

115TH CONGRESS  
1ST SESSION

# H. R. 4142

To protect individuals by strengthening the Nation's mental health infrastructure, improving the understanding of violence, strengthening firearm prohibitions and protections for at-risk individuals, and improving and expanding the reporting of mental health records to the National Instant Criminal Background Check System.

---

## IN THE HOUSE OF REPRESENTATIVES

OCTOBER 26, 2017

Mr. THOMPSON of California (for himself and Mr. PERLMUTTER) introduced the following bill; which was referred to the Committee on the Judiciary, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

---

## A BILL

To protect individuals by strengthening the Nation's mental health infrastructure, improving the understanding of violence, strengthening firearm prohibitions and protections for at-risk individuals, and improving and expanding the reporting of mental health records to the National Instant Criminal Background Check System.

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

**1 SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Safer Communities  
3 Act of 2017”.

**4 SEC. 2. TABLE OF CONTENTS.**

5 The table of contents of this Act is as follows:

- See. 1. Short title.
- Sec. 2. Table of contents.
- Sec. 3. Statement of purpose.

**TITLE I—STRENGTHENING AND IMPROVING INTERVENTION EFFORTS**

- Sec. 101. Mental health crisis assessment, prevention, and education grant program.
- Sec. 102. School-based mental health programs.
- Sec. 103. High utilizers.

**TITLE II—IMPROVING RESEARCH ON VIOLENCE**

- Sec. 201. Research with respect to violence.

**TITLE III—UNDERSTANDING THE EPIDEMIC OF GUN VIOLENCE**

- Sec. 301. National violent death reporting system.
- Sec. 302. Reaffirming Centers for Disease Control and Prevention’s authority.
- Sec. 303. Protecting confidential doctor-patient relationship.

**TITLE IV—ENSURING SAFE COMMUNITIES**

- Sec. 401. Ban on firearm possession by person committed involuntarily to mental institution on an outpatient basis.
- Sec. 402. Grant program regarding firearms.
- Sec. 403. Notification of State and local law enforcement authorities of attempt to purchase firearm by ineligible person.

**TITLE V—RESTORATION**

- Sec. 501. Federal agency relief program.
- Sec. 502. State relief programs.
- Sec. 503. Ineligibility due to disqualifying mental status.

**TITLE VI—SUBMISSION OF RECORDS TO NATIONAL INSTANT CRIMINAL BACKGROUND CHECK SYSTEM**

- Sec. 601. Reports relating to submission of information to NICS.
- Sec. 602. Reauthorization of the National Criminal History Records Improvement Program.
- Sec. 603. Improvement of metrics and incentives.
- Sec. 604. Grants to States to improve coordination and automation of NICS record reporting.
- Sec. 605. Sharing of records by Federal departments and agencies with NICS.

1   **SEC. 3. STATEMENT OF PURPOSE.**

2         The purpose of this Act is to ensure the public safety  
3     and welfare of communities by promoting evidence-based  
4     approaches that will prevent the tragic toll of gun violence  
5     on families and communities. This purpose can be accom-  
6     plished by—

7                 (1) strengthening and improving intervention  
8     efforts by increasing investments in programs de-  
9     signed to appropriately identify, respond to, treat,  
10    and mitigate future behavioral health crises;

11                 (2) prioritizing research on reducing the threat  
12    of gun violence to self or others and identifying fur-  
13    ther risk factors for violence, including gender, cul-  
14    ture, substance abuse, and history of violence; and

15                 (3) restricting gun access by individuals found  
16    to be at an elevated risk of committing future acts  
17    of violence against self or others.

18   **TITLE I—STRENGTHENING AND  
19         IMPROVING INTERVENTION  
20         EFFORTS**

21   **SEC. 101. MENTAL HEALTH CRISIS ASSESSMENT, PREVEN-  
22         TION, AND EDUCATION GRANT PROGRAM.**

23         (a) DEFINITIONS.—For purposes of this section, the  
24    following definitions shall apply:

1                     (1) ELIGIBLE ENTITY.—The term “eligible entity” means a State, political subdivision of a State, or nonprofit private entity.

4                     (2) SECRETARY.—The term “Secretary” means  
5                         the Secretary of Health and Human Services.

6                     (3) STATE.—The term “State” means each  
7                         State of the United States, the District of Columbia,  
8                         each commonwealth, territory, or possession of the  
9                         United States, and each federally recognized Indian  
10                         tribe.

