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(Original Signature of Member)

116TH CONGRESS  
2D SESSION

**H. R.** \_\_\_\_\_

To require a longitudinal study on the impact of COVID–19.

\_\_\_\_\_  
IN THE HOUSE OF REPRESENTATIVES

Ms. ESHOO introduced the following bill; which was referred to the Committee  
on \_\_\_\_\_  
\_\_\_\_\_

## **A BILL**

To require a longitudinal study on the impact of COVID–  
19.

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

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Ensuring Under-  
5       standing of COVID–19 to Protect Public Health Act”.

6       **SEC. 2. STUDY ON THE IMPACT OF COVID–19.**

7       Part A of title IV of the Public Health Service Act  
8       (42 U.S.C. 281 et seq.) is amended by adding at the end  
9       the following:

1   **“SEC. 4040. STUDY ON THE IMPACT OF COVID-19.**

2           “(a) IN GENERAL.—The Director of NIH, in con-  
3   sultation with the Director of the Centers for Disease Con-  
4   trol and Prevention, shall conduct a longitudinal study,  
5   over not less than 10 years, on the full impact of COVID-  
6   19 on infected individuals, including both short-term and  
7   long-term health impacts.

8           “(b) TIMING.—The Director of NIH shall begin en-  
9   rolling patients in the study under this section not later  
10   than 6 months after the date of enactment of this section.

11          “(c) REQUIREMENTS.—The study under this section  
12   shall—

13                  “(1) be nationwide;

14                  “(2) include diversity of enrollees to account for  
15   gender, age, race, ethnicity, geography,  
16   comorbidities, and underrepresented populations, in-  
17   cluding pregnant and lactating women;

18                  “(3) study individuals who were infected with  
19   COVID-19 who experienced mild symptoms, such  
20   individuals who experienced moderate symptoms,  
21   and such individuals who experienced severe symp-  
22   toms;

23                  “(4) monitor the health outcomes and symp-  
24   toms of individuals who were infected with COVID-  
25   19, or had prenatal exposure to COVID-19, includ-  
26   ing lung capacity and function, and immune re-

1        sponse, taking into account any pharmaceutical  
2        interventions such individuals may have received;

3            “(5) monitor the mental health outcomes of in-  
4        dividuals infected with COVID–19, taking into ac-  
5        count any interventions that affected mental health;  
6        and

7            “(6) monitor individuals enrolled in the study  
8        not less frequently than twice per year after the first  
9        year of the individual’s infection with COVID–19.

10        “(d) PUBLIC-PRIVATE RESEARCH NETWORK.—For  
11        purposes of carrying out the study under this section, the  
12        Director of NIH may develop a network of public-private  
13        research partners, provided that all research, including the  
14        research carried out through any such partner, is available  
15        publicly.

16        “(e) SUMMARIES OF FINDINGS.—The Director of  
17        NIH shall make public a summary of findings under this  
18        section not less frequently than once every 3 months for  
19        the first 2 years of the study, and not less frequently than  
20        every 6 months thereafter. Such summaries may include  
21        information about how the findings of the study under this  
22        section compare with findings from research conducted  
23        abroad.

1       “(f) AUTHORIZATION OF APPROPRIATIONS.—There  
2 are authorized to be appropriated such sums as may be  
3 necessary to carry out this section.”.