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Leg[islative] Review - 6/99 - Pelosi Prevention Bill

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Tues

106TH CONGRESS
1ST SESSION

H. R. _____

IN THE HOUSE OF REPRESENTATIVES

Ms. PELOSI (for herself [**see attached list of cosponsors**]) introduced
the following bill; which was referred to the Committee on

A BILL

To amend the Public Health Service Act to promote activities
for the prevention of additional cases of infection with
the virus commonly known as HIV.

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

1 SECTION 1. SHORT TITLE.

2 This Act may be cited as the “Comprehensive HIV
3 Prevention Act of 1999”.

4 SEC. 2. TABLE OF CONTENTS.

5 The table of contents for this Act is as follows:

Sec. 1. Short title.

Sec. 2. Table of contents.

Sec. 3. Table of contents regarding revised title XXV of Public Health Service Act.

TITLE I—GENERAL PROGRAMS REGARDING PREVENTION OF HIV INFECTION

Sec. 101. Coordination among agencies of Public Health Service.

Sec. 102. Individual offices on HIV prevention.

Sec. 103. Programs of Centers for Disease Control and Prevention.

TITLE II—PREVENTIVE HEALTH PROGRAMS REGARDING WOMEN AND HIV INFECTION

Sec. 201. Short title.

Sec. 202. Amendment regarding Centers for Disease Control and Prevention.

Sec. 203. Amendments regarding other agencies.

TITLE III—GENERAL PROVISIONS

Sec. 301. General provisions of title XXV of Public Health Service Act.

Sec. 302. Effective date.

6 SEC. 3. TABLE OF CONTENTS REGARDING REVISED TITLE
7 XXV OF PUBLIC HEALTH SERVICE ACT.

8 A table describing the contents of title XXV of the
9 Public Health Service Act, as amended by titles I through
10 III of this Act, is as follows:

TITLE XXV—PREVENTION OF HIV INFECTION

PART A—COORDINATION AMONG AGENCIES OF PUBLIC HEALTH SERVICE

SUBPART I—PUBLIC HEALTH SERVICE GENERALLY

Sec. 2501. Duties of Secretary.

Sec. 2502. Advisory council.

Sec. 2503. Comprehensive plan for expenditure of appropriations.

Sec. 2504. Budget requests.

3

SUBPART II—INTRA-AGENCY COORDINATION

Sec. 2511. Individual offices on HIV prevention.

PART B—PROGRAMS OF CENTERS FOR DISEASE CONTROL AND PREVENTION

SUBPART I—CERTAIN AUTHORITIES

Sec. 2521. Administrator of programs.

SUBPART II—CERTAIN PROGRAMS

Sec. 2531. Epidemiology and surveillance.

Sec. 2532. Community-based projects regarding at-risk individuals.

SUBPART III—ADDITIONAL PROGRAMS

Sec. 2541. Public education.

Sec. 2542. Minority groups, adolescents, and other specific populations.

Sec. 2543. Research; demonstration projects.

Sec. 2544. General authority.

SUBPART IV—PROGRAMS REGARDING WOMEN

Sec. 2551. Preventive health services regarding women.

Sec. 2552. Public education regarding women.

SUBPART V—GENERAL PROVISIONS REGARDING CENTERS FOR DISEASE
CONTROL AND PREVENTION

Sec. 2561. Technical assistance; supplies and services in lieu of funds.

Sec. 2562. Requirements for States regarding partner counseling and referrals;
epidemiological activities.

PART C—GENERAL PROVISIONS

Sec. 2591. Definitions.

1 **TITLE I—GENERAL PROGRAMS**
2 **REGARDING PREVENTION OF**
3 **HIV INFECTION**

4 **SEC. 101. COORDINATION AMONG AGENCIES OF PUBLIC**
5 **HEALTH SERVICE.**

6 Title XXV of the Public Health Service Act (42
7 U.S.C. 300ee et seq.) is amended to read as follows:

1 **“TITLE XXV—PREVENTION OF**
2 **HIV INFECTION**

3 **“PART A—COORDINATION AMONG AGENCIES OF**
4 **PUBLIC HEALTH SERVICE**

5 **“Subpart I—Public Health Service Generally**

6 **“SEC. 2501. DUTIES OF SECRETARY.**

7 “(a) INTERAGENCY COORDINATION.—With respect to
8 activities for the prevention of infection with the human
9 immunodeficiency virus, the Secretary shall plan, coordi-
10 nate, and evaluate such activities that are conducted or
11 supported by the agencies and offices specified in sub-
12 section (b).

13 “(b) DESIGNATED AGENCIES.—The agencies and of-
14 fices referred to in subsection (a) are as follows:

15 “(1) The Centers for Disease Control and Pre-
16 vention.

17 “(2) The Agency for Health Care Policy and
18 Research.

19 “(3) The Health Resources and Services Ad-
20 ministration.

21 “(4) The Indian Health Service.

22 “(5) The National Institutes of Health.

23 “(6) The Office of Public Health and Science
24 (including the Office of the Surgeon General of the

1 Public Health Service and the Office of Minority
2 Health).

3 “(7) The Substance Abuse and Mental Health
4 Services Administration.

5 “(c) CONSULTATIONS.—The Secretary shall carry
6 out this part (including developing and revising the plans
7 required in section 2503) in consultation with the heads
8 of the designated agencies and with the advisory council
9 established under section 2502.

10 **“SEC. 2502. ADVISORY COUNCIL.**

11 “(a) IN GENERAL.—The Secretary shall establish an
12 advisory council to be known as the Secretary’s Advisory
13 Council on HIV Prevention (in this section referred to as
14 the ‘Advisory Council’). The Advisory Council shall make
15 recommendations to the Secretary on carrying out this
16 part, including recommendations on developing plans
17 under section 2503, and including reviewing and making
18 recommendations on such plans that have been developed.

19 “(b) COMPOSITION.—

20 “(1) IN GENERAL.—The Advisory Council shall
21 be composed of such individuals as the Secretary
22 may select, subject to paragraphs (2) and (3).

23 “(2) AGENCY REPRESENTATIVES.—The heads
24 of each of the designated agencies (or the designees

1 of such heads) shall serve as ex officio, nonvoting
2 members of the Advisory Council.

