

“§ 15. Interagency Task Force on Patents

“(a) ESTABLISHMENT.—There is established an interagency task force, to be known as the Interagency Task Force on Patents (referred to in this section as the ‘task force’), to coordinate efforts between the Director and the Commissioner of Food and Drugs (referred to in this section as the ‘Commissioner’) regarding communication about, evaluation of, and effective implementation of the activities of the Office and the Food and Drug Administration with respect to patents, and decisions or actions involving patents (as defined in section 2(c)(6)(B)), for human drugs and biological products.

“(b) MEMORANDUM OF UNDERSTANDING.—The Director and the Commissioner shall enter into a memorandum of understanding, or update an existing memorandum of understanding, for the purposes of implementing and carrying out the duties of the task force.

“(c) MEMBERSHIP.—The task force shall be comprised of employees of the Office, who shall be appointed by the Director, and employees of the Food and Drug Administration, who shall be appointed by the Commissioner, who have appropriate expertise and decision-making authority regarding operational, administrative, technical, medical, pharmacological, clinical, and scientific matters to carry out the functions of the task force.

“(d) ACTIVITIES.—The task force shall carry out the following functions regarding interagency coordination to promote reciprocal access of information:

“(1) Sharing information on the general processes of the Office and the Food and Drug Administration, what each such agency considers in its respective review of applications, and how each such agency evaluates those applications, which may be undertaken through routine and ongoing meetings, workshops, and training sessions.

“(2) Sharing information on new approvals of patents, human drugs and biological products, new technologies and prior art (as appropriate on a case-by-case basis), and scientific trends and developments.

“(3) Establishing a process that requires—
“(A) the Director to request from the Commissioner (and the Commissioner to provide to the Director, upon receiving such a request)—

“(i) appropriate information for use by employees of the Office with responsibility to examine patent applications under section 131 (referred to in this section as ‘patent examiners’) regarding when certain information relating to a human drug or biological product approval, which may include updates to a label or newly approved indications, is made publicly available, including when such information is posted online; and

“(ii) appropriate access for patent examiners to relevant sources of product application, approval, patent, and labeling information or communications between the Food and Drug Administration and the prescription drug or biological product sponsors that may not currently be subject to public disclosure, as appropriate and only to the extent necessary for the Office to carry out the responsibilities of the Office, including ensuring accurate representations and the enforcement of the limitation on granting a patent because the claimed invention was on sale before the effective filing date of the claimed invention, as described in section 102(a)(1); and

“(B) the Office to assist the Food and Drug Administration in its ministerial role of listing appropriate and accurate descriptions of patents.

“(4) Establishing a process to ensure that, in appropriate circumstances, at the request

of the Director, the Commissioner shall consult with or otherwise furnish specific, available information to the Office with respect to certain applications, responses, or affidavits after rejections in order to assist patent examiners in carrying out the duties of those patent examiners.

“(e) RULE OF CONSTRUCTION.—Nothing in subsection (d)(3)(B) shall be construed as—

“(1) directing the Office to interfere with or delay the ministerial function of the Food and Drug Administration of listing patents; or

“(2) indicating the position of the Office regarding the ability to assert a patent in infringement litigation.

“(f) CONFIDENTIALITY.—

“(1) IN GENERAL.—The task force shall establish appropriate protocols to safeguard confidentiality and prevent the inappropriate disclosure of information when sharing information between the Office and the Food and Drug Administration.

“(2) POTENTIAL REMEDIES.—In establishing protocols under paragraph (1), the task force shall identify appropriate remedies for any potential injury suffered when confidential information is made available, including inadvertently, through the sharing of information described in that paragraph.”.

(b) TECHNICAL AND CONFORMING AMENDMENT.—The table of sections for chapter 1 of title 35, United States Code, is amended by adding at the end the following:

“15. Interagency Task Force on Patents.”.

(c) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office and the Commissioner of Food and Drugs such sums as may be necessary for the purposes of carrying out the functions of the Interagency Task Force on Patents established under section 15 of title 35, United States Code, as added by subsection (a).

