After over 24 hours of continuous deliberation on the Senate floor, the *Inflation Reduction Act of 2022*, a highly debated budget reconciliation bill focused on deficit reduction, combatting climate change, and drug pricing, was passed on Sunday, with Vice President Harris breaking the 50-50 vote that fell along party lines. The House is now expected to be called back during the August recess period to vote on the bill, which if passed, will then be signed into law by President Biden. When Congress returns to session in September, members must race to address remaining legislative priorities before they return to their home districts to prepare for the midterm elections in November. The outcomes of those elections will shape the legislative action taken in the time before new members are sworn in.

*The University of Minnesota Washington Update provides intelligence and analysis on recent federal activities. Faculty visiting Washington, D.C. are encouraged to contact Sarah Neimeyer, Director of Government Relations, at neimeyer@umn.edu. Contact Christina Laridaen, Lewis-Burke Associates LLC, at christina@lewis-burke.com with any questions or comments related to the Update’s content.*

### Appropriations, Policy Updates and Funding, Engagement Opportunities

#### Appropriations Update: Senate Appropriations Committee Releases FY 2023 State, Foreign Operations, and Related Programs Funding Bill

On July 28, the Senate Appropriations Committee released their fiscal year (FY) 2023 State, Foreign Operations, and Related Programs bill, which funds the Department of State (DOS), the United States Agency for International Development (USAID), and other international programs and activities. In total, the bill would provide $64.6 billion, $6.56 billion or 15 percent above the FY 2022 enacted level, $1.7 billion or 2.7 percent below the President’s budget request, and $15 million below the House bill.

Like the House bill, the Senate proposes increased funding across most program areas compared to the FY 2022 enacted level, with global health programming, pandemic preparedness, and climate change receiving the most significant increases, along with funding to support humanitarian assistance in response to the war in Ukraine. The Senate requests funds for workforce investments that promote diversity, equity, and inclusion, throughout DOS and USAID staff, as well as guidance to the Secretary of State and USAID Administrator to diversify the diplomatic and development workforce. The bill also includes language that codifies the reversal
of the Mexico City Policy[1], and report language that that calls upon the Secretary of State to ensure that all research and development supported by the Act is “protected against interference and misappropriation” by the People’s Republic of China.

While the Senate Appropriations Committee has not made any official announcements, the Senate is likely to move straight to conferencing their draft bills with the House later this fall. Due to the midterm elections taking place this November, it is likely that there will be a continuing resolution to fund the government at FY 2022 levels through at least early December.

Specific proposed funding measures of interest to the higher education and research community include the following:

- **$781.5 million for educational and cultural exchange programs**, $28.5 million or 2.6 percent above the FY 2022 enacted level, 40.2 million or 4.1 percent above the budget request, and $8.5 million or 1.1 percent above the House proposed level. This includes directives to the Bureau for Education and Cultural Affairs to continue to develop partnerships with Historically Black Colleges and Universities (HBCUs) and Minority-Serving Institutions (MSIs). Additionally, the Committee recommends funding above FY 2022 levels for the Fulbright HBCU Institutional Leaders Initiative and the Increase and Diversify Education Abroad for U.S. Students (IDEAS) program, as well as expanding participation of disadvantaged groups in exchange programs, including minorities and individuals from rural areas.

- **$10.5 billion for global health programming**, $679.5 million or 11.7 percent above the FY 2022 enacted level, $66.5 million or 3.8 percent below the President’s budget request, and $467 million or 4.4 percent below the FY 2023 House level. The Committee proposed significant increases across most global health program areas, with global security and family planning and reproductive health to receive the biggest increases relative to FY 2022 enacted levels. In addition to increasing U.S. contributions to various multilateral global health efforts, the Committee directs USAID to support global health-related research and development across its program portfolio to introduce new global health technologies including diagnostics, therapeutics, vaccines, and devices. Specific research and development topics highlighted in the report are similar to those in the House bill, including addressing antibiotic resistance; vaccine development for malaria and HIV/AIDS; diagnostics, treatment, and vaccines for tuberculosis; and therapeutics and vaccines for neglected tropical diseases, including leprosy.