3 “(3) APPOINTED MEMBERS.—The Secretary
4 shall appoint to the Advisory Council individuals
5 who are not officers or employees of the Federal
6 Government, which individuals shall serve as voting
7 members of the Council. Of such individuals—

8 “(A) no fewer than one shall be an individ-
9 ual who conducts research on HIV prevention
10 activities;

11 “(B) no fewer than one shall be an expert
12 in specific health communications and social
13 marketing;

14 “(C) no fewer than one shall be a public
15 health official of a State;

16 “(D) no fewer than one shall be the chief
17 public health officer of a political subdivision;

18 “(E) no fewer than two shall be represent-
19 atives of community-based organizations that
20 carry out HIV prevention activities;

21 “(F) no fewer than two shall be individuals
22 with HIV infection;

23 “(G) no fewer than two shall be represent-
24 atives of individuals who are at significant risk
25 of contracting HIV infection;

1 “(H) no fewer than two shall be women;

2 “(I) no fewer than two shall be individuals
3 who are members of racial or ethnic minority
4 groups; and

5 “(J) no fewer than two shall be youths.

6 “(c) COORDINATION WITH ACTIVITIES OF PRESI-
7 DENTIAL ADVISORY COUNCIL.—The Advisory Council
8 shall coordinate its activities under subsection (a) with the
9 activities of the advisory council that advises the President
10 with respect to HIV prevention activities.

11 **“SEC. 2503. COMPREHENSIVE PLAN FOR EXPENDITURE OF**
12 **APPROPRIATIONS.**

13 “Subject to the provisions of this section and other
14 applicable law, the Secretary, in carrying out section 2501,
15 shall—

16 “(1) establish, for each designated agency, a
17 comprehensive plan for the conduct and support of
18 all HIV prevention activities of the agency (which
19 plan shall be first established under this paragraph
20 not later than 12 months after the date of the enact-
21 ment of the Comprehensive HIV Prevention Act of
22 1999);

23 “(2) ensure that each such plan establishes pri-
24 orities among the HIV prevention activities that the
25 agency involved is authorized to carry out;

1 “(3) ensure that each such plan establishes ob-
2 jectives regarding the HIV prevention activities of
3 the agency, describes the means for achieving the
4 objectives, and designates the date by which the ob-
5 jectives are expected to be achieved;

6 “(4) ensure that all amounts appropriated for
7 the HIV prevention activities of the agency are ex-
8 pended in accordance with the plan;

9 “(5) review the plan not less than annually, and
10 revise the plan as appropriate;

11 “(6) ensure that the plan serves as a broad,
12 binding statement of policies regarding HIV preven-
13 tion activities of the agency, but does not remove the
14 responsibility of the head of the agency for the ap-
15 proval of specific programs or projects, or for other
16 details of the daily administration of such activities,
17 in accordance with the plan; and

18 “(7) ensure that the plan is coordinated with
19 each other plan established under paragraph (1) in
20 order to form a single plan that integrates the HIV
21 prevention activities of the Public Health Service.

22 **“SEC. 2504. BUDGET REQUESTS.**

23 “(a) REQUESTS OF SECRETARY.—With respect to a
24 fiscal year, the Secretary shall prepare and submit directly
25 to the President, for review and transmittal to the Con-

gress, a budget request for carrying out each plan under section 2503 for the fiscal year, after reasonable opportunity for comment by the head of the designated agency for which the plan has been developed and by the advisory council established under section 2502. The budget estimate shall include an estimate of the number and type of personnel needs for the designated agencies.

“(b) REQUESTS OF DESIGNATED AGENCIES.—With respect to a fiscal year, the head of each designated agency shall, not later than the date specified by the Secretary, prepare and submit to the Secretary a proposed budget request for carrying out the plan under section 2503 that has been developed for the agency. The Secretary shall consider such request in carrying out subsection (a) with respect to the agency.”.

SEC. 102. INDIVIDUAL OFFICES ON HIV PREVENTION.

Title XXV of the Public Health Service Act, as amended by section 101 of this Act, is amended by adding at the end of part A the following subpart:

“Subpart II—Intra-Agency Coordination

“SEC. 2511. INDIVIDUAL OFFICES ON HIV PREVENTION.

“(a) IN GENERAL.—

“(1) ADMINISTRATION OF AUTHORITIES.—The Secretary shall carry out this section acting through the heads of the designated agencies.

1 “(2) INDIVIDUAL OFFICES.—With respect to
2 each designated agency other than the National In-
3 stitutes of Health, the head of the agency shall es-
4 tablish within the agency an office to carry out the
5 functions described in subsection (b). Such office
6 shall be headed by a director, who shall be appointed
7 by the head of the agency.

8 “(b) FUNCTIONS.—With respect to preparing and
9 submitting plans under section 2503, and with respect to
10 any other function established under subpart I for the
11 heads of designated agencies, the head of each such agen-
12 cy shall carry out the functions acting through the Direc-
13 tor of the office established under subsection (a) for the
14 agency (except that such functions of the Director of the
15 National Institutes of Health shall be carried out by such
16 Director acting through the Director of the Office of AIDS
17 Research established under section 2351).”.

18 **SEC. 103. PROGRAMS OF CENTERS FOR DISEASE CONTROL**
19 **AND PREVENTION.**

20 Title XXV of the Public Health Service Act, as
21 amended by section 102 of this Act, is amended by adding
22 at the end the following part:

1 **“PART B—PROGRAMS OF CENTERS FOR DISEASE**
2 **CONTROL AND PREVENTION**

3 **“Subpart I—Certain Authorities**

4 **“SEC. 2521. ADMINISTRATOR OF PROGRAMS.**

5 “This part shall be carried out by the Secretary act-
6 ing through the Director of the Centers for Disease Con-
7 trol and Prevention.

8 **“Subpart II—Certain Programs**

9 **“SEC. 2531. EPIDEMIOLOGY AND SURVEILLANCE.**

10 “(a) IN GENERAL.—The Secretary may conduct
11 studies and carry out other activities to assist public and
12 nonprofit private entities in obtaining epidemiological data
13 on the human immunodeficiency virus (including data on
14 acquired immune deficiency syndrome) and related mat-
15 ters. Such activities may include surveillance activities and
16 other relevant data-collection activities. Studies and other
17 activities under this subsection may be conducted by the
18 Secretary directly or through the provision of financial as-
19 sistance to health departments of States or of political
20 subdivisions.