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 682—DESIGNATING JUNE 15, 2022, AS “WORLD ELDER ABUSE AWARENESS DAY” AND THE MONTH OF JUNE AS “ELDER ABUSE AWARENESS MONTH”

Mr. GRASSLEY (for himself and Mr. BLUMENTHAL) submitted the following resolution; which was considered and agreed to:

S. RES. 682

Whereas, in 2021, approximately 53,000,000 residents of the United States, or about 1 in every 7 individuals, have attained the age of 65, and by 2060, 95,000,000 individuals in the United States will be over the age of 65 according to estimates by the Bureau of the Census;

Whereas elder abuse remains a challenging problem and can come in many different forms, often manifesting as physical, sexual, or psychological abuse, financial exploitation, neglect, and social media abuse;

Whereas elder abuse, neglect, and exploitation have no boundaries and cross all racial, social, class, gender, and geographic lines, according to the Elder Justice Coalition;

Whereas more than 1 in 10 individuals in the United States over the age of 60 have been subjected to abuse each year, with many such victims enduring abuse in multiple forms, according to the American Journal of Public Health;

Whereas most reported cases of abuse, neglect, and exploitation of older adults take place within private homes, and approximately 90 percent of the perpetrators in elder financial exploitation cases are family members or other trusted individuals, according to the National Adult Protective Services Association;

Whereas research suggests that elderly individuals in the United States who experience cognitive impairment, physical disabilities, or isolation are more likely to become the victims of abuse than those who do not experience cognitive impairment, physical disabilities, or isolation;

Whereas other risk factors for elder abuse can include low social support, poor physical health, and experience of previous traumatic events, according to the National Center on Elder Abuse;

Whereas close to half of elderly individuals who suffer from dementia will experience abuse during their lifetime, according to the Department of Justice;

Whereas only 1 in 24 cases of elder abuse is reported according to the New York State Office of Children and Family Services;

Whereas the Population Reference Bureau estimates that 1,900,000 elders will live in nursing homes by 2030;

Whereas, in a 2012 study conducted by Michigan State University, approximately 24 percent of the nursing home residents who participated in the study reported at least one incident of physical abuse by nursing home staff;

Whereas, on World Elder Abuse Awareness Day, the United States mourned the loss of elderly individuals who perished in nursing homes and other long-term care facilities during the COVID-19 pandemic;

Whereas the COVID-19 pandemic has led to the emergence of new scams against older adults, including those related to vaccines;

Whereas there has been an increase in hate crimes committed against older, Asian Americans during the COVID-19 pandemic;

Whereas, within the last 2 years, Congress passed and the President signed 2 measures that make nearly \$400,000,000 available for implementation of Elder Justice Act (42 U.S.C. 1395i-3a et seq.) initiatives, the largest funding stream related to such initiatives in the history of the Act; and

Whereas Congress, in passing the Elder Justice Act of 2009 (42 U.S.C. 1395i-3a et seq.), the Older Americans Act of 1965 (42 U.S.C. 3001 et seq.), the Elder Abuse Prevention and Prosecution Act (34 U.S.C. 21701 et seq.), the American Rescue Plan Act of 2021 (Public Law 117-2), and the Consolidated Appropriations Act, 2021 (Public Law 116-260), recognized the importance of protecting older people of the United States against abuse and exploitation: Now, therefore, be it

Resolved, That the Senate—

(1) designates June 15, 2022, as “World Elder Abuse Awareness Day” and the month of June as “Elder Abuse Awareness Month”;

(2) recognizes—

(A) judges, lawyers, adult protective services professionals, law enforcement officers, social workers, health care providers, advocates for victims, and other professionals and agencies for their efforts to advance awareness of elder abuse;

(B) the important work of the Elder Justice Coordinating Council, which has continued through the previous 2 Administrations and involves 15 different Federal agencies;

