosquito-
23 borne disease that presents a serious pub-
24 lic health threat.”; and

1 (ii) in subparagraph (D), by inserting
 2 “or that demonstrates to the Secretary
 3 that the control program is consistent with
 4 existing State mosquito control plans, or
 5 policies, or other applicable State pre-
 6 paredness plans” before the period at the
 7 end;

8 (C) in paragraph (4)(C), by striking “that
 9 extraordinary” and all that follows through the
 10 period at the end and inserting “that—

11 “(i) extraordinary economic conditions
 12 in the political subdivision or consortium of
 13 political subdivisions involved justify the
 14 waiver; or

15 “(ii) the geographical area covered by
 16 a political subdivision or consortium for a
 17 grant under paragraph (1) has an extreme
 18 need due to—

19 “(I) the size or density of the
 20 human population;

21 “(II) the size or density of the
 22 mosquito population; or

23 “(III) the severity of the mos-
 24 quito-borne disease, such that ex-
 25 pected serious adverse health out-

1 comes for the human population jus-
2 tify the waiver.”; and

3 (D) by amending paragraph (6) to read as
4 follows:

5 “(6) NUMBER OF GRANTS.—A political subdivi-
6 sion or a consortium of political subdivisions may
7 not receive more than one grant under paragraph
8 (1).”; and

9 (3) in subsection (f)—

10 (A) in paragraph (1), by striking
11 “\$100,000,000 for fiscal year 2003, and such
12 sums as may be necessary for each of fiscal
13 years 2004 through 2007” and inserting
14 “\$130,000,000 for each of fiscal years 2017
15 through 2022”;

16 (B) in paragraph (2), by striking “the
17 Public Health Security and Bioterrorism Pre-
18 paredness and Response Act of 2002” and in-
19 serting “other medical and public health pre-
20 paredness and response laws”; and

21 (C) in paragraph (3)—

22 (i) in the heading, by striking “2004”
23 and inserting “2018”; and

24 (ii) by striking “2004” and inserting
25 “2018”.

1 **SEC. 3. EPIDEMIOLOGY-LABORATORY CAPACITY GRANTS.**

2 Section 2821 of the Public Health Service Act (42
3 U.S.C. 300hh–31) is amended—

4 (1) in subsection (a)(1), by inserting “, includ-
5 ing mosquito and other vector-borne diseases,” after
6 “infectious diseases”; and

7 (2) in subsection (b), by striking “2010 through
8 2013” and inserting “2017 through 2022”.

9 **SEC. 4. GAO STUDY.**

10 (a) STUDY.—The Comptroller General of the United
11 States shall conduct a study on the state of surveillance
12 and control of mosquito-borne infectious diseases in the
13 United States and territories, including the state of pre-
14 paredness for conducting such surveillance and control.
15 The study shall include—

16 (1) a description of the infrastructure and pro-
17 grams for mosquito control in the United States, in-
18 cluding—

19 (A) how such infrastructure and programs
20 are organized and implemented at the Federal,
21 State and local levels, including with respect to
22 departments and agencies of the States, and
23 local organizations (including special districts)
24 involved in such control programs;

25 (B) the role of the private sector in such
26 activities;

1 (C) how the authority for mosquito control
2 impacts such activities; and

3 (D) the resources for such infrastructure
4 and programs, including Federal, State, and
5 local funding sources;

6 (2) how mosquito and other vector-borne dis-
7 ease surveillance and control is integrated into Fed-
8 eral, State, and local preparedness plans and ac-
9 tions, including how zoonotic surveillance is inte-
10 grated into infectious disease surveillance to support
11 real-time situational surveillance and awareness;

12 (3) Federal, State, and local laboratory capacity
13 for emerging vector-borne diseases, including mos-
14 quito-borne and other zoonotic diseases; and

15 (4) any regulatory challenges for developing and
16 utilizing vector-control technologies and platforms as
17 part of mosquito control strategies.

18 (b) CONSULTATIONS.—In conducting the study under
19 subsection (a), the Comptroller General of the United
20 States shall consult with—

21 (1) State and local public health officials in-
22 volved in mosquito and other vector-borne disease
23 surveillance and control efforts;

24 (2) researchers and manufacturers of mosquito
25 control products;

1 (3) stakeholders involved in mosquito abate-
2 ment activities;

3 (4) infectious disease experts; and

4 (5) entomologists involved in mosquito-borne
5 disease surveillance and control efforts.

6 (c) REPORT.—Not later than 18 months after the
7 date of enactment of this Act, the Comptroller General
8 of the United States shall submit to the Committee on
9 Health, Education, Labor, and Pensions of the Senate and
10 the Committee on Energy and Commerce of the House
11 of Representatives a report containing the results of the
12 study conducted under subsection (a) and relevant rec-
13 ommendations for Zika virus and other mosquito-borne
14 diseases preparedness and response efforts.

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