11                     (b) ESTABLISHMENT OF GRANT PROGRAM.—

12                     (1) ESTABLISHMENT.—The Secretary shall establish a program to award grants to eligible entities to carry out the activities described in paragraph  
15                         (2).

16                     (2) USE OF FUNDS.—

17                     (A) IN GENERAL.—Grants under this section may be used to carry out programs that—

19                         (i) expand early invention and treatment services to improve access to mental health crisis assistance and address unmet  
21                         mental health care needs;

23                         (ii) expand the continuum of services to address crisis intervention and crisis stabilization;

(iii) reduce recidivism due to mental health crises and mitigate unnecessary expenditures by local law enforcement; and

(iv) reduce unnecessary hospitalizations by appropriately utilizing community-based services and improving access to timely mental health crisis assistance.

(B) AUTHORIZED ACTIVITIES.—The programs described in subparagraph (A) may include any or all of the following activities:

(i) Mental health crisis intervention and response training for law enforcement (to increase officers' understanding and recognition of mental illnesses).

(ii) Mobile support that provides field-based behavioral health assistance to law enforcement and members of the community and links individuals in crisis to appropriate services.

(iii) School and community-based early intervention and prevention programs that provide mobile response, screening and assessment, training and education, and peer-based and family services.

1                             (3) APPLICATION.—To be considered for a  
2 grant under this section, an eligible entity shall submit  
3 an application to the Secretary at such time, in  
4 such manner, and containing such information as  
5 the Secretary may require. At minimum, such applica-  
6 tion shall include a description of—

7                             (A) the activities to be funded with the  
8 grant;  
9                             (B) community needs;  
10                            (C) the population to be served; and  
11                            (D) the interaction between the activities  
12 described in subparagraph (A) and public sys-  
13 tems of health and mental health care, law en-  
14 forcement, social services, and related assist-  
15 ance programs.

16                           (4) SELECTING AMONG APPLICANTS.—

17                           (A) IN GENERAL.—Grants shall be award-  
18 ed to eligible entities on a competitive basis.

19                           (B) SELECTION CRITERIA.—The Secretary  
20 shall evaluate applicants based on such criteria  
21 as the Secretary determines to be appropriate,  
22 including the ability of an applicant to carry  
23 out the activities described in paragraph (2).

24                           (5) REPORTS.—

25                           (A) ANNUAL REPORTS.—

(B) FINAL REPORT.—Not later than January 15, 2022, the Secretary shall submit to Congress a final report that includes recommendations with respect to the feasibility and advisability of extending or expanding the grant program.

## 20 (6) COLLECTION OF DATA.—

(B) MANNER OF COLLECTION.—Data described in subparagraph (A) shall be collected and analyzed using a scientific peer-reviewed system and valid and reliable results-based research methodologies.

### 6 (c) FUNDING.—

7                             (1) GRANT AMOUNT.—A grant under this sec-  
8                             tion shall be in an amount that is not more than  
9                             \$100,000 for each of fiscal years 2018 through  
10                            2022. Subject to the preceding sentence, the Sec-  
11                            retary shall determine the amount of each grant.

#### **16 SEC. 102. SCHOOL-BASED MENTAL HEALTH PROGRAMS.**

17       (a) TECHNICAL AMENDMENTS.—The second part G  
18 (relating to services provided through religious organiza-  
19 tions) of title V of the Public Health Service Act (42  
20 U.S.C. 290kk et seq.) is amended—

21                   (1) by redesignating such part as part J; and  
22                   (2) by redesignating sections 581 through 584  
23                   as sections 596 through 596C, respectively.

(b) SCHOOL-BASED MENTAL HEALTH AND CHILDREN AND VIOLENCE.—Section 581 of the Public Health

1 Service Act (42 U.S.C. 290hh) is amended to read as fol-  
2 lows:

3 **SEC. 581. SCHOOL-BASED MENTAL HEALTH AND CHIL-  
4 DREN AND VIOLENCE.**

5 “(a) IN GENERAL.—The Secretary, in collaboration  
6 with the Secretary of Education and in consultation with  
7 the Attorney General, shall, directly or through grants,  
8 contracts, or cooperative agreements awarded to public en-  
9 tities and local education agencies, assist local commu-  
10 nities and schools in applying a public health approach  
11 to mental health services both in schools and in the com-  
12 munity. Such approach should provide comprehensive age-  
13 appropriate services and supports, be linguistically and  
14 culturally appropriate, be trauma-informed, and incor-  
15 porate age-appropriate strategies of positive behavioral  
16 interventions and supports. A comprehensive school men-  
17 tal health program funded under this section shall assist  
18 children in dealing with trauma and violence.