21 “(b) MEETINGS.—For the purpose of improving pro-
22 grams that carry out HIV prevention activities, the Sec-
23 retary may hold meetings in order that States, political
24 subdivisions, the Centers for Disease Control and Preven-
25 tion, and other entities can exchange information and
26 ideas.

1 “(c) FUNDING.—For the purpose of carrying out this
2 section, there are authorized to be appropriated such sums
3 as may be necessary for each of the fiscal years 2000
4 through 2002.

5 **“SEC. 2532. COMMUNITY-BASED PROJECTS REGARDING AT-**
6 **RISK INDIVIDUALS.**

7 “(a) IN GENERAL.—The Secretary may provide fi-
8 nancial assistance to health departments of States and po-
9 litical subdivisions to operate projects for the purpose of
10 carrying out, in the communities of at-risk individuals,
11 HIV prevention activities to educate the individuals on the
12 transmission of the human immunodeficiency virus, in-
13 cluding activities to encourage the individuals—

14 “(1) to avoid the particular behaviors placing
15 the individuals at significant risk of contracting HIV
16 infection; and

17 “(2) to avoid the particular behaviors placing
18 the individuals at significant risk of transmitting
19 such infection to other individuals.

20 “(b) COMPREHENSIVE PLAN; CONSULTATIONS AND
21 COORDINATION REGARDING RELEVANT COMMUNITIES.—
22 A condition for the receipt of financial assistance under
23 subsection (a) is that the health department involved is
24 in compliance with the following:

1 “(1) The health department has developed a
2 comprehensive plan for carrying out a project under
3 such subsection.

4 “(2) In developing the plan (including with re-
5 spect to subsections (c) and (d)), the health depart-
6 ment collaborated with the HIV Community Plan-
7 ning Group operated under subsection (g) for the
8 project.

9 “(3) In developing the plan (including with re-
10 spect to subsections (c) and (d)), the health depart-
11 ment consulted with an appropriate number and va-
12 riety of public and nonprofit private entities (includ-
13 ing community-based organizations) that, in the
14 communities in which the project is to be carried
15 out—

16 “(A) provide health services, services for
17 disease prevention or health promotion, or so-
18 cial services to individuals with HIV infection
19 or at risk of such infection; or

20 “(B) represent individuals with such infec-
21 tion or at risk of such infection.

22 “(4) In developing the plan, the health depart-
23 ment consulted with entities in the geographic area
24 involved that have expertise regarding HIV commu-
25 nity-based prevention activities.

1 “(5) The health department has made arrange-
2 ments with entities described in paragraphs (3) and
3 (4) for the purpose of coordinating the activities of
4 the project with the activities of the entities.

5 “(6) The health department agrees that, in car-
6 rying out the project, the department will continue
7 to consult with such entities, and will provide for the
8 coordination of the activities of the entities.

9 “(c) IDENTIFICATION OF COMMUNITIES AND PRIOR-
10 ITIES; POPULATION-SPECIFIC STRATEGIES; ALLOCATION
11 OF ASSISTANCE.—A condition for the receipt of financial
12 assistance under subsection (a) is that the health depart-
13 ment involved is in compliance with the following:

14 “(1) The health department, on the basis of the
15 epidemiological and other assessments conducted
16 under subsection (e)—

17 “(A) has identified the geographic area in
18 which the project under such subsection is to be
19 carried out;

20 “(B) has identified the at-risk populations
21 that are to be given priority in the project, and
22 has identified the populations according to de-
23 mographic factors and according to such other
24 factors as the Secretary may authorize; and

1 “(C) has, for each such at-risk population,
2 developed a particular strategy for carrying out
3 HIV community-based prevention activities for
4 the population (including a specification of the
5 particular activities to be carried out).

6 “(2) In the case of each such at-risk popu-
7 lation, the strategy developed under paragraph
8 (1)(C) for the population consists of three compo-
9 nent strategies, and each component strategy is par-
10 ticular to one of the following subpopulations:

11 “(A) Individuals who do not have HIV in-
12 fection.

13 “(B) Individuals who do have such infec-
14 tion.

15 “(C) Individuals whose status regarding
16 such infection is unknown.

17 “(3) The plan under subsection (b)(1) provides
18 for the allocation of the financial assistance in a
19 manner that equitably reflects the need for HIV
20 community-based prevention activities in such at-
21 risk populations, as indicated by the assessments
22 conducted under subsection (e).

23 “(d) PROJECT OBJECTIVES.—A condition for the re-
24 ceipt of financial assistance under subsection (a) is that
25 the health department involved has, on the basis of the

1 epidemiological and other assessments conducted under
2 subsection (e)—

3 “(1) specified the objectives to be achieved
4 through the strategies identified under paragraphs
5 (1)(C) and (2) of subsection (c);

6 “(2) specified the date by which the objectives
7 are to be achieved; and

8 “(3) specified the manner in which the extent
9 of progress toward the objectives is to be measured.

10 “(e) EPIDEMIOLOGICAL ASSESSMENTS; OTHER AS-
11 SESSMENTS.—

12 “(1) EPIDEMIOLOGICAL ASSESSMENTS.—A con-
13 dition for the receipt of financial assistance under
14 subsection (a) is that, for purposes of subsections (c)
15 and (d), the following assessments have been con-
16 ducted:

17 “(A) An assessment of the current and fu-
18 ture incidence and prevalence of cases of HIV
19 infection in the general population, and in var-
20 ious subpopulations (identified according to the
21 factors specified in subsection (c)(1)(B)).

22 “(B) An assessment of the current and fu-
23 ture incidence and prevalence of cases of ac-
24 quired immune deficiency syndrome in the gen-

1 eral population, and in the subpopulations iden-
2 tified under subparagraph (A).

3 “(C) Such other epidemiologic assessments
4 regarding cases of HIV infection as the Sec-
5 retary may require with respect to projects
6 under subsection (a).

7 “(2) ASSESSMENTS REGARDING COMMUNITY
8 RESOURCES AND NEEDS.—A condition for the re-
9 ceipt of financial assistance under subsection (a) is
10 that, for purposes of subsections (c) and (d), the fol-
11 lowing assessments have been conducted:

12 “(A) An assessment of the resources avail-
13 able for carrying out HIV community-based
14 prevention activities in the communities in-
15 volved.

