AMENDMENT TO
RULES COMMITTEE PRINT 118–10
OFFERED BY MS. ADAMS OF NORTH CAROLINA

At the end of subtitle C of title VII, add the following new section:

SEC. 7. RECOMMENDATIONS BY DEFENSE HEALTH BOARD RELATING TO HEALTH EFFECTS UNIQUE TO WOMEN RESULTING FROM PFAS EXPOSURE.

(a) RECOMMENDATIONS.—The Defense Health Board shall submit to the Assistant Secretary of Defense for Health Affairs a report containing the recommendations of the Board to improve the approaches under the military health system with respect to the unique physiological, chromosomal, and hormonal reactions of women resulting from exposure to perfluoroalkyl substances or polyfluoroalkyl substances, recognizing the higher susceptibility of women to severe toxic exposure, particularly during pregnancy.

(b) MATTERS.—The recommendations developed under subsection (a) shall include the following:

(1) A determination as to how the Secretary of Defense should improve the care approaches under
the military health system for women affected by exposure to perfluoroalkyl substances or polyfluoroalkyl substances, taking into account gender-specific epidemiologies.

(2) An identification of the means by which the Secretary may increase clinician awareness regarding the differences in the effects of such exposure in women and increase clinician consideration of such exposure in making diagnoses and offering targeted testing.

(3) Specific recommendations as to how the Secretary may effectively educate maternity care providers on best practices for providing maternity care services for the unique needs of members of the Armed Forces serving on active duty who are women and who may have experienced such exposure, as well as on the increased risks for such women and the infants of such women, including—

   (A) pregnancy-induced hypertension (gestational hypertension and preeclampsia);

   (B) gestational diabetes;

   (C) fetal growth restriction;

   (D) childhood obesity;

   (E) miscarriages; and

   (F) stillbirths.
(4) An identification of means by which the Secretary may address the exacerbated risk for Black women who are members of the Armed Forces serving on active duty and who may have experienced such exposure, taking into account the racial disparities in maternal care, including—

(A) disparities in maternal mortality rate with respect to Black women, recognizing that such rate is three times higher for Black women; and

(B) disparities with respect to such other at-risk populations as the Defense Health Board considers appropriate.

(5) Specific recommendations to improve coordination of care between military medical treatment facilities and non-Department facilities, including recommendations to improve—

(A) health record interoperability; and

(B) training for the directors of military medical treatment facilities, the chiefs of staff of such facilities, maternity care coordinators, and the staff of relevant non-Department facilities.
(c) Submission to Congress.—Upon receiving the report under subsection (a), the Assistant Secretary of Defense for Health Affairs shall—

(1) submit such report to Congress; and

(2) make such report publicly available on a website of the Department.