- **$1 billion for food security and agriculture development programs**. Of this amount, the Committee recommends $65 million for the Bureau for Resilience and Food Security’s Feed the Future (FtF) Innovation Labs, a $7 million or 12.7 percent increase relative to the FY 2022 enacted level and equivalent to the amount proposed in the House bill. With these funds, the Committee urges USAID to establish a new FtF Innovation Lab focused on crop improvement research, and to continue collaborations with land-grant universities to assist developing countries increase food production. The bill also would support the administration to establish a new, multilateral Global Food Security Partnership Fund which would coordinate efforts to respond to food insecurity and enable developing countries to be more resilient.

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[1] The bill includes language to repeal the Mexico City Policy, which when in effect prevented foreign NGOs or other institutions that receive U.S. funding from providing abortion or family planning services, even if using funds from other sources.
• $140.8 million for the Bureau for Development, Democracy, and Innovation (DDI) programming, a $15.5 million or 11 percent increase over FY 2022 enacted levels, and $45 million for the Development Innovation Ventures Program, a $15 million or 50 percent increase above FY 2022 enacted levels and a $5 million or 12.5 percent increase relative to the House proposal. The Senate bill, like the House, does not mention USAID’s funding for the Higher Education Solutions Network (HESN), the USAID program that supports research, testing, translation, and convening to develop solutions to development challenges involving universities and other scientific institutions.

• Over $4 billion to support climate change and other environment programming, which includes support for both bilateral programming at DOS and USAID as well as U.S. contributions to multilateral institutions. $2.15 billion would support U.S. contributions to multilateral institutions, and remaining funds, which will not be solely research-focused but could involve research components, include:
  o $450 million for biodiversity programming, $35 million more than the FY 2022 enacted level and $241.7 million above the President’s budget request;
  o $300 million for sustainable landscapes, $115 million above the FY 2022 enacted level;
  o $425 million for renewable energy programs $165 million above the FY 2022 enacted level;
  o $650 for bilateral and multilateral adaptation programming, $380 above the FY 2022 enacted level.

### U.S Department of State & U.S Agency for International Development

(In thousands)

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<th>FY 2023 Senate</th>
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<td>7,000 (12.1%)</td>
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**Sources and additional information:**

Policy Update: CMS Issues Hospital Inpatient Prospective Payment System Final Rule

The Centers for Medicare and Medicaid Services (CMS) issued the fiscal year (FY) 2023 Medicare Hospital Inpatient Prospective Payment (IPPS), and Long-Term Care Hospital (LTCH) Prospective Payment System final rule. Hospitals paid under the IPPS will receive a 4.3 percent update. The final rule provides a 4.1 percent market basket update, with 0.3 percent productivity adjustment and 0.5 percent increase. With the regard to the 0.5 percent increase, section 15005 of the 21st Century Cures Act reduced the statutorily set 0.5 percent update to 0.4588 percent, however, the agency is following the policy set by the Medicare Access and CHIP Reauthorization Act (MACRA), and providing a 0.5 percent positive adjustment. Below are key highlights from the rule.

Graduate Medical Education
CMS is making two changes to Graduate Medical Education (GME) policy in the final rule. In the case of Milton S. Hershey Medical Center, et al. v. Becerra (Hershey), the U.S. District Court for the District of Columbia ruled that CMS improperly modified statutory weighting factors assigned to residents and fellows. In interpreting the opinion, CMS will implement a modified policy to be applied prospectively for all teaching hospitals, as well as retroactively to the providers for the cost years in Hershey and certain other providers. The policy in the final rule will address situations when a hospital’s weighted full-time employee (FTE) count is greater than its FTE cap but will not reduce the weighting factor of residents that are beyond their initial residency period to an amount less than 0.5 employees.