16 “(B) An assessment of the extent to which
17 such activities are being carried out in such
18 communities, and the extent of unmet needs for
19 the activities.

20 “(f) ADDITIONAL CONDITIONS.—Conditions for the
21 receipt of financial assistance under subsection (a) are
22 that the health department involved agree as follows:

23 “(1) That the project under such subsection
24 will seek out and offer HIV community-based pre-
25 vention activities to at-risk individuals.

1 “(2) That HIV community-based prevention ac-
2 tivities carried out through the project will be pro-
3 vided in the language and cultural context most ap-
4 propriate for the individuals served by the project.

5 “(3) That the health department will maintain
6 expenditures of non-Federal amounts for HIV pre-
7 vention activities of the health department at a level
8 that is not less than the level of such expenditures
9 maintained by the department for the fiscal year
10 preceeding the fiscal year for which the department
11 receives an award of such assistance.

12 “(g) HIV COMMUNITY PLANNING GROUP.—

13 “(1) IN GENERAL.—A condition for the receipt
14 of financial assistance under subsection (a) is that,
15 with respect to a project under such subsection, the
16 health department involved agree to operate in ac-
17 cordance with paragraphs (2) through (4) a panel of
18 individuals to be known as the HIV Community
19 Planning Group (in this subsection referred to as
20 the ‘Planning Group’). At the option of the State in
21 which the project will be carried out—

22 “(A) the Planning Group may be a local
23 group composed in accordance with paragraph
24 (3); or

1 “(B) the Planning Group may be a State-
2 wide group composed in accordance with para-
3 graph (4).

4 “(2) CERTAIN REQUIREMENTS.—For purposes
5 of paragraph (1), the Planning Group for a project
6 is operated in accordance with this paragraph
7 (whether a local group or a Statewide group) if the
8 following conditions are met:

9 “(A) The Group carries out functions in
10 the project in accordance with applicable guide-
11 lines, established by the Director of the Centers
12 for Disease Control and Prevention, for the op-
13 eration of projects for community planning with
14 respect to the prevention of HIV infection.

15 “(B) The Group includes—

16 “(i) individuals who represent wom-
17 en’s interests and have expertise on wom-
18 en’s health, including the treatment of
19 women who have HIV infection;

20 “(ii) no fewer than two individuals
21 who are members of racial or ethnic minor-
22 ity groups; and

23 “(iii) no fewer than two youths.

24 “(C) The Group allocates financial re-
25 sources to ensure that women, individuals who

1 are members of racial or ethnic minority groups,
2 and youths are included in the membership of
3 the Group.

4 “(D) In carrying out the functions of the
5 Group, qualitative data based on women’s expe-
6 riences are used.

7 “(E) The members of the Group are se-
8 lected in accordance with written criteria for
9 complying with the provisions of this subsection
10 that relate to the composition of the Group.

11 “(3) COMPOSITION FOR LOCAL PLANNING
12 GROUP.—For purposes of paragraph (1), in the case
13 of a State that elects to operate a Planning Group
14 that is a local group, the Planning Group is oper-
15 ated in accordance with this paragraph if the follow-
16 ing conditions are met:

17 “(A) The Group is composed of individuals
18 representing public and nonprofit private enti-
19 ties described in paragraphs (3) and (4) of sub-
20 section (b), individuals with HIV infection, and
21 individuals who are at significant risk of con-
22 tracting such infection.

23 “(B) The composition of the Group reflects
24 the composition of the population of individuals
25 who are significantly affected by the extent of

1 cases of HIV infection in the communities in
2 which the project under subsection (a) is to be
3 carried out.

4 “(C) Additional individuals are selected for
5 membership in the Group as necessary to main-
6 tain compliance with subparagraph (B).

7 “(D) The Group includes—

8 “(i) experts in epidemiology; and

9 “(ii) experts in behavioral and social
10 sciences, including experts on conducting
11 research on the evaluation of behavioral
12 and social sciences projects.

13 “(4) COMPOSITION FOR STATEWIDE PLANNING
14 GROUP.—For purposes of paragraph (1), in the case
15 of a State that elects to operate a Planning Group
16 that is a Statewide group, the Planning Group is op-
17 erated in accordance with this paragraph if the
18 Group includes representatives of the following enti-
19 ties:

20 “(A) State or local public health and edu-
21 cation agencies.

22 “(B) State or local agencies providing
23 treatment for substance abuse.

24 “(C) Private providers of such treatment.

1 “(D) State or local agencies that admin-
2 ister correctional facilities with respect to
3 crimes.

4 “(E) Experts in epidemiology.

5 “(F) Experts in behavioral and social
6 sciences, including experts on conducting re-
7 search on the evaluation of behavioral and so-
8 cial sciences projects.

9 “(G) Experts on the planning of commu-
10 nity projects.

11 “(H) Providers of mental health services.

12 “(I) Community-based organizations that
13 carry out activities or services relating to the
14 human immunodeficiency virus for a diverse
15 cross-section of individuals affected by HIV in-
16 fections in the communities in which projects
17 under subsection (a) are carried out, and that
18 have demonstrated ties to the geographic area
19 served by the project.

20 “(J) Individuals with HIV infection.

21 “(K) Communities with a significant num-
22 ber of at-risk individuals.

23 “(5) WAIVERS.—

24 “(A) IN GENERAL.—The Secretary may
25 waive the requirement of paragraph (1) if the

1 Secretary determines that the waiver is nec-
2 essary to provide for the effective operation of
3 the project involved.

4 “(B) COMPOSITION OF PLANNING
5 GROUP.—If a health department informs the
6 Secretary in writing that the health department
7 is unable to meet a requirement under this sub-
8 section regarding the composition of a Planning
9 Group, and the health department provides a
10 written explanation for such inability, the Sec-
11 retary may waive the requirement if the Sec-
12 retary determines that there is a reasonable
13 basis for such inability. In granting such a
14 waiver, the Secretary may establish an alter-
15 native requirement regarding the composition of
16 the Planning Group.

17 “(h) CERTAIN EXPENDITURES.—

18 “(1) COUNSELING, TESTING, AND OTHER AC-
19 TIVITIES.—In addition to expenditures authorized in
20 subsection (a), the Secretary may authorize the ex-
21 penditure of financial assistance under such sub-
22 section for the following purposes:

23 “(A) Counseling individuals on HIV infec-
24 tion.