(C) the essential work done by adult protective services personnel, who regularly came to the assistance of victims, investigated reports of abuse, and actively prevented future victimization of older people in the United States, especially during the ongoing COVID-19 pandemic as the social isolation of elderly individuals due to stay-

at-home orders only increased the risk of abuse and neglect; and

(D) the importance of supporting State long-term care ombudsman programs, which help prevent elder abuse and neglect in nursing homes and other long-term care facilities, where infection prevention and control deficiencies pose persistent challenges;

(3) applauds the work of the Elder Justice Coalition, and its members, whose efforts to increase public awareness of elder abuse have the potential to increase the identification and reporting of this crime by the public, professionals, and victims, and can act as a catalyst to promote issue-based education and long-term prevention; and

(4) encourages—

(A) members of the public and professionals who work with older adults to act as catalysts to promote awareness and long-term prevention of elder abuse—

(i) by reaching out to local adult protective services agencies, State long-term care ombudsman programs, and the National Center on Elder Abuse; and

(ii) by learning to recognize, detect, report, and respond to elder abuse;

(B) private individuals and public agencies in the United States to continue work together at the Federal, State, and local levels to combat abuse, neglect, exploitation, crime, and violence against vulnerable adults, including vulnerable older adults, particularly in light of limited resources for vital protective services; and

(C) those Federal agencies with responsibility for preventing elder abuse to fully exercise such responsibilities to protect older adults, whether living in the community or in long-term care facilities.

SENATE RESOLUTION 683—SUPPORTING THE GOALS AND IDEALS OF WORLD SICKLE CELL AWARENESS DAY

Mr. BOOKER (for himself, Mr. BROWN, and Mr. VAN HOLLEN) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 683

Whereas sickle cell disease (referred to in this preamble a “SCD”) is a genetically inherited condition present at birth that involves a group of red blood cell disorders and is a major health problem in the United States and worldwide;

Whereas the 2022 theme of World Sickle Cell Awareness Day, “Shine the Light on Sickle Cell”, is an immediate call to action to improve the health and quality of life for individuals living with SCD and their families;

Whereas, in 1972, Dr. Charles Whitten established the Sickle Cell Disease Association of America, which is now headquartered in Hanover, Maryland, to improve research, education, and healthcare for SCD patients;

Whereas, in 1972, Congress passed the National Sickle Cell Anemia Control Act (Public Law 92-294; 86 Stat. 136), which provided authority to establish education, information, screening, testing, counseling, research, and treatment programs for SCD patients;

Whereas SCD is a genetic mutation that causes a single misspelling in the DNA instructions for hemoglobin, a protein that aids in carrying oxygen in the blood, which may result in chronic complications related to anemia, stroke, infections, organ failure, tissue damage, intense periods of pain referred to as vaso-occlusive crisis, and premature death;

Whereas sickle cell trait (referred to in this preamble as “SCT”) occurs when an individual inherits one copy of the sickle cell gene from one parent, and when both parents have SCT, there is a 25 percent chance that any of their children will have SCD;

Whereas there are an estimated 3,000,000 individuals with SCT in the United States, with many unaware of their status;

Whereas an estimated 100,000 individuals have SCD in the United States, with 1 out of 365 African-American births and 1 out of 16,300 Hispanic-American births resulting in SCD, and nearly 1 out of 13 African-American babies are born with SCT;

Whereas SCD affects millions of people throughout the world, especially individuals of genetic descent from sub-Saharan regions of Africa, South America, the Caribbean, Central America, Saudi Arabia, India, Turkey, Greece, and Italy;

Whereas the prevalence of SCT varies greatly by region, with rates as high as 40 percent in certain regions of sub-Saharan Africa, eastern Saudi Arabia, and central India;

Whereas, in many countries that are poor in resources, more than 90 percent of children with SCD do not live to see adulthood;

Whereas approximately 1,000 children in Africa are born with SCD each day, more than half of whom will die before their fifth birthday;

Whereas the high prevalence of SCD in the central and western regions of India results in approximately 20 percent of babies diagnosed with SCD dying before the age of 2;