Birthing-Friendly Hospital Designation
The final rule creates a new hospital designation to be known as “Birthing-Friendly” hospitals. The public designation will be awarded to hospitals that can attest to meeting the Maternal Morbidity Structural Measure. The designation also follows Vice President Harris’ “Maternal Health Day of Action” announcement.

PPS-Exempt Cancer Hospital Quality Reporting Program
The PPS-Exempt Cancer Hospital Quality Reporting Program (PCHQR) is a voluntary quality program established as part of the Affordable Care Act and applies to PPS-exempt cancer hospitals. Through the final rule, CMS is planning to begin making public the 30-Day measure for unplanned readmissions for cancer patients, four end-of-life measures, and is adopting a patient safety exemption into the measure removal policy. The agency is also acknowledging comments they received for the proposed rule on the potential adoption of two digital National Healthcare Safety Network (NHSN) measures, the C. diff infection outcome measure and the hospital-onset bacteremia and fungemia (HOB) outcome measure.

Hospital Acquired Condition Reduction Program
Given the ongoing public health emergency due to the COVID-19 pandemic, CMS will pause and likely refine several measures in the Hospital Readmissions Reduction Program (HRRP), Hospital-Acquired Condition (HAC) Reduction Program, and Hospital Value-Based Purchasing (VBP) Program. The policy in the final rule recognizes that the programs cannot adequately function as designed to penalize or reward hospitals during the public health emergency.
Health Equity
The final rule adopts multiple health equity focused measures in the Hospital Inpatient Quality Reporting Program (IQR). The IQR was originally established in the Medicare Prescription Drug, Improvement, and Modernization Act and was designed to pay hospitals that successfully report designated quality measures a higher annual update, and a reduction in payment for hospitals that do not successfully report. The Affordable Care Act amended the statute by reducing by one-quarter point the annual payment rate update if all IQR requirements are not met. The final rule is adopting 10 IQR updates, which include measuring a hospital’s commitment to establishing a culture of equity, delivering more equitable health care by capturing concrete activities that include strategic planning, data collection, data analysis, quality improvement, and leadership engagement. CMS also adopting a Screening for Social Drivers of Health measure, which will assess the percent of patients admitted to the hospital who are 18 years or older at time of admission and are screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety.

Medicare DSH Payments
Under the final rule CMS projects Medicare disproportionate share hospital (DSH) payments and Medicare uncompensated care payments combined will decrease in FY 2023 by approximately $300 million. CMS is updating three factors used to determine uncompensated care payments for FY 2023. The three factors include:

- **Factor 1** - 75% of the total amount of DSH payments that would otherwise made under section 1886(d)(5)(F) of the Social Security Act.
- **Factor 2** - 1 minus the percent change in the percent of individuals who are uninsured (minus 0.2 percentage point for FYs 2018 and 2019). For FY 2020 and after, there is no additional reduction.
- **Factor 3** - The hospital’s uncompensated care amount relative to the uncompensated care amount for all DSH hospitals expressed as a percentage.

The final rule will continue using uninsured estimates produced by the Office of the Actuary as part of the development of the National Health Expenditure Accounts (NHEA) in conjunction with more recently available data in the calculation of Factor 2. For FY 2023, CMS will use the two most recent years of audited data on uncompensated care costs from Worksheet S–10 of the FY 2018 and FY 2019 cost reports to calculate Factor 3 in the payment methodology for uncompensated care payments. For FY 2024 and subsequent fiscal years, CMS will use a three-year average of the data on uncompensated care costs from Worksheet S-10 for the three most recent fiscal years for which audited data is available.