1 “(B) Providing to individuals voluntary
2 testing for such infection, including tests to
3 confirm the presence of the infection, to diag-
4 nose the extent of the deficiency in the immune
5 system, and to provide information on appro-
6 priate therapeutic measures for preventing and
7 treating the deterioration of the immune system
8 and for preventing and treating conditions aris-
9 ing from such infection.

10 “(C) Providing appropriate referrals and
11 follow-up services for individuals who have un-
12 dergone such counseling or testing, including, in
13 the case of pregnant women, referrals for pre-
14 natal care.

15 “(D) Providing partner counseling and re-
16 ferral services with respect to HIV infection.

17 “(E) Such other activities as the Secretary
18 determines to be appropriate with respect to
19 HIV infection.

20 “(2) PREVENTION OF PERINATAL TRANS-
21 MISSION.—In the case of a pregnant woman, the
22 Secretary may, in addition to services under para-
23 graph (1), authorize the expenditure of financial as-
24 sistance under subsection (a) to provide such pre-

1 natal and neonatal services as are appropriate to
2 prevent the perinatal transmission of HIV.

3 “(3) VICTIMS OF SEX-RELATED CRIMES.—

4 “(A) IN GENERAL.—In addition to expend-
5 itures authorized in subsection (a), the Sec-
6 retary may authorize the expenditure of finan-
7 cial assistance under such subsection for carry-
8 ing out a program to provide services in accord-
9 ance with subparagraph (B) to any victim of a
10 crime in which by force or threat of force the
11 perpetrator compelled the victim to engage in
12 sexual activity and in which the circumstances
13 placed the victim at risk of contracting HIV in-
14 fection or any other sexually transmitted dis-
15 ease.

16 “(B) PROGRAM REQUIREMENTS.—A pro-
17 gram under subparagraph (A) for a victim of a
18 crime is in accordance with this subparagraph
19 if the following conditions are met:

20 “(i) The purpose of the program is to
21 make available to the victim counseling on
22 HIV infection and other sexually transmit-
23 ted diseases, appropriate referrals and fol-
24 low-up services, and services pursuant to
25 clause (iii).

1 “(ii) The purpose described in clause
2 (i) for the program is carried out without
3 regard to whether an alleged perpetrator of
4 the crime has been taken into the custody
5 of law enforcement officials, without regard
6 to whether the alleged perpetrator has
7 been tested for HIV infection, and without
8 regard to whether the victim has reported
9 the crime to law enforcement officials.

10 “(iii) The program is carried out in
11 accordance with any guidelines that may
12 be established by the Director of the Cen-
13 ters for Disease Control and Prevention
14 with respect to victims of crimes described
15 in subparagraph (A), including the provi-
16 sion by the program of such diagnostic and
17 treatment services as may be recommended
18 in the guidelines.

19 “(i) REQUIREMENTS REGARDING CONFIDENTIALITY,
20 INFORMED CONSENT, AND OTHER MATTERS.—

21 “(1) IN GENERAL.—A condition for the receipt
22 of financial assistance under subsection (a) is that
23 the health department involved agree that the provi-
24 sions specified in paragraph (2) apply to the award
25 of such assistance to the same extent and in the

1 same manner as such provisions apply to grants
2 under section 2651.

3 “(2) SPECIFICATION OF PROVISIONS.—The pro-
4 visions referred to in paragraph (1) are section
5 2661; subsections (a), (b), (c), (d), and (f) of section
6 2662; and subsections (b) and (c) of section 2664.

7 “(j) ASSISTANCE FOR PLANNING OF PROJECTS.—
8 The Secretary may provide financial assistance to the
9 health departments of States and political subdivisions for
10 the purpose of developing the comprehensive plans re-
11 quired in subsection (b)(1).

12 “(k) APPLICATION FOR ASSISTANCE; COMPREHEN-
13 SIVE PLAN.—A condition for the receipt of financial as-
14 sistance under subsection (a) or (j) is that an application
15 for the assistance meeting the following requirements (as
16 applicable) be submitted to the Secretary:

17 “(1) In the case of an application for assistance
18 under subsection (a):

19 “(A) The application contains the com-
20 prehensive plan required in subsection (b)(1).

21 “(B) The application—

22 “(i) demonstrates that the plan was
23 developed in accordance with subsection
24 (b) (relating to collaborating, consulting

1 and coordinating with the communities in-
2 volved);

3 “(ii) demonstrates that, in developing
4 the plan, the health department involved
5 made reasonable responses to the sugges-
6 tions of the HIV Community Planning
7 Group operated under subsection (g) for
8 the project; and

9 “(iii) specifies, for each provision of
10 the plan, whether such Group concurs with
11 the provision or does not concur with the
12 provision.

13 “(C) The application—

14 “(i) specifies (through inclusion in the
15 plan) the decisions made in compliance
16 with subsections (c) and (d) (relating to
17 priorities, strategies, and objectives);

18 “(ii) explains the basis of such deci-
19 sions;

20 “(iii) contains the assessments re-
21 quired in subsection (e);

22 “(iv) contains the criteria required in
23 subsection (g)(2)(E) (relating to the com-
24 position of HIV Community Planning
25 Groups); and

1 “(v) contains the agreements required
2 in this section.

3 “(2) In the case of an application for assistance
4 under subsection (a) or (j), the application is in such
5 form, is made in such manner, and contains such
6 agreements, assurances, and information as the Sec-
7 retary determines to be necessary to carry out the
8 purpose of the assistance involved.

9 “(l) MEETINGS.—For the purpose of improving the
10 program carried out under this section, the Secretary may
11 hold meetings in order that technical services organiza-
12 tions, States, political subdivisions, the Centers for Dis-
13 ease Control and Prevention, and other entities can ex-
14 change information and ideas.

15 “(m) DEFINITIONS.—For purposes of this section:

16 “(1) The term ‘at-risk behavior’ means any be-
17 havior that places an individual at significant risk of
18 contracting HIV infection or of transmitting such
19 infection to other individuals.

20 “(2) The term ‘at-risk individual’ means an in-
21 dividual who engages in at-risk behavior.

22 “(3) The term ‘HIV community-based preven-
23 tion activities’ means the HIV prevention activities
24 described in subsection (a).

1 “(n) AUTHORIZATION OF APPROPRIATIONS.—For the
2 purposes of carrying out this section, there are authorized
3 to be appropriated such sums as may be necessary for
4 each of the fiscal years 2000 through 2002.