Whereas, in 2006, the World Health Assembly passed a resolution, adopted by the United Nations in 2009, recognizing SCD as a public health priority with a call to action that each country implement measures to tackle the disease;

Whereas screening newborns for SCD is a crucial first step for families to obtain a timely diagnosis and comprehensive care and to decrease the mortality rate of children with SCD;

Whereas approved treatments for SCD are limited, with the Food and Drug Administration approving only 4 SCD therapies since 2017, but there are more than 40 SCD therapies in development;

Whereas there is an immediate need for lifesaving therapeutics that can improve the duration and quality of life of individuals with SCD;

Whereas, in 2020, the National Academies of Sciences, Engineering, and Medicine developed a comprehensive strategic plan and blueprint for action to address SCD, which highlights the need to develop new innovative therapies and to address barriers to the equitable access of approved treatments;

Whereas, in 2020, the Department of Health and Human Services, in partnership with the American Society of Hematology and the Sickle in Africa Consortium and in collaboration with the World Health Organization, hosted a webinar for a joint effort to strengthen efforts to combat SCD during the coronavirus disease (commonly known as “COVID-19”) pandemic and beyond;

Whereas the late Kwaku Obene-Frempong, M.D., Professor Emeritus of Pediatrics at the Perelman School of Medicine at the University of Pennsylvania, an American Society of Hematology member who served on the Global Coalition on SCD, has been a leader in advancing the body of knowledge in SCD research, public health, and medicine, and is recognized as immeasurably benefitting thousands of children worldwide;

Whereas there are emerging genetic therapy technologies, including gene editing, that can modify a patient's own hematopoietic stem cells to enable them to generate healthy red blood cells to prevent sickle cell crises;

Whereas while hematopoietic stem cell transplantation (commonly known as “HSCT”) is currently the only cure for SCD, and while advancements in treatment for complications associated with SCD have been made, more research is needed to find widely available and accessible treatments and cures to help individuals with SCD; and

Whereas, although June 19, 2022, has been designated as “World Sickle Cell Awareness Day” to increase public alertness across the United States and global community about SCD, there remains a continued need for empirical research, early detection screenings for SCD trait carriers, novel effective treatments leading to a cure, and preventative care programs with respect to complications from sickle cell anemia and conditions related to SCD: Now, therefore, be it

Resolved, That the Senate—

(1) supports the goals and ideals of World Sickle Cell Awareness Day;

(2) commits to ensuring equitable access to new sickle cell disease (referred to in this resolution as “SCD”) treatments by shining the light among all economic, racial, and ethnic groups to improve health outcomes for those living with SCD;

(3) calls on the Department of Health and Human Services to create global policy solutions aimed at providing support for the global community and the domestic resources needed to provide access to newborn screening programs, therapeutic interventions, and support services in partnership with local governments;

(4) supports eliminating barriers to equitable access for innovative SCD therapies, including cell, gene, and gene-editing therapies in the Medicare and Medicaid systems for the most vulnerable patients;

(5) encourages the people of the United States and the world to hold appropriate programs, events, and activities on Sickle Cell Awareness Day to raise public awareness of SCD traits, preventative care programs, treatments, and other patient services for those suffering from SCD, complications from SCD, and conditions related to SCD; and

(6) urges that the options to be considered to combat SCD not only address access to potential future curative treatments, but also address the bias that the population most affected by SCD continues to face within the United States and global healthcare systems.

AMENDMENTS SUBMITTED AND PROPOSED

SA 5098. Mr. CARPER (for Mr. PETERS) proposed an amendment to the bill S. 3309, to require SelectUSA to coordinate with State-level economic development organizations to increase foreign direct investment in semiconductor-related manufacturing and production.

TEXT OF AMENDMENTS

SA 5098. Mr. CARPER (for Mr. PETERS) proposed an amendment to the bill S. 3309, to require SelectUSA to coordinate with State-level economic development organizations to increase foreign direct investment in semiconductor-related manufacturing and production; as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the “Securing Semiconductor Supply Chains Act of 2022”.