19 “(b) ACTIVITIES.—Under the program under sub-  
20 section (a), the Secretary may—

21 “(1) provide financial support to enable local  
22 communities to implement a comprehensive cul-  
23 turally and linguistically appropriate, trauma-in-  
24 formed, and age-appropriate, school mental health  
25 program that incorporates positive behavioral inter-

1       ventions, client treatment, and supports to foster the  
2       health and development of children;

3           “(2) provide technical assistance to local com-  
4       munities with respect to the development of pro-  
5       grams described in paragraph (1);

6           “(3) provide assistance to local communities in  
7       the development of policies to address child and ado-  
8       lescent trauma and mental health issues and violence  
9       when and if it occurs;

10          “(4) facilitate community partnerships among  
11       families, students, law enforcement agencies, edu-  
12       cation systems, mental health and substance use dis-  
13       order service systems, family-based mental health  
14       service systems, welfare agencies, health care service  
15       systems (including physicians), faith-based pro-  
16       grams, trauma networks, and other community-  
17       based systems; and

18          “(5) establish mechanisms for children and ado-  
19       lescents to report incidents of violence or plans by  
20       other children, adolescents, or adults to commit vio-  
21       lence.

22          “(c) REQUIREMENTS.—

23           “(1) IN GENERAL.—To be eligible for a grant,  
24       contract, or cooperative agreement under subsection  
25       (a), an entity shall—

1               “(A) be a partnership between a local edu-  
2               cation agency and at least one community pro-  
3               gram or agency that is involved in mental  
4               health; and

5               “(B) submit an application, that is en-  
6               dorsed by all members of the partnership, that  
7               contains the assurances described in paragraph  
8               (2).

9               “(2) REQUIRED ASSURANCES.—An application  
10          under paragraph (1) shall contain assurances as fol-  
11          lows:

12               “(A) That the applicant will ensure that,  
13               in carrying out activities under this section, the  
14               local educational agency involved will enter into  
15               a memorandum of understanding—

16               “(i) with at least one public or private  
17               mental health entity, health care entity,  
18               law enforcement or juvenile justice entity,  
19               child welfare agency, family-based mental  
20               health entity, family or family organiza-  
21               tion, trauma network, or other community-  
22               based entity; and

23               “(ii) that clearly states—

24               “(I) how school-employed mental  
25               health professionals (such as school

1                   psychologists, school counselors, and  
2                   school social workers) will be utilized  
3                   in the comprehensive school mental  
4                   health program;

5                   “(II) the responsibilities of each  
6                   partner with respect to the activities  
7                   to be carried out;

8                   “(III) how each such partner will  
9                   be accountable for carrying out such  
10                  responsibilities; and

11                  “(IV) the amount of non-Federal  
12                  funding or in-kind contributions that  
13                  each such partner will contribute in  
14                  order to sustain the program.

15                  “(B) That the comprehensive school-based  
16                  mental health program carried out under this  
17                  section supports the flexible use of funds to ad-  
18                  dress—

19                  “(i) the promotion of the social, emo-  
20                  tional, mental, and behavioral health and  
21                  wellness of all students in an environment  
22                  that is conducive to learning;

23                  “(ii) the reduction in the likelihood of  
24                  at-risk students developing social, emo-

1           tional, mental, and behavioral health prob-  
2           lems, or substance use disorders;

3                 “(iii) the early identification of social,  
4                 emotional, mental, and behavioral prob-  
5                 lems, or substance use disorders and the  
6                 provision of early intervention services;

7                 “(iv) the treatment or referral for  
8                 treatment of students with existing social,  
9                 emotional, mental, and behavioral health  
10                problems, or substance use disorders; and

11                 “(v) the development and implementa-  
12                tion of programs to assist children in deal-  
13                ing with trauma and violence.

14                 “(C) That the comprehensive school-based  
15                mental health program carried out under this  
16                section will provide for in-service training of all  
17                school personnel, including ancillary staff and  
18                volunteers, in—

19                 “(i) the techniques and supports need-  
20                ed to identify early children with trauma  
21                histories and children with, or at risk of,  
22                mental illness;

23                 “(ii) the use of referral mechanisms  
24                that effectively link such children to appro-  
25                priate treatment and intervention services

1           in the school and in the community and to  
2           follow-up when services are not available;

3                 “(iii) strategies that promote the so-  
4                 cial, emotional, mental, and behavioral  
5                 health and wellness of all students;

6                 “(iv) strategies for promoting the so-  
7                 cial, emotional, mental, and behavioral  
8                 health of all students; and

9                 “(v) strategies to increase the knowl-  
10                 edge and skills of school and community  
11                 leaders about the impact of trauma and vi-  
12                 olence and on the application of a public  
13                 health approach to comprehensive school-  
14                 based mental health programs.