5 **“Subpart III—Additional Programs**

6 **“SEC. 2541. PUBLIC EDUCATION.**

7 “(a) IN GENERAL.—The Secretary may, directly or
8 through the provision of financial assistance, carry out ac-
9 tivities to provide information and education to the public
10 on the human immunodeficiency virus.

11 “(b) AUTHORIZATION OF APPROPRIATIONS.—For the
12 purpose of carrying out this section, there are authorized
13 to be appropriated such sums as may be necessary for
14 each of the fiscal years 2000 through 2002.

15 **“SEC. 2542. MINORITY GROUPS, ADOLESCENTS, AND OTHER**
16 **SPECIFIC POPULATIONS.**

17 “(a) IN GENERAL.—The Secretary may, directly or
18 through the provision of financial assistance, carry out
19 HIV prevention activities with respect to specific popu-
20 lations identified by the Secretary.

21 “(b) MINORITY GROUPS.—In carrying out subsection
22 (a), the Secretary shall as appropriate carry out HIV pre-
23 vention activities with respect to racial and ethnic minority
24 groups.

25 “(c) ADOLESCENTS.—

1 “(1) IN GENERAL.—In carrying out subsection
2 (a), the Secretary shall carry out HIV prevention ac-
3 tivities with respect to adolescents.

4 “(2) SCHOOL-BASED PROGRAMS.—

5 “(A) In carrying out HIV prevention ac-
6 tivities with respect to adolescents, the Sec-
7 retary may assist elementary and secondary
8 schools and institutions of higher education in
9 operating programs to carry out such activities.

10 “(B)(i) The Secretary may under subpara-
11 graph (A) provide financial assistance to edu-
12 cation and health departments of States and
13 political subdivisions, and may provide such as-
14 sistance to other public or nonprofit private en-
15 tities.

16 “(ii) The Secretary may provide financial
17 assistance under clause (i) to an educational or
18 health department of a political subdivision only
19 after consultation with the educational or health
20 department of the State involved.

21 “(d) CONSULTATION WITH COMMUNITY GROUPS.—
22 In planning and carrying out activities under this section
23 for a geographic area, the Secretary shall consult with
24 public and nonprofit private entities in the area that have
25 functions relating to the activities, including any HIV

1 Community Planning Group that is operated under section
2 2532(g) for the area.

3 “(e) AUTHORIZATION OF APPROPRIATIONS.—For the
4 purpose of carrying out this section, there are authorized
5 to be appropriated such sums as may be necessary for
6 each of the fiscal years 2000 through 2002.

7 **“SEC. 2543. RESEARCH; DEMONSTRATION PROJECTS.**

8 “(a) IN GENERAL.—With respect to HIV prevention
9 activities, the Secretary may, directly or through the provi-
10 sion of financial assistance, conduct research and carry
11 out demonstration projects.

12 “(b) AUTHORIZATION OF APPROPRIATIONS.—For the
13 purpose of carrying out this section, there are authorized
14 to be appropriated such sums as may be necessary for
15 each of the fiscal years 2000 through 2002.

16 **“SEC. 2544. GENERAL AUTHORITY.**

17 “(a) IN GENERAL.—With respect to HIV prevention
18 activities, the Secretary may, directly or through the provi-
19 sion of financial assistance, carry out programs in addition
20 to the programs otherwise authorized in this part.

21 “(b) AUTHORIZATION OF APPROPRIATIONS.—For the
22 purpose of carrying out this section, there are authorized
23 to be appropriated such sums as may be necessary for
24 each of the fiscal years 2000 through 2002.”.

1 **TITLE II—PREVENTIVE HEALTH**
2 **PROGRAMS REGARDING**
3 **WOMEN AND HIV INFECTION**

4 **SEC. 201. SHORT TITLE.**

5 This title may be cited as the “Women and HIV Out-
6 reach and Prevention Act”.

7 **SEC. 202. AMENDMENT REGARDING CENTERS FOR DISEASE**
8 **CONTROL AND PREVENTION.**

9 Part B of title XXV of the Public Health Service Act,
10 as added by section 103 of this Act, is amended by adding
11 at the end the following subpart:

12 **“Subpart IV—Programs Regarding Women**

13 **“SEC. 2551. PREVENTIVE HEALTH SERVICES REGARDING**
14 **WOMEN.**

15 “(a) IN GENERAL.—The Secretary may make grants
16 for the following purposes:

17 “(1) Providing to women preventive health serv-
18 ices that are related to HIV infection, including—

19 “(A) providing prevention education on
20 HIV, including counseling on all modes of
21 transmission between individuals, including sex-
22 ual contact, the use of IV drugs, and maternal-
23 fetal transmission;

24 “(B) making available voluntary HIV test-
25 ing services to women;

1 “(C) providing effective and close linkages
2 between testing and care services for women;
3 and

4 “(D) providing services in accordance with
5 the program described in section 2532(j)(2) (re-
6 lating to victims of crimes in which by force or
7 threat of force the perpetrators compelled the
8 victims to engage in sexual activities).

9 “(2) Providing appropriate referrals regarding
10 the provision of other services to women who are re-
11 ceiving services pursuant to paragraph (1), includ-
12 ing, as appropriate, referrals regarding the follow-
13 ing: treatment for HIV infection; treatment for sub-
14 stance abuse; mental health services; pregnancy and
15 childbirth; pediatric care; housing services; public as-
16 sistance; job training; child care; respite care; repro-
17 ductive health care; and domestic violence.

18 “(3) Providing follow-up services regarding
19 such referrals, to the extent practicable.

20 “(4) Improving referral arrangements for pur-
21 poses of paragraph (2).

22 “(5) In the case of a woman receiving services
23 pursuant to any of paragraphs (1) through (3), pro-
24 viding to the partner of the woman the services de-
25 scribed in such paragraphs, as appropriate.

1 “(6) With respect to the services specified in
2 paragraphs (1) through (5)—

3 “(A) providing outreach services to inform
4 women of the availability of such services; and

5 “(B) providing training regarding the ef-
6 fective provision of such services.

7 “(b) MINIMUM QUALIFICATIONS OF GRANTEES.—

8 The Secretary may make a grant under subsection (a)
9 only if the applicant for the grant is a grantee under sec-
10 tion 318, 330, or section 1001, or is another public or
11 nonprofit private entity that provides health or voluntary
12 family planning services to a significant number of low-
13 income women in a culturally sensitive and language-ap-
14 propriate manner.

