AMENDMENT TO H.R. 3525 OFFERED BY Ms. UNDERWOOD OF ILLINOIS

Strike all after the enacting clause and insert the following:

1	SECTION	1.	SHORT	TITLE.
---	---------	----	-------	--------

- This Act may be cited as the "U.S. Border Patrol
- 3 Medical Screening Standards Act".
- 4 SEC. 2. UNIFORM PROCESSES FOR MEDICAL SCREENING
- 5 OF INDIVIDUALS INTERDICTED BETWEEN
- 6 PORTS OF ENTRY.
- 7 (a) IN GENERAL.—Subtitle C of title IV of the
- 8 Homeland Security Act of 2002 (6 U.S.C. 231) is amend-
- 9 ed by adding at the end the following new section:
- 10 "SEC. 437. MEDICAL SCREENING OF INDIVIDUALS INTER-
- 11 DICTED BETWEEN PORTS OF ENTRY.
- 12 "(a) IN GENERAL.—To improve border security and
- 13 the processing of individuals and families interdicted by
- 14 the U.S. Border Patrol between ports of entry, the Com-
- 15 missioner of U.S. Customs and Border Protection, in co-
- 16 ordination with the Chief Medical Officer of the Depart-
- 17 ment, shall, not later than 30 days after the date of the
- 18 enactment of this section, establish uniform processes and
- 19 training to ensure consistent and efficient medical screen-

1	ing of all individuals so interdicted before transfer from	
2	U.S. Customs and Border Protection custody, but in no	
3	case longer than 12 hours of such interdiction.	
4	"(b) Screening Process Components.—At a min-	
5	imum, the uniform processes and training established	
6	under subsection (a) shall include the following:	
7	"(1) Requirements for initial screening that in-	
8	cludes documentation of the following:	
9	"(A) Visual assessment of overall physical	
10	and behavioral state, including any possible dis-	
11	ability.	
12	"(B) A brief medical history, including de-	
13	mographic information, current medications,	
14	and any chronic or past illnesses.	
15	"(C) Any current medical complaints.	
16	"(2) Criteria for determining when to make a	
17	referral to higher medical care and a process to exe-	
18	cute such referral.	
19	"(3) Recordkeeping requirements regarding how	
20	information is to be recorded for each initial screen-	
21	ing under paragraph (1), including information on	
22	the use of interpretation services.	
23	"(c) Training.—Not later than 60 days after the	
24	issuance of the uniform processes and training established	
25	under subsection (a), the Commissioner of U.S. Customs	

and Border Protection shall ensure that any individual carrying out medical screening under this section at a U.S. 3 Customs and Border Protection facility of individuals 4 interdicted by the U.S. Border Patrol between ports of 5 entry shall complete training on such uniform processes.". 6 (b) CLERICAL AMENDMENT.—The table of contents in section 1(b) of the Homeland Security Act of 2002 is 8 amended by inserting after the item relating to section 436 the following new item: "Sec. 437. Medical screening of individuals interdicted between ports of entry.". 10 SEC. 3. RESEARCH REGARDING PROVISION OF MEDICAL 11 SCREENING OF INDIVIDUALS INTERDICTED 12 BY U.S. CUSTOMS AND BORDER PROTECTION 13 BETWEEN PORTS OF ENTRY. 14 (a) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Secretary of Homeland Security, acting through the Under Secretary for 16 Science and Technology of the Department of Homeland 17 Security, in coordination with the Commissioner of U.S. 18 19 Customs and Border Protection and the Chief Medical Of-20 ficer of the Department, shall research innovative ap-21 proaches to address capability gaps regarding the provision of comprehensive medical screening of individuals, 22 particularly children, pregnant women, the elderly, and 23

other vulnerable populations, interdicted by U.S. Customs

and Border Protection between ports of entry and issue

25

1	to the Secretary recommendations for any necessary cor-			
2	rective actions.			
3	(b) Consultation.—In carrying out the research			
4	required under subsection (a), the Under Secretary for			
5	Science and Technology of the Department of Homeland			
6	Security shall consult with appropriate national profes-			
7	sional associations with expertise in emergency, nursing,			
8	and other medical care, including expertise in pediatric			
9	care.			
10	(c) Report.—The Secretary of Homeland Security			
11	shall submit to the Committee on Homeland Security of			
12	the House of Representatives and the Committee on			
13	Homeland Security and Governmental Affairs of the Sen-			
14	ate a report containing the recommendations referred to			
15	in subsection (a), together with information relating to			
16	what actions, if any, the Secretary plans to take in re-			
17	sponse to such recommendations.			
18	SEC. 4. ELECTRONIC HEALTH RECORDS INTEROPER-			
19	ABILITY ASSESSMENT AND IMPLEMENTA-			
20	TION PLAN.			
21	(a) Assessment.—			
22	(1) In general.—Not later than 120 days			
23	after the date of the enactment of this Act, the			
24	Chief Information Officer of the Department of			
25	Homeland Security, in consultation with the Chief			

1	Privacy Officer of the Department, shall submit to
2	the Secretary of Homeland Security an assessment
3	of the challenges to achieving interoperability of elec-
4	tronic health records, with appropriate privacy and
5	other safeguards, within the Department's informa-
6	tion technology systems of individuals who receive
7	medical screening after being interdicted by U.S.
8	Customs and Border protection between ports of
9	entry in accordance with section 437 of the Home-
10	land Security Act of 2002 (as added by section 2).
11	(2) Contents.—The assessment required
12	under paragraph (1) shall include information on
13	programmatic, policy, and operational options to
14	overcome challenges described in such assessment
15	and a cost and benefit analyses for each such option.
16	(b) Implementation Plan.—Not later than 120
17	days after receipt of the assessment required under sub-
18	section (a), the Secretary of Homeland Security shall sub-
19	mit to the Committee on Homeland Security of the House
20	of Representatives and the Committee on Homeland Secu-
21	rity and Governmental Affairs of the Senate an implemen-
22	tation plan, including benchmarks and metrics, for achiev-
23	ing the interoperability described in such subsection.

