

116TH CONGRESS
1ST SESSION

H. R. 4710

To direct the Secretary of Defense to include in each national defense strategy steps to strengthen the United States industrial base and to assure an uninterrupted supply of medicines, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 17, 2019

Mr. GARAMENDI (for himself and Mrs. HARTZLER) introduced the following bill; which was referred to the Committee on Armed Services, and in addition to the Committees on Veterans' Affairs, and Financial Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To direct the Secretary of Defense to include in each national defense strategy steps to strengthen the United States industrial base and to assure an uninterrupted supply of medicines, 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 “Pharmaceutical Inde-
5 pendence Long-Term Readiness Reform Act”.

1 **SEC. 2. UNITED STATES MEDICINE SUPPLY CHAIN.**

2 (a) NATIONAL DEFENSE STRATEGY.—The Secretary
3 of Defense shall include, in each national defense strategy
4 under section 113(g) of title 10, United States Code, steps
5 to be taken to assure the provision of medicines to enable
6 combat readiness and force health protection.

7 (b) REPORT TO CONGRESS.—Not later than one year
8 after the date of the enactment of this Act, the Secretary
9 of Defense, in consultation with the heads of other appro-
10 priate Federal departments and agencies, shall submit to
11 Congress a report on vulnerabilities to the United States
12 medicine supply chain. Such report shall include—

13 (1) an identification of any finished drugs and
14 their essential components including raw materials,
15 chemical components and active ingredients nec-
16 essary for the manufacture of medicines whose sup-
17 ply is at risk of disruption during a time of war or
18 national emergency;

19 (2) an identification of shortages of finished
20 drugs essential for combat readiness and force pro-
21 tection;

22 (3) an identification of the defense and geo-
23 political contingencies that are sufficiently likely to
24 arise that may disrupt, strain, compromise, or elimi-
25 nate supply chains of medicines and their essential

1 components and recommendations for reasonable
2 preparation for the occurrence of such contingencies;

3 (4) an assessment of the resilience and capacity
4 of the current supply chain and industrial base to
5 support national defense upon the occurrence of the
6 contingencies identified in paragraph (3), including
7 with respect to—

8 (A) the manufacturing capacity of the
9 United States;

10 (B) gaps in domestic manufacturing capa-
11 bilities including non-existent, extinct, threat-
12 ened, and single-point-of-failure capabilities;
13 and

14 (C) supply chains with single points of fail-
15 ure and limited resiliency;

16 (5) legislative, regulatory, and policy changes
17 necessary to avoid, or prepare for, contingencies
18 identified in the report; and

19 (6) recommendations to diversify supply away
20 from complete dependency on sources of supply in
21 competitor countries and politically unstable coun-
22 tries that may cut off United States supply, and ad-
23 dress critical bottlenecks and mitigate single points
24 of failure and limited resilience.

25 (c) PREFERENCE FOR MEDICINES.—

1 (1) IN GENERAL.—Except as provided in para-
2 graph (2) and under section 1107a(d) of title 10,
3 United States Code, the Secretary of Defense and
4 the Secretary of Veterans Affairs—

5 (A) may only acquire and purchase Amer-
6 ican-made and Federal Drug Administration
7 approved raw materials, medicines, and vaccines
8 for the Department of Defense; and

9 (B) shall use the authorities under the De-
10 fense Production Act to acquire and purchase
11 such raw materials, medicines, and vaccines,
12 recognizing the national security vulnerabilities
13 of a dependency on a foreign medical supply
14 chain.

15 (2) EXCEPTION.—Paragraph (1) does not apply
16 in any case where the Secretary of Defense deter-
17 mines that a shortage of any raw material, medicine,
18 or vaccine is such that it becomes unavoidable to ac-
19 quire such raw material, medicine, or vaccine from
20 a trusted foreign supplier.

21 (3) AMERICAN-MADE.—For purposes of this
22 subsection, the term “American-made” supplied
23 from, created, or supplied by the United States, in-

1 cluding any territory or possession of the United
2 States.

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