15 “(c) CONFIDENTIALITY.—The Secretary may make a
16 grant under subsection (a) only if the applicant for the
17 grant agrees to maintain the confidentiality of information
18 on individuals regarding screenings pursuant to subsection
19 (a), subject to complying with applicable law.

20 “(d) APPLICATION FOR GRANT.—The Secretary may
21 make a grant under subsection (a) only if an application
22 for the grant is submitted to the Secretary and the appli-
23 cation is in such form, is made in such manner, and con-
24 tains such agreements, assurances, and information as the

1 Secretary determines to be necessary to carry out such
2 subsection.

3 “(e) EVALUATIONS AND REPORTS.—

4 “(1) EVALUATIONS.—The Secretary shall, di-
5 rectly or through contracts with public or private en-
6 tities, provide for evaluations of projects carried out
7 pursuant to subsection (a).

8 “(2) REPORTS.—Not later than 1 year after the
9 date on which amounts are first appropriated under
10 subsection (f), and annually thereafter, the Sec-
11 retary shall submit to the Congress a report summa-
12 rizing evaluations carried out under paragraph (1)
13 during the preceding fiscal year.

14 “(f) AUTHORIZATIONS OF APPROPRIATIONS.—

15 “(1) TITLE X CLINICS.—For the purpose of
16 carrying out this section with respect to entities that
17 are grantees under section 1001, there are author-
18 ized to be appropriated such sums as may be nec-
19 essary for each of the fiscal years 2000 through
20 2002.

21 “(2) COMMUNITY AND MIGRANT HEALTH CEN-
22 TERS.—For the purpose of carrying out this section
23 with respect to entities that are grantees under sec-
24 tion 330, there are authorized to be appropriated

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1 such sums as may be necessary for each of the fiscal
2 years 2000 through 2002.

3 “(3) CLINICS REGARDING SEXUALLY TRANSMIT-
4 TED DISEASES.—For the purpose of carrying out
5 this section with respect to entities that are grantees
6 under section 318, there are authorized to be appro-
7 priated such sums as may be necessary for each of
8 the fiscal years 2000 through 2002.

9 “(4) OTHER PROVIDERS.—For the purpose of
10 carrying out this section with respect to entities de-
11 scribed in subsection (b) that are not grantees under
12 section 318, 330, or 1001, there are authorized to
13 be appropriated such sums as may be necessary for
14 each of the fiscal years 2000 through 2002.

15 **“SEC. 2552. PUBLIC EDUCATION REGARDING WOMEN.**

16 “(a) IN GENERAL.—The Secretary may make grants
17 for the purpose of developing and carrying out programs
18 to provide HIV prevention education to women, including
19 education on all modes of transmission between individ-
20 uals, including sexual contact, the use of IV drugs, and
21 maternal-fetal transmission.

22 “(b) MINIMUM QUALIFICATIONS OF GRANTEEES.—
23 The Secretary may make a grant under subsection (a)
24 only if the applicant involved is a public or nonprofit pri-
25 vate entity that is experienced in carrying out health-relat-

1 ed activities for women, with a priority given to such enti-
2 ties that have successfully targeted women of color.

3 “(c) APPLICATION FOR GRANT.—The Secretary may
4 make a grant under subsection (a) only if an application
5 for the grant is submitted to the Secretary and the appli-
6 cation is in such form, is made in such manner, and con-
7 tains such agreements, assurances, and information as the
8 Secretary determines to be necessary to carry out such
9 subsection.

10 “(d) EVALUATIONS AND REPORTS.—

11 “(1) EVALUATIONS.—The Secretary shall, di-
12 rectly or through contracts with public or private en-
13 tities, provide for evaluations of projects carried out
14 pursuant to subsection (a).

15 “(2) REPORTS.—Not later than 1 year after the
16 date on which amounts are first appropriated under
17 subsection (e), and annually thereafter, the Sec-
18 retary shall submit to the Congress a report summa-
19 rizing evaluations carried out under paragraph (1)
20 during the preceding fiscal year.

21 “(e) AUTHORIZATIONS OF APPROPRIATIONS.—For
22 the purpose of carrying out this section, there are author-
23 ized to be appropriated such sums as may be necessary
24 for each of the fiscal years 2000 through 2002.”.

1 **SEC. 203. AMENDMENTS REGARDING OTHER AGENCIES.**

2 (a) TREATMENT FOR SUBSTANCE ABUSE.—Subpart
3 1 of part B of title V of the Public Health Service Act
4 (42 U.S.C. 290bb et seq.) is amended by inserting after
5 section 509 the following section:

6 “TREATMENT OF WOMEN FOR SUBSTANCE ABUSE

7 “SEC. 509A. (a) IN GENERAL.—The Director of the
8 Center for Substance Abuse Treatment may make awards
9 of grants, cooperative agreements, and contracts for the
10 purpose of carrying out programs—

11 “(1) to provide treatment for substance abuse
12 to women, including but not limited to, women with
13 dependent children;

14 “(2) to provide to women who engage in such
15 abuse counseling on the prevention of infection with,
16 and the transmission of, the etiologic agent for ac-
17 quired immune deficiency syndrome; and

18 “(3) to provide such counseling to women who
19 are the partners of individuals who engage in such
20 abuse.

21 “(b) AUTHORIZATION OF APPROPRIATIONS.—For the
22 purpose of carrying out subsection (a), there are author-
23 ized to be appropriated such sums as may be necessary
24 for each of the fiscal years 2000 through 2002.”.

1 (b) EARLY INTERVENTION SERVICES.—Section 2655
2 of the Public Health Service Act (42 U.S.C. 300ff-55) is
3 amended—

4 (1) by striking “For the purpose of” and insert-
5 ing “(a) IN GENERAL.—For the purpose of”; and

6 (2) by adding at the end the following sub-
7 section:

8 “(b) PROGRAMS FOR WOMEN.—For the purpose of
9 making grants under section 2651 to provide to women
10 early intervention services described in such section, and
11 for the purpose of providing technical assistance under
12 section 2654(b) with respect to such grants, there are au-
13 thorized to be appropriated such sums as may be nec-
14 essary for each of the fiscal years 2000 through 2002.”.

