AMENDMENT IN THE NATURE OF A SUBSTITUTE TO RULES COMMITTEE PRINT 117–61 OFFERED BY MRS. GREENE OF GEORGIA

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Justice for Vaccine Victims Act of 2022''.

SEC. 2. INVESTIGATION ON VACCINE ADVERSE EVENT REPORTING SYSTEM.

(a) IN GENERAL.—The Inspector General of the Department of Health and Human Services shall investigate the Vaccine Adverse Event Reporting System of the Centers for Disease Control and Prevention and Food and Drug Administration.

(b) REQUIRED QUESTIONS.—

(1) INDIVIDUALS.—

(A) In conducting the investigation under subsection (a), the Inspector General of the Department of Health and Human Services shall ask every individual who reported an adverse event to a COVID–19 vaccine at a minimum the following questions:

(i) Which COVID–19 vaccine did you receive?

(ii) Which vaccine did you receive as a booster shot?

(iii) Do you have any allergies or pre-existing conditions?

(iv) Was the adverse event mild, such as minor pain or swelling, or severe, such as leading to hospitalization, disability, or death?

(v) Can you describe in detail the symptoms of the adverse event?

(vi) In detail, can you describe any health problems you believe were caused by the adverse event?

(vii) Are you aware of any other individuals within your community who had a similar adverse event?

(viii) When receiving a vaccination did you notice anything suspicious regarding how the vaccination was administered?

(ix) How soon after the adverse event did you report it to the Vaccine Adverse Event Reporting System?

(x) Did you seek compensation for the adverse event through the Countermeasures Injury Compensation Program?

(xi) Would you be willing to testify under oath to a congressional committee?

(B) If an individual described in subparagraph (A) is deceased, the Inspector General of the Department of Health and Human Services shall ask one or more of the individual's immediate family members to answer (on the individual's behalf) the questions listed in subparagraph (A).

(2) MANUFACTURERS.—In conducting the investigation under subsection (a), the Inspector General of the Department of Health and Human Services shall ask each manufacturer of a COVID–19 vaccine that is distributed in the United States, at a minimum, the following questions and requests:

(A) What are the ingredients in your COVID–19 vaccine or vaccines distributed in the United States?

(B) Can you provide all information relating to your manufacturing methods and your data on the stability and safety of the product?

(C) What is the address of each of your locations involved in the manufacture of the vaccines?

(D) Did you include labeling of the vaccine or vaccines containing a specific statement describing how suspected adverse events can be reported?

(E) Can you provide substantive evidence you have followed all Food and Drug Administration guidance regarding product safety?

(F) How many adverse events did you report to the Vaccine Adverse Event Reporting System pursuant to section 2125 of the Public Health Service Act (42 U.S.C. 300aa–25) or other applicable law?

(G) Are you conducting your own internal review of any adverse events caused by the vaccine or vaccines?

(H) Are you ensuring that all public statements regarding vaccine safety are accurate?

(I) Are you limiting reporting data regarding adverse events?

(J) Would you be willing to direct representatives to testify under oath to a congressional committee?

(3) HEALTH CARE PROVIDERS.—In conducting the investigation under subsection (a), the Inspector General of the Department of Health and Human Services shall ask a representative sample of health care providers, at a minimum, the following questions:

(A) How many adverse events did you report to the Vaccine Adverse Event Reporting System pursuant to section 2125 of the Public Health Service Act (42 U.S.C. 300aa–25) or other applicable law?

(B) What kind of compensation does your facility receive for vaccine administration and from which source or sources?

(C) Is your facility keeping a record of any increase in hospitalization rates for individuals with adverse events following vaccination?

(D) How many severe adverse events has your facility encountered?

(E) How many mild adverse events has your facility encountered?

(F) Has your facility determined if adverse events are caused by an immune response to the vaccine?

(G) Is your facility keeping a record of any problems with vaccine administration?

(H) Is your facility keeping a record of all breakthrough cases of COVID–19 in fully vaccinated patients?

(I) Has your facility terminated any health care professionals who are opposed to vaccine mandates or who have raised questions regarding adverse events?

(J) Would you be willing to direct representatives of your facility to testify under oath to a congressional committee?

(c) REPORTS.—

(1) REPORT ON VAERS.—

(A) IN GENERAL.—Not later than 3 months after the date of enactment of this Act, the Inspector General of the Department of Health and Human Services shall—

(i) complete the investigation under subsection (a); and

(ii) publish a report on the results of such investigation.

