

112TH CONGRESS  
1ST SESSION

# H. R. 3314

To direct the Secretary of Health and Human Services to develop a national strategic action plan to assist health professionals in preparing for and responding to the public health effects of climate change, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 2, 2011

Mrs. CAPPS (for herself, Mr. MARKEY, and Ms. MATSUI) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To direct the Secretary of Health and Human Services to develop a national strategic action plan to assist health professionals in preparing for and responding to the public health effects of climate change, and for other purposes.

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 “Climate Change Health  
5 Protection and Promotion Act”.

1 **SEC. 2. SENSE OF CONGRESS ON PUBLIC HEALTH AND CLI-**  
2 **MATE CHANGE.**

3 It is the sense of the Congress that the Federal Gov-  
4 ernment, in cooperation with international, State, tribal,  
5 and local governments, concerned public and private orga-  
6 nizations, and citizens, should use all practicable means  
7 and measures—

8 (1) to assist the efforts of public health and  
9 health care professionals, first responders, States,  
10 tribes, municipalities, and local communities to in-  
11 corporate measures to prepare health systems to re-  
12 spond to the impacts of climate change;

13 (2) to ensure—

14 (A) that the Nation's health professionals  
15 have sufficient information to prepare for and  
16 respond to the adverse health impacts of cli-  
17 mate change;

18 (B) the utility and value of scientific re-  
19 search in advancing understanding of—

20 (i) the health impacts of climate  
21 change; and

22 (ii) strategies to prepare for and re-  
23 spond to the health impacts of climate  
24 change;

25 (C) the identification of communities vul-  
26 nerable to the health effects of climate change

1 and the development of strategic response plans  
2 to be carried out by health professionals for  
3 those communities;

4 (D) the improvement of health status and  
5 health equity through efforts to prepare for and  
6 respond to climate change; and

7 (E) the inclusion of health policy in the de-  
8 velopment of climate change responses;

9 (3) to encourage further research, interdiscipli-  
10 nary partnership, and collaboration among stake-  
11 holders in order to—

12 (A) understand and monitor the health im-  
13 pacts of climate change; and

14 (B) improve public health knowledge and  
15 response strategies to climate change;

16 (4) to enhance preparedness activities, and pub-  
17 lic health infrastructure, relating to climate change  
18 and health;

19 (5) to encourage each and every American to  
20 learn about the impacts of climate change on health;  
21 and

22 (6) to assist the efforts of developing nations to  
23 incorporate measures to prepare health systems to  
24 respond to the impacts of climate change.

1 **SEC. 3. RELATIONSHIP TO OTHER LAWS.**

2 Nothing in this Act in any manner limits the author-  
3 ity provided to or responsibility conferred on any Federal  
4 department or agency by any provision of any law (includ-  
5 ing regulations) or authorizes any violation of any provi-  
6 sion of any law (including regulations), including any  
7 health, energy, environmental, transportation, or any  
8 other law or regulation.

9 **SEC. 4. NATIONAL STRATEGIC ACTION PLAN.**

10 (a) REQUIREMENT.—

11 (1) IN GENERAL.—The Secretary of Health and  
12 Human Services, within 2 years after the date of the  
13 enactment of this Act, on the basis of the best avail-  
14 able science, and in consultation pursuant to para-  
15 graph (2), shall publish a strategic action plan to as-  
16 sist health professionals in preparing for and re-  
17 sponding to the impacts of climate change on public  
18 health in the United States and other nations, par-  
19 ticularly developing nations.

20 (2) CONSULTATION.—In developing or making  
21 any revision to the national strategic action plan, the  
22 Secretary shall—

23 (A) consult with the Director of the Cen-  
24 ters for Disease Control and Prevention, the  
25 Administrator of the Environmental Protection  
26 Agency, the Director of the National Institutes

1 of Health, the Secretary of Energy, other ap-  
2 propriate Federal agencies, Indian tribes, State  
3 and local governments, public health organiza-  
4 tions, scientists, and other interested stake-  
5 holders; and

6 (B) provide opportunity for public input.

7 (b) CONTENTS.—

8 (1) IN GENERAL.—The Secretary, acting  
9 through the Director of the Centers for Disease  
10 Control and Prevention, shall assist health profes-  
11 sionals in preparing for and responding effectively  
12 and efficiently to the health effects of climate change  
13 through measures including—

14 (A) developing, improving, integrating, and  
15 maintaining domestic and international disease  
16 surveillance systems and monitoring capacity to  
17 respond to health-related effects of climate  
18 change, including on topics addressing—

19 (i) water, food, and vector borne infec-  
20 tious diseases and climate change;

21 (ii) pulmonary effects, including re-  
22 sponses to aeroallergens;

23 (iii) cardiovascular effects, including  
24 impacts of temperature extremes;