15 **TITLE III—GENERAL** 16 **PROVISIONS**

17 **SEC. 301. GENERAL PROVISIONS OF TITLE XXV OF PUBLIC** 18 **HEALTH SERVICE ACT.**

19 Title XXV of the Public Health Service Act, as
20 amended by titles I and II of this Act, is amended—

21 (1) in part B, by adding at the end the follow-
22 ing subpart:

1 **“Subpart V—General Provisions Regarding Centers**
2 **for Disease Control and Prevention**

3 **“SEC. 2561. TECHNICAL ASSISTANCE; SUPPLIES AND SERV-**
4 **ICES IN LIEU OF FUNDS.**

5 “(a) TECHNICAL ASSISTANCE.—Subject to section
6 2562, the Secretary may provide training and technical
7 assistance to applicants for, and recipients of, financial as-
8 sistance under this part with respect to the planning, de-
9 velopment, and operation of activities under this part. The
10 Secretary may provide such training and technical assist-
11 ance directly or through awards of financial assistance.
12 Subject to section 2562, the Secretary shall provide such
13 training and technical assistance for projects under sec-
14 tion 2532.

15 “(b) SUPPLIES AND SERVICES.—

16 “(1) IN GENERAL.—Upon the request of a re-
17 cipient of an award under this part, the Secretary
18 may, subject to paragraph (2), provide supplies,
19 equipment, and services for the purpose of aiding
20 the recipient in carrying out the purpose of the
21 award, and for such purpose, may detail to the re-
22 cipient any officer or employee of the Department of
23 Health and Human Services.

24 “(2) CORRESPONDING REDUCTION IN PAY-
25 MENTS.—With respect to a request under paragraph
26 (1), the Secretary shall reduce the amount of pay-

1 ments under the award involved by an amount equal
2 to the costs of detailing personnel and the fair mar-
3 ket value of any supplies, equipment, or services pro-
4 vided by the Secretary. The Secretary shall, for the
5 payment of expenses incurred in complying with
6 such request, expend the amounts withheld.

7 **“SEC. 2562. REQUIREMENTS FOR STATES REGARDING**
8 **PARTNER COUNSELING AND REFERRALS; EP-**
9 **IDEMIOLOGICAL ACTIVITIES.**

10 “(a) IN GENERAL.—The Secretary may provide tech-
11 nical assistance under section 2561(a) to an entity with
12 respect to activities under this part only if the following
13 conditions are met:

14 “(1)(A) The State in which the activities will be
15 carried out certifies to the Secretary that the State
16 has completed the development of, or will by not
17 later than six months after the date of the enact-
18 ment of the Comprehensive HIV Prevention Act of
19 1999 complete the development of, a plan for carry-
20 ing out a program for partner counseling and refer-
21 ral with respect to HIV infection that is consistent
22 with the guidelines for such programs that were
23 issued by the Secretary of Health and Human Serv-
24 ices on December 30, 1998.

1 “(B) The plan for the program under subpara-
2 graph (A) provides that, with respect to the require-
3 ment that the State make a good faith effort to no-
4 tify a current or former spouse of an individual that
5 the individual has an HIV infection, the program is
6 permitted to take into account the risk to the indi-
7 vidual of violence on the part of the current or
8 former spouse, and the program is permitted to sus-
9 pend the requirement of notification until the safety
10 and well-being of the individual can be assured.

11 “(2) The State in which the activities will be
12 carried out certifies to the Secretary that the State
13 has completed the development of, or will by not
14 later than two years after the date of the enactment
15 of the Comprehensive HIV Prevention Act of 1999
16 complete the development of, a plan for carrying out
17 a program that, in accordance with such criteria as
18 the Secretary may establish, monitors the incidence
19 and prevalence of cases of HIV infection (in addition
20 to any program of the State that monitors the inci-
21 dence and prevalence of cases of acquired immune
22 deficiency syndrome).

23 “(b) CERTAIN CONSIDERATIONS REGARDING STATE
24 EPIDEMIOLOGICAL PROGRAM.—In establishing criteria
25 under subsection (a)(2)—

1 “(1) the Secretary shall take into account that
2 there are several different but viable types of pro-
3 grams for monitoring the incidence and prevalence
4 of cases of HIV infection, and shall accordingly re-
5 spect the decision of each State regarding the best
6 design and implementation of such a program in the
7 State;

8 “(2) the Secretary shall ensure that such pro-
9 grams of the States do not decrease the availability
10 of anonymous counseling, testing, and other services
11 regarding HIV; and

12 “(3) the Secretary shall take into account the
13 resources available to the States to carry out such
14 programs, including any financial assistance under
15 this part that is available to the States for such pur-
16 pose.

17 “(c) GRANTS TO STATES REGARDING PROGRAMS
18 FOR PARTNER COUNSELING AND REFERRAL.—

19 “(1) IN GENERAL.—The Secretary may make
20 grants to the States for the purpose of assisting the
21 States in developing and implementing the State
22 plans described in subsection (a)(1).

23 “(2) AUTHORIZATIONS OF APPROPRIATIONS.—
24 For the purpose of carrying out paragraph (1), there
25 are authorized to be appropriated such sums as may

1 be necessary for each of the fiscal years 2000
2 through 2002.”; and

3 (2) by adding at the end the following part:

4 **“PART C—GENERAL PROVISIONS**

5 **“SEC. 2591. DEFINITIONS.**

6 “For purposes of this title:

7 “(1) The term ‘designated agency’ means an
8 agency or office specified in section 2501(b).

9 “(2) The term ‘financial assistance’ means
10 grants, cooperative agreements, and contracts.

11 “(3) The term ‘human immunodeficiency virus’
12 means the etiologic agent for acquired immune defi-
13 ciency syndrome.

14 “(4) The term ‘HIV infection’ means infection
15 with the human immunodeficiency virus.

16 “(5) The term ‘HIV prevention activities’
17 means activities for the prevention of HIV infection,
18 including counseling individuals, educating the pub-
19 lic, and other appropriate activities. Such term in-
20 cludes research on the prevention of HIV infection.

21 “(6) The term ‘political subdivision’ means a
22 political subdivision of a State.”.

23 **SEC. 302. EFFECTIVE DATE.**

24 This Act takes effect October 1, 1999, or upon the
25 date of the enactment of this Act, whichever occurs later.