Sources and additional information:

Funding Opportunity: ED Announces NIA for Basic Needs for Postsecondary Students Program
The Office of Postsecondary Education (OPE), within the Department of Education (ED), published a notice inviting applications (NIA) for the Basic Needs for Postsecondary Students Program. The program provides grants to eligible institutions of higher education (IHEs), specifically community colleges, Historically Black Colleges and Universities, and other Minority Serving Institutions (MSIs), to develop or enhance approaches used to support the basic needs of students.
ED notes that supporting students’ basic needs can improve academic performance, promote retention and degree completion, and create bridges between institutions and community organizations. This program has two absolute priorities and one competitive preference priority:

- **Absolute Priority 1:** *Strengthening Cross-Agency Coordination and Community Engagement to Advance Systemic Change*. Projects must address one or more of the following priority areas:
  - “Coordinating efforts with Federal, State, or local agencies, or community-based organizations, that support students, to address two or more of the following
    - Food Assistance;
    - Housing;
    - Transportation;
    - Health (physical, mental, and behavioral);
    - Childcare; and
    - Technology (including community and cross-agency technology).
  - Conducting community needs and asset mapping to identify existing programs and initiatives that can be leveraged, and new programs and initiatives that need to be developed and implemented, to advance systemic change.
  - Establishing cross-agency partnerships, or community-based partnerships with local nonprofit organizations, businesses, philanthropic organizations, or others, to meet family well-being needs.”

- **Absolute Priority 2:** *Promoting Equity in Student Access to Educational Resources and Opportunities*. The project must be implemented by one or more of the following: community colleges, HBCUs, Tribal colleges and universities, and other MSIs as defined by ED.

- **Competitive Preference Priority 1:** *Meeting Student Social, Emotional, and Academic Needs*. Projects are encouraged to have a focus on creating a positive, inclusive environment that helps improve students’ social, emotional, academic, and career development.

**Total Funding and Award Size:** ED estimates they will grant eight awards which will range between $750,000 to $950,000 in funding with a project period of no more than 36 months. No cost sharing is required for this competition.

**Due Dates:** The deadline for transmittal of applications is **October 3, 2022**. Applicants are highly encouraged to notify the Department of their intent to apply to the program and should email Njeri Clark at njeri.clark@ed.gov with the subject line “Intent to Apply” to do so.

**Sources and additional information:**

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**Funding Opportunity: DARPA MTO Releases Next Generation Microelectronics Manufacturing Center Planning Call**
The Defense Advanced Research Projects Agency (DARPA) Microsystems Technology Office (MTO) announced it is seeking Phase 0 planning proposals as part of its Next Generation Microelectronics Manufacturing (NGMM) program. NGMM will eventually stand up a domestic research and development center for producing 3-dimensional heterogeneously integrated (3DHI) microelectronics prototypes and will serve as an
integrating center to identify standard processes and equipment that will be needed to advance 3DHI microsystems. DARPA envisions this center as an open access manufacturing center, allowing domestic entities to lessen reliance on foreign industry partners and work with academia, startups, and defense industry partners to rapidly iterate, prototype, and develop low volume 3DHI products. Additionally, the 3DHI manufacturing center will focus on integrating silicon and non-silicon-based semiconductors.

This solicitation will inform the planning of the NGMM program. Establishment of the prototype center is not being awarded through this call and will be made through future Phase 1 (establish center) and Phase 2 (qualify final processes) solicitations. Phase 0 will inform the planning and solicitation of the manufacturing center by identifying the relevant tools, operating procedures, and facility requirements. Proposers should identify an “exemplar microsystem” that will advance state-of-the-art 3DHI systems and will then analyze the required process and equipment required to manufacture such systems.

**Proposers’ Day:** DARPA MTO will host a proposers’ day on August 17, 2022. Interested proposers must register at [https://cvent.me/NQMkWR](https://cvent.me/NQMkWR) by **August 12, 2022, at 5:00 PM ET.**

**Key Dates:** All questions to program officers must be submitted by **September 1, 2022.** Proposal submissions must be made through [www.grants.gov](http://www.grants.gov) by **September 21, 2022, at 5:00 PM ET.**

**Eligibility:** All responsible entities are eligible to apply. Federally Funded Research and Development Centers (FFRDCs) may apply as awardees or subawardees.

**Funding and Period of Performance:** $20 million of total funding is expected to be made for multiple awards under this solicitation. Phase 0 awards are expected to last 6 months. Cost-sharing is not required but encouraged if there is potential for commercial applications.