- 1 (iv) air pollution health effects, includ-  
2 ing heightened sensitivity to air pollution;  
3 (v) hazardous algal blooms;  
4 (vi) mental and behavioral health im-  
5 pacts of climate change;  
6 (vii) the health of refugees, displaced  
7 persons, and vulnerable communities;  
8 (viii) the implications for communities  
9 vulnerable to health effects of climate  
10 change, as well as strategies for responding  
11 to climate change within these commu-  
12 nities; and  
13 (ix) local and community-based health  
14 interventions for climate-related health im-  
15 pacts;
- 16 (B) creating tools for predicting and moni-  
17 toring the public health effects of climate  
18 change on the international, national, regional,  
19 State, and local levels, and providing technical  
20 support to assist in their implementation;
- 21 (C) developing public health communica-  
22 tions strategies and interventions for extreme  
23 weather events and disaster response situations;
- 24 (D) identifying and prioritizing commu-  
25 nities and populations vulnerable to the health

1 effects of climate change, and determining ac-  
2 tions and communication strategies that should  
3 be taken to inform and protect these commu-  
4 nities and populations from the health effects of  
5 climate change;

6 (E) developing health communication, pub-  
7 lic education, and outreach programs aimed at  
8 public health and health care professionals, as  
9 well as the general public, to promote prepared-  
10 ness and response strategies relating to climate  
11 change and public health, including the identi-  
12 fication of greenhouse gas reduction behaviors  
13 that are health-promoting; and

14 (F) developing academic and regional cen-  
15 ters of excellence devoted to—

16 (i) researching relationships between  
17 climate change and health;

18 (ii) expanding and training the public  
19 health workforce to strengthen the capacity  
20 of such workforce to respond to and pre-  
21 pare for the health effects of climate  
22 change;

23 (iii) creating and supporting academic  
24 fellowships focusing on the health effects  
25 of climate change; and

1 (iv) training senior health ministry of-  
2 ficials from developing nations to strength-  
3 en the capacity of such nations to—

4 (I) prepare for and respond to  
5 the health effects of climate change;  
6 and

7 (II) build an international net-  
8 work of public health professionals  
9 with the necessary climate change  
10 knowledge base;

11 (G) using techniques, including health im-  
12 pact assessments, to assess various climate  
13 change public health preparedness and response  
14 strategies on international, national, State, re-  
15 gional, tribal, and local levels, and make rec-  
16 ommendations as to those strategies that best  
17 protect the public health;

18 (H)(i) assisting in the development, imple-  
19 mentation, and support of State, regional, trib-  
20 al, and local preparedness, communication, and  
21 response plans (including with respect to the  
22 health departments of such entities) to antici-  
23 pate and reduce the health threats of climate  
24 change; and



1           (ii) acting through the Director of the Cen-  
2           ters for Disease Control and Prevention or an  
3           appropriate Federal agency, pursuing collabo-  
4           rative efforts to develop, integrate, and imple-  
5           ment such plans;

6           (I) acting through the Director of the Cen-  
7           ters for Disease Control and Prevention or an  
8           appropriate Federal agency, creating a program  
9           to advance research as it relates to the effects  
10          of climate change on public health across Fed-  
11          eral agencies, including research to—

12                 (i) identify and assess climate change  
13                 health effects preparedness and response  
14                 strategies;

15                 (ii) prioritize critical public health in-  
16                 frastructure projects related to potential  
17                 climate change impacts that affect public  
18                 health; and

19                 (iii) coordinate preparedness for cli-  
20                 mate change health impacts, including the  
21                 development of modeling and forecasting  
22                 tools;

23           (J) providing technical assistance for the  
24           development, implementation, and support of  
25           preparedness and response plans to anticipate

1 and reduce the health threats of climate change  
2 in developing nations; and

3 (K) carrying out other activities deter-  
4 mined appropriate by the Secretary to plan for  
5 and respond to the impacts of climate change  
6 on public health.

7 (c) REVISION.—The Secretary shall revise the na-  
8 tional strategic action plan not later than July 1, 2016,  
9 and every 4 years thereafter, to reflect new information  
10 collected pursuant to implementation of the national stra-  
11 tegic action plan and otherwise, including information  
12 on—

13 (1) the status of critical environmental health  
14 parameters and related human health impacts;

15 (2) the impacts of climate change on public  
16 health; and

17 (3) advances in the development of strategies  
18 for preparing for and responding to the impacts of  
19 climate change on public health.

20 (d) IMPLEMENTATION.—

21 (1) IMPLEMENTATION THROUGH HHS.—The  
22 Secretary shall exercise the Secretary's authority  
23 under this Act and other Federal statutes to achieve  
24 the goals and measures of the national strategic ac-  
25 tion plan.

1           (2) OTHER PUBLIC HEALTH PROGRAMS AND  
2 INITIATIVES.—The Secretary and Federal officials of  
3 other relevant Federal agencies shall administer  
4 public health programs and initiatives authorized by  
5 statutes other than this Act, subject to the require-  
6 ments of such statutes, in a manner designed to  
7 achieve the goals of the national strategic action  
8 plan.