15                 “(D) That the comprehensive school-based  
16                 mental health program carried out under this  
17                 section will include comprehensive training for  
18                 parents, siblings, and other family members of  
19                 children with mental health disorders, and for  
20                 concerned members of the community in—

21                 “(i) the techniques and supports need-  
22                 ed to identify early children with trauma  
23                 histories, and children with, or at risk of,  
24                 mental illness;

1                     “(ii) the use of referral mechanisms  
2                     that effectively link such children to appropriate treatment and intervention services  
3                     in the school and in the community and follow-up when such services are not available; and

7                     “(iii) strategies that promote a school-wide positive environment.

9                     “(E) That the comprehensive school-based  
10                  mental health program carried out under this section will demonstrate the measures to be  
11                  taken to sustain the program after funding under this section terminates.

14                     “(F) That the local education agency partnership involved is supported by the State educational and mental health system to ensure that the sustainability of the programs is established after funding under this section terminates.

20                     “(G) That the comprehensive school-based mental health program carried out under this section will be based on trauma-informed and evidence-based practices.

24                     “(H) That the comprehensive school-based mental health program carried out under this

1           section will be coordinated with early intervening activities carried out under the Individuals with Disabilities Education Act.

4           “(I) That the comprehensive school-based mental health program carried out under this section will be trauma-informed and culturally and linguistically appropriate.

8           “(J) That the comprehensive school-based mental health program carried out under this section will include a broad needs assessment of youth who drop out of school due to policies of ‘zero tolerance’ with respect to drugs, alcohol, or weapons and an inability to obtain appropriate services.

15          “(K) That the mental health services provided through the comprehensive school-based mental health program carried out under this section will be provided by qualified mental and behavioral health professionals who are certified or licensed by the State involved and practicing within their area of expertise.

22          “(3) COORDINATOR.—Any entity that is a member of a partnership described in paragraph 23 (1)(A) may serve as the coordinator of funding and 24

1       activities under the grant if all members of the part-  
2       nership agree.

3           “(4) COMPLIANCE WITH HIPAA.—A grantee  
4       under this section shall be deemed to be a covered  
5       entity for purposes of compliance with the regula-  
6       tions promulgated under section 264(e) of the  
7       Health Insurance Portability and Accountability Act  
8       of 1996 with respect to any patient records devel-  
9       oped through activities under the grant.

10          “(d) GEOGRAPHICAL DISTRIBUTION.—The Secretary  
11       shall ensure that grants, contracts, or cooperative agree-  
12       ments under subsection (a) will be distributed equitably  
13       among the regions of the country and among urban and  
14       rural areas.

15          “(e) DURATION OF AWARDS.—With respect to a  
16       grant, contract, or cooperative agreement under sub-  
17       section (a), the period during which payments under such  
18       an award will be made to the recipient shall be 6 years.

19       An entity may receive only one award under this section,  
20       except that an entity that is providing services and sup-  
21       ports on a regional basis may receive additional funding  
22       after the expiration of the preceding grant period.

23          “(f) EVALUATION AND MEASURES OF OUTCOMES.—  
24           “(1) DEVELOPMENT OF PROCESS.—The Ad-  
25       ministrator shall develop a fiscally appropriate proc-

1       ess for evaluating activities carried out under this  
2       section. Such process shall include—

3               “(A) the development of guidelines for the  
4       submission of program data by grant, contract,  
5       or cooperative agreement recipients;

6               “(B) the development of measures of out-  
7       comes (in accordance with paragraph (2)) to be  
8       applied by such recipients in evaluating pro-  
9       grams carried out under this section; and

10              “(C) the submission of annual reports by  
11       such recipients concerning the effectiveness of  
12       programs carried out under this section.

13              “(2) MEASURES OF OUTCOMES.—

14              “(A) IN GENERAL.—The Administrator  
15       shall develop measures of outcomes to be ap-  
16       plied by recipients of assistance under this sec-  
17       tion, and the Administrator, in evaluating the  
18       effectiveness of programs carried out under this  
19       section. Such measures shall include student  
20       and family measures as provided for in sub-  
21       paragraph (B) and local educational measures  
22       as provided for under subparagraph (C).