(B) CONTENTS.—The report under subparagraph (A)(ii) shall include the following:

(i) A list of all reported COVID–19 vaccine related deaths and injuries in chronological order.

(ii) Transcripts of all interviews conducted by the Inspector General pursuant to this section with an individual described in subsection (b)(1), a manufacturer described in subsection (b)(2), or a health care provider described in subsection (b)(3).

(iii) A list of recommendations on how the Centers for Disease Control and Prevention and the Food and Drug Administration can strengthen the Vaccine Adverse Event Reporting System to be a more reliable method of obtaining information about adverse events.

(iv) A determination on whether the Centers for Disease Control and Prevention or the Food and Drug Administration is hiding data regarding adverse events.

(v) A determination on whether the Food and Drug Administration is suppressing data on the effectiveness of

monoclonal antibodies that are used to treat COVID–19.

(vi) Recommendations on further actions the Congress can take when conducting oversight regarding data collection by the Centers for Disease Control and Prevention and the Food and Drug Administration.

(vii) A determination on whether adverse events are common or rare following administration of a COVID–19 vaccine.

(viii) A determination of any causal relationship between any COVID–19 vaccine and specific adverse events using clinical, laboratory, or epidemiologic evidence.

(ix) A determination on whether adverse events are intrinsic to the COVID–19 vaccine (meaning provoked by the immune response caused by the vaccine) or related to faulty production or administration of the COVID–19 vaccine.

(2) REPORT ON INVESTIGATION.—

(A) IN GENERAL.—Not later than 6 months after publishing the report required by paragraph (1)(A)(ii), the Inspector General of

the Department of Health and Human Services shall submit to the relevant congressional committees a report on the implementation of this section.

(B) CONTENTS.—The report under subparagraph (A) shall—

(i) specify, of the amount authorized by subsection (c)(1) to be appropriated to carry out this section, the total amount obligated and expended; and

(ii) describe how such amount was used.

(d) SUBPOENA POWER.—The Inspector General of the Department of Health and Human Services may, pursuant to authorities vested in the Inspector General by other applicable law, issue subpoenas requiring the attendance and testimony of witnesses and the production of any evidence relating to any matter under investigation pursuant to this section.

(e) AUTHORIZATION OF APPROPRIATIONS.—

(1) IN GENERAL.—To carry out this section, there is authorized to be appropriated $100,000,000 for the period beginning on the date of enactment of this Act and ending on the date of submission of the report required by subsection (b)(2).

(2) OFFSET.—

(A) REPEAL OF DEDUCTION FOR CERTAIN STATE AND LOCAL, ETC., TAXES OF INDIVIDUALS.—Section 164(b)(6) of the Internal Revenue Code of 1986 is amended by—

(i) striking ''and before January 1, 2026—'' and all that follows through ''a separate return).'' and inserting ''paragraphs (1), (2), and (3) of subsection (a) and paragraph (5) of this subsection shall not apply.''; and

(ii) by striking ''FOR TAXABLE YEARS 2018 THROUGH 2025'' in the heading thereof.

(B) EFFECTIVE DATE.—The amendments made by this paragraph shall apply to taxable years beginning after the date of the enactment of this Act.

SEC. 3. TERMINATION OF COVID–19 PUBLIC HEALTH EMERGENCY DECLARATION UNDER PUBLIC READINESS AND EMERGENCY PREPAREDNESS (PREP) ACT.

(a) IN GENERAL.—The Secretary of Health and Human Services shall—

(1) not later than 3 months after the date of enactment of this Act, terminate the public health emergency declaration issued in connection with COVID–19 pursuant to section 319F–3 of the Public Health Service Act (42 U.S.C. 247d–6d); and

(2) not reissue any such declaration or any substantially similar declaration.

(b) CORRESPONDING TERMINATION OF LIABILITY PROTECTION.—No immunity from suit and liability under section 319F–3 of the Public Health Service Act (42 U.S.C. 247d–6d) shall apply with respect to the administration to or the use by an individual of a covered countermeasure if—

(1) the immunity relies on a declaration described in subsection (a); and

(2) the administration or use occurs after such declaration is terminated,

except that the Secretary of Health and Human Services, pursuant to section 319F–3(b)(3)(B) of such Act (42 U.S.C. 247d–6d(b)(3)(B)), shall specify an additional immunity period of 3 months for the manufacturer to arrange for disposition of the covered countermeasure and for covered persons to take such other actions as may be appropriate to limit administration or use of the covered

countermeasure, as described in clauses (i) and (ii) of such section 319F–3(b)(3)(B).

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