9           (3) CDC.—In furtherance of the national stra-  
10 tegic action plan, the Director of the Centers for  
11 Disease Control and Prevention shall—

12           (A) conduct scientific research to assist  
13 health professionals in preparing for and re-  
14 sponding to the impacts of climate change on  
15 public health; and

16           (B) provide funding for—

17           (i) research on the health effects of  
18 climate change; and

19           (ii) preparedness planning on the  
20 international, national, State, regional, and  
21 local levels to respond to or reduce the bur-  
22 den of health effects of climate change;  
23 and

24           (C) carry out other activities determined  
25 appropriate by the Director to prepare for and

1           respond to the impacts of climate change on  
2           public health.

3 **SEC. 5. ADVISORY BOARD.**

4           (a) ESTABLISHMENT.—The Secretary shall establish  
5 a permanent science advisory board comprised of not less  
6 than 10 and not more than 20 members.

7           (b) APPOINTMENT OF MEMBERS.—The Secretary  
8 shall appoint the members of the science advisory board  
9 from among individuals who—

10           (1) are recommended by the President of the  
11 National Academy of Sciences; and

12           (2) have expertise in public health and human  
13 services, climate change, and other relevant dis-  
14 ciplines.

15           (c) FUNCTIONS.—The science advisory board shall—

16           (1) provide scientific and technical advice and  
17 recommendations to the Secretary on the domestic  
18 and international impacts of climate change on pub-  
19 lic health, populations and regions particularly vul-  
20 nerable to the effects of climate change, and strate-  
21 gies and mechanisms to prepare for and respond to  
22 the impacts of climate change on public health; and

23           (2) advise the Secretary regarding the best  
24 science available for purposes of issuing the national  
25 strategic action plan.

1 **SEC. 6. REPORTS.**

2 (a) **NEEDS ASSESSMENT.**—

3 (1) **IN GENERAL.**—The Secretary shall seek to  
4 enter into, by not later than 6 months after the date  
5 of the enactment of this Act, an agreement with the  
6 National Research Council and the Institute of Med-  
7 icine to complete a report that—

8 (A) assesses the needs for health profes-  
9 sionals to prepare for and respond to climate  
10 change impacts on public health; and

11 (B) recommends programs to meet those  
12 needs.

13 (2) **SUBMISSION.**—The agreement under para-  
14 graph (1) shall require the completed report to be  
15 submitted to the Congress and the Secretary and  
16 made publicly available not later than 1 year after  
17 the date of the agreement.

18 (b) **CLIMATE CHANGE HEALTH PROTECTION AND**  
19 **PROMOTION REPORTS.**—

20 (1) **IN GENERAL.**—The Secretary shall offer to  
21 enter into, not later than 6 months after the submis-  
22 sion of the report under subsection (a)(2), an agree-  
23 ment with the National Research Council and the  
24 Institute of Medicine, under which the National Re-  
25 search Council and the Institute of Medicine will  
26 prepare periodic reports to aid health professionals

1 in preparing for and responding to the adverse  
2 health effects of climate change that—

3 (A) review scientific developments on  
4 health impacts of climate change; and

5 (B) recommend changes to the national  
6 strategic action plan.

7 (2) SUBMISSION.—The agreement under para-  
8 graph (1) shall require a report to be submitted to  
9 the Congress and the Secretary and made publicly  
10 available not later than July 1, 2015, and every 4  
11 years thereafter.

12 **SEC. 7. DEFINITIONS.**

13 In this Act:

14 (1) HEALTH IMPACT ASSESSMENT.—The term  
15 “health impact assessment” means a combination of  
16 procedures, methods, and tools by which a policy,  
17 program, or project may be judged as to its potential  
18 effects on the health of a population, and the dis-  
19 tribution of those effects within the population.

20 (2) NATIONAL STRATEGIC ACTION PLAN.—The  
21 term “national strategic action plan” means the  
22 plan issued and revised under section 4.

23 (3) SECRETARY.—Unless otherwise specified,  
24 the term “Secretary” means the Secretary of Health  
25 and Human Services.

1 **SEC. 8. AUTHORIZATION OF APPROPRIATIONS.**

2 (a) IN GENERAL.—There are authorized to be appro-  
3 priated such sums as may be necessary to carry out this  
4 Act.

5 (b) APPROPRIATIONS TO HHS.—All funds appro-  
6 priated to carry out this Act shall be appropriated to the  
7 Secretary.

8 (c) DISTRIBUTION OF FUNDS BY HHS.—In carrying  
9 out this Act, the Secretary may make funds appropriated  
10 pursuant to this section available to—

11 (1) other departments, agencies, and offices of  
12 the Federal Government;

13 (2) foreign, State, tribal, and local govern-  
14 ments; and

15 (3) such other entities as the Secretary deter-  
16 mines appropriate.

17 (d) SUPPLEMENT, NOT REPLACE.—It is the intent  
18 of the Congress that funds appropriated to carry out this  
19 Act should be used to supplement, and not replace, exist-  
20 ing sources of funding for public health.

○