23              “(B) STUDENT AND FAMILY MEASURES OF  
24       OUTCOMES.—The measures of outcomes devel-  
25       oped under paragraph (1)(B) relating to stu-

1           dents and families shall, with respect to activi-  
2           ties carried out under a program under this  
3           section, at a minimum include provisions to  
4           evaluate whether the program is effective in—

5                 “(i) improving social, emotional, men-  
6                 tal, and behavioral health and wellness;

7                 “(ii) increasing academic competency  
8                 (as defined by Secretary);

9                 “(iii) reducing disruptive and aggres-  
10                 sive behaviors;

11                 “(iv) improving child functioning;

12                 “(v) reducing substance use disorders;

13                 “(vi) reducing suspensions, truancy,  
14                 expulsions and violence;

15                 “(vii) increasing graduation rates (de-  
16                 fined as the percentage of students who  
17                 graduate from secondary school with a reg-  
18                 ular diploma in the standard number of  
19                 years); and

20                 “(viii) improving access to care for  
21                 mental health disorders.

22                 “(C) LOCAL EDUCATIONAL OUTCOMES.—

23           The outcome measures developed under para-  
24           graph (1)(B) relating to local educational sys-  
25           tems shall, with respect to activities carried out

1           under a program under this section, at a min-  
2           imum include provisions to evaluate—

3                 “(i) the effectiveness of comprehensive  
4                 school mental health programs established  
5                 under this section;

6                 “(ii) the effectiveness of formal part-  
7                 nership linkages among child and family  
8                 serving institutions, community support  
9                 systems, and the educational system;

10                 “(iii) the progress made in sustaining  
11                 the program once funding under the grant  
12                 has expired;

13                 “(iv) the effectiveness of training and  
14                 professional development programs for all  
15                 school personnel that incorporate indica-  
16                 tors that measure cultural and linguistic  
17                 competencies under the program in a man-  
18                 ner that incorporates appropriate cultural  
19                 and linguistic training;

20                 “(v) the improvement in perception of  
21                 a safe and supportive learning environment  
22                 among school staff, students, and parents;

23                 “(vi) the improvement in case-finding  
24                 of students in need of more intensive serv-

1           ices and referral of identified students to  
2           early intervention and clinical services;

3           “(vii) the improvement in the imme-  
4           diate availability of clinical assessment and  
5           treatment services within the context of  
6           the local community to students posing a  
7           danger to themselves or others;

8           “(viii) the increased successful matric-  
9           ulation to postsecondary school; and

10          “(ix) reduced referrals to juvenile jus-  
11          tice.

12          “(3) SUBMISSION OF ANNUAL DATA.—An entity  
13          that receives a grant, contract, or cooperative agree-  
14          ment under this section shall annually submit to the  
15          Administrator a report that includes data to evalu-  
16          ate the success of the program carried out by the en-  
17          tity based on whether such program is achieving the  
18          purposes of the program. Such reports shall utilize  
19          the measures of outcomes under paragraph (2) in a  
20          reasonable manner to demonstrate the progress of  
21          the program in achieving such purposes.

22          “(4) EVALUATION BY ADMINISTRATOR.—Based  
23          on the data submitted under paragraph (3), the Ad-  
24          ministrator shall annually submit to Congress a re-  
25          port concerning the results and effectiveness of the

1       programs carried out with assistance received under  
2       this section.

3           “(5) LIMITATION.—A grantee shall use not to  
4       exceed 10 percent of amounts received under a grant  
5       under this section to carry out evaluation activities  
6       under this subsection.

7           “(g) INFORMATION AND EDUCATION.—The Sec-  
8       retary shall establish comprehensive information and edu-  
9       cation programs to disseminate the findings of the knowl-  
10      edge development and application under this section to the  
11      general public and to health care professionals.

12           “(h) AMOUNT OF GRANTS AND AUTHORIZATION OF  
13 APPROPRIATIONS.—

14           “(1) AMOUNT OF GRANTS.—A grant under this  
15      section shall be in an amount that is not more than  
16      \$1,000,000 for each of grant years 2018 through  
17      2022. The Secretary shall determine the amount of  
18      each such grant based on the population of children  
19      up to age 21 of the area to be served under the  
20      grant.

