SECTION 1. SHORT TITLE.

This Act may be cited as the “U.S. Border Patrol Medical Screening Standards Act”.

SEC. 2. RESEARCH REGARDING PROVISION OF MEDICAL SCREENING OF INDIVIDUALS INTERDICTED BY U.S. CUSTOMS AND BORDER PROTECTION BETWEEN PORTS OF ENTRY.

(a) In General.—Not later than one year after the date of the enactment of this Act, the Secretary of Homeland Security, acting through the Under Secretary for Science and Technology of the Department of Homeland Security, in coordination with the Commissioner of U.S. Customs and Border Protection and the Chief Medical Officer of the Department, shall research innovative approaches to address capability gaps regarding the provision of comprehensive medical screening of individuals, particularly children, pregnant women, the elderly, and other vulnerable populations, interdicted by U.S. Customs
and Border Protection between ports of entry and issue
to the Secretary recommendations for any necessary cor-
corrective actions.

(b) CONSULTATION.—In carrying out the research
required under subsection (a), the Under Secretary for
Science and Technology of the Department of Homeland
Security shall consult with appropriate national profes-
sional associations with expertise and non-governmental
experts in emergency, nursing, and other medical care, in-
cluding pediatric care.

(c) REPORT.—The Secretary of Homeland Security
shall submit to the Committee on Homeland Security of
the House of Representatives and the Committee on
Homeland Security and Governmental Affairs of the Sen-
ate a report containing the recommendations referred to
in subsection (a), together with information relating to
what actions, if any, the Secretary plans to take in re-
response to such recommendations.

SEC. 3. ELECTRONIC HEALTH RECORDS IMPLEMENTATION.

(a) IN GENERAL.—Not later than 90 days after the
date of the enactment of this Act, the Chief Information
Officer of the Department of Homeland Security, in co-
ordination with the Chief Medical Officer of the Depart-
ment, shall establish within the Department an electronic
health record system that can be accessed by all depart-
mental components operating along the borders of the United States for individuals in the custody of such components.

(b) ASSESSMENT.—Not later than 120 days after the implementation of the electronic health records system, the Chief Information Officer, in coordination with the Chief Medical Officer, shall conduct an assessment of such system to determine system capacity for improvement and interoperability.