**Sources and Additional Information:**
- The full solicitation can be found on [www.grants.gov](http://www.grants.gov) under solicitation number “HR001122S0050.”
- More information about the proposers’ day can be found on [www.sam.gov](http://www.sam.gov) under notice ID “DARPA-SN-22-50.”

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**Future Funding Opportunity: NICHD Issues Notice of Upcoming Prize Competition Announcement for the RADx Tech for Maternal Health Challenge**

The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) recently issued a [Notice of Upcoming Prize Competition Announcement for the RADx Tech for Maternal Health Challenge](https://www.federalregister.gov/documents/2022/07/26/2022-15974/notice-of-upcoming-prize-competition-announcement-for-the-radx-tech-for-maternal-health-challenge). The prize competition will utilize the Rapid Acceleration of Diagnostics (RADx) Tech program’s innovation funnel design to accelerate the development of diagnostic devices, wearables, or other remote sensing technologies that can reduce maternal mortality and morbidity for individuals residing in maternity care deserts up to one year after childbirth. This prize competition will be the first time that the RADx model, initially used by the National Institute of Biomedical Imaging and Bioengineering (NIBIB) to speed the development, commercialization and implementation of COVID-19 testing technologies, will be applied to the development of diagnostic technologies in a specific research area beyond COVID-19.

The prize competition will be a part of the Implementing a Maternal health and Pregnancy Outcomes Vision for Everyone (IMPROVE) initiative, which was launched by NICHD to support research that focuses on
improving maternal mortality rates and emphasizes improving maternal care for traditionally underrepresented populations. The competition will focus on prediction, detection, diagnosis, and monitoring during the postpartum period and will prioritize awards for technologies aimed at conditions associated with high rates of severe maternal morbidity and mortality, such as cardiovascular disease and mental health conditions.

Participants in the challenge are likely to be required to submit a proposal that describes their prototype technology, anticipated clinical impact, and plans for continued development. Successful participants will also likely have already developed a working prototype of a home-based or point-of-care (POC) diagnostic device, wearable, or remote sensing technology with data demonstrating their proof of concept. Like past iterations of RADx, proposals will be evaluated and advanced through three phases of the innovation funnel model, with increasing cash prize amounts awarded in each phase. The three phases of the challenge are:

1. **Viability Assessment Phase**: This phase will “focus on determining the viability of the proposed solutions for scientific/technological, clinical, accessibility and user experience, commercialization, as well as regulatory approval.”

2. **Deep Dive Phase**: Proposals that advance to this phase “will be assigned to a Project Team of healthcare technology commercialization and content experts who will assess the prototype technology across defined evaluation criteria, identify key risk factors for accelerated development and implementation, and establish milestones that mitigate these risks.”

3. **Technology Assessment Phase**: In this final phase, “technologies will be rapidly de-risked with in-kind technical, clinical, and commercialization support and Innovators will compete for additional cash prizes for successful milestone completion. At the end of the Technology Assessment Phase, Innovators will submit their technologies for independent testing and verification of performance and usability. Those Innovators whose technologies successfully complete the final phase will be rewarded with a cash prize and connected to NIH networks for potential clinical studies and implementation research support.”

The official publication of the Challenge announcement is planned for **September 1, 2022** and the estimated submission deadline is **November 1, 2022**. Prizes for the Viability Assessment Phase will begin to be awarded on **December 1, 2022** and will continue on a rolling basis until all funds for this phase are exhausted. NICHD intends to award up to $8,000,000 over all phases of the Challenge.

*Engagement Opportunity: Federal Advisory Committee Nomination Opportunities - August 12, 2022*

**Lead Exposure and Prevention Advisory Committee**

**AGENCY**: Centers for Disease Control and Prevention

**BACKGROUND**: The Centers for Disease Control and Prevention (CDC) is seeking individual nominations to the Lead Exposure and Prevention Advisory Committee (LEPAC) for a three-year appointment. LEPAC is seeking nominees with expertise in “epidemiology, toxicology, mental health, pediatrics, early childhood education, special education, diet and nutrition, and environmental health.” The Committee will advise the Secretary of the Department of Health and Human Services (HHS), CDC Director, and Administrator of the Agency for Toxic Substances and Disease Registry on the following issues, including the review of available federal programs,
existing research on lead exposure to identify gaps, best practices (or need for) lead screening and preventative measures, as well as identifying services for affected communities such as healthcare, education, and nutrition. The Committee will also submit a report to Congress analyzing the effectiveness of federal programs for individuals and communities exposed to lead, highlighting future lead exposure research and screening needs, and recommending healthcare, education, or nutrition for communities impacted by lead exposure.

Individuals will be required to submit a current curriculum vitae and a single letter of recommendation from an individual that is not an employee of the Department of Health and Human Services, nor an agency under their purview.

APPLICATION DUE: Nominations are due by **November 4, 2022**.

NOTICE: [https://www.federalregister.gov/d/2022-16336](https://www.federalregister.gov/d/2022-16336)

AUTHORITY: The Lead Exposure and Prevention Advisory Committee is established by Section 2203 of Public Law 114-322, “Water Infrastructure Improvements for the Nation Act”; 42 U.S.C. §300j-21, "Registry for Lead Exposure and Prevention Advisory Committee." The Committee is governed by the provisions of Public Law 92-463, the Federal Advisory Committee Act, as amended (5 U.S.C. App. 2).

**Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria**

**AGENCY:** Department of Health and Human Services

**BACKGROUND:** The Department of Health and Human Services (HHS) is seeking individual nominations to become a voting or non-voting member of the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria. The Committee informs and advises the Secretary of HHS on policies that address reducing or combating antibiotic bacteria that could potentially pose a threat to the public. Voting members of the Committee will have experience in researching or implementing efforts to maintain the effectiveness of antibiotics. Non-voting members of the Committee will be involved in advocacy, education, development, testing, licensing, production, procurement, or distribution of antibiotics or antibiotic research.

Individuals nominated to be a voting member will be required to submit a current curriculum vitae, a one-page biography of the nominee, and any letters of recommendation or endorsement. Individuals nominated to be a non-voting member will be required to submit a current curriculum vitae, a one-page biography of the nominee, and a letter of endorsement from the organization and/or interest group represented.

APPLICATION DUE: Nominations are due by **September 19, 2022**.

NOTICE: [https://www.federalregister.gov/d/2022-16346](https://www.federalregister.gov/d/2022-16346)

AUTHORITY: The Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (Advisory Council), established by Executive Order 13676, is continued by Section 505 of Public Law 116-22, the Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2019 (PAHPAIA). Activities and duties of the Advisory Council are governed by the provisions of the Federal Advisory Committee Act (FACA), Public Law 92-463, as amended (5 U.S.C. app.), which sets forth standards for the formation and use of federal advisory committees.
American Fisheries Advisory Committee

AGENCY: National Oceanic and Atmospheric Administration

BACKGROUND: The National Oceanic and Atmospheric Administration (NOAA) is seeking individual nominations to become a member of the American Fisheries Advisory Committee. The Committee advises the Secretary of Commerce on financial assistance awards under the Saltonstall-Kennedy (S-K) Grant and assists in the development of the annual Notice of Funding Opportunities for submission to the S-K Grant Competition. Members of the Committee should have experience and expertise in: “seafood harvesting or processing; recreational or commercial fishing; growing seafood; fisheries science; and/or food distribution, marketing, retail, or food service” in as many seafood species as possible. Individuals on the Committee initially serve staggered terms of two, three, and four years, and terms of all future Committee members will be three years with no more than two consecutive terms allowed.

Nominees will be required to submit a cover letter that includes a brief statement of the applicant’s interest in serving on the Committee and their qualifications and a resume or curriculum vitae. Members of the Committee will be announced on December 1, 2022.

APPLICATION DUE: Nominations are due by September 24, 2022.


AUTHORITY: The Committee is established by Public Law 117-121 (S.497), signed on May 12, 2022.

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