21           “(2) AUTHORIZATION OF APPROPRIATIONS.—  
22      There is authorized to be appropriated to carry out  
23      this section, \$200,000,000 for each of fiscal years  
24      2018 through 2022.”.

1       (c) CONFORMING AMENDMENT.—Part G of title V of  
2 the Public Health Service Act (42 U.S.C. 290hh et seq.),  
3 as amended by this section, is further amended by striking  
4 the part heading and inserting the following:

5       **“PART G—SCHOOL-BASED MENTAL HEALTH”.**

6       **SEC. 103. HIGH UTILIZERS.**

7       Section 2991 of the Omnibus Crime Control and Safe  
8 Streets Act of 1968 (34 U.S.C. 10651) is amended—

9               (1) by redesignating subsections (m) through  
10          (o) as subsections (n) through (p), respectively; and  
11               (2) by inserting after subsection (l) the fol-  
12          lowing:

13       “(m) DEMONSTRATION GRANTS RESPONDING TO  
14 HIGH UTILIZERS.—

15               “(1) DEFINITION.—In this subsection, the term  
16          ‘high utilizer’ means an individual who—

17                       “(A) manifests obvious signs of mental ill-  
18          ness or has been diagnosed by a qualified men-  
19          tal health professional as having a mental ill-  
20          ness; and

21                       “(B) consumes a significantly disproport-  
22          ionate quantity of public resources, such as  
23          emergency, housing, judicial, corrections, and  
24          law enforcement services.

1               “(2) DEMONSTRATION GRANTS RESPONDING TO  
2 HIGH UTILIZERS.—

3               “(A) IN GENERAL.—The Attorney General  
4 may award not more than 6 grants per year  
5 under this subsection to applicants for the pur-  
6 pose of reducing the use of public services by  
7 high utilizers.

8               “(B) USE OF GRANTS.—A recipient of a  
9 grant awarded under this subsection may use  
10 the grant—

11               “(i) to develop or support multidisci-  
12 plinary teams that coordinate, implement,  
13 and administer community-based crisis re-  
14 sponds and long-term plans for high uti-  
15 lizers;

16               “(ii) to provide training on how to re-  
17 spond appropriately to the unique issues  
18 involving high utilizers for public service  
19 personnel, including criminal justice, men-  
20 tal health, substance abuse, emergency  
21 room, healthcare, law enforcement, correc-  
22 tions, and housing personnel;

23               “(iii) to develop or support alter-  
24 natives to hospital and jail admissions for  
25 high utilizers that provide treatment, sta-

4                             “(iv) to develop protocols and systems  
5                             among law enforcement, mental health,  
6                             substance abuse, housing, corrections, and  
7                             emergency medical service operations to  
8                             provide coordinated assistance to high util-  
9                             lizers.

“(C) REPORT.—Not later than the last day of the first year following the fiscal year in which a grant is awarded under this subsection, the recipient of the grant shall submit to the Attorney General a report that—

15 “(i) measures the performance of the  
16 grant recipient in reducing the use of pub-  
17 lic services by high utilizers; and

18                         “(ii) provides a model set of practices,  
19                         systems, or procedures that other jurisdictions  
20                         can adopt to reduce the use of public  
21                         services by high utilizers.”.

1                   **TITLE II—IMPROVING**  
2                   **RESEARCH ON VIOLENCE**

3                   **SEC. 201. RESEARCH WITH RESPECT TO VIOLENCE.**

4                   (a) IN GENERAL.—The Secretary of Health and  
5 Human Services, in consultation with the Director of the  
6 National Institutes of Health, shall expand and intensify  
7 research on self-directed and other-directed violence asso-  
8 ciated with mental illness and substance abuse disorders.

9                   (b) LIMITATIONS ON AUTHORIZATION OF APPRO-  
10 PRIATIONS.—To carry out subsection (a), there are au-  
11 thorized to be appropriated \$100,000, without fiscal year  
12 limitation, which is authorized to remain available until  
13 expended.

14                  **TITLE           III—UNDERSTANDING**  
15                  **THE EPIDEMIC OF GUN VIO-**  
16                  **LENCE**

17                  **SEC. 301. NATIONAL VIOLENT DEATH REPORTING SYSTEM.**

18                  The Secretary of Health and Human Services, acting  
19 through the Director of the Centers for Disease Control  
20 and Prevention, shall improve the National Violent Death  
21 Reporting System, as authorized by title III of the Public  
22 Health Service Act (42 U.S.C. 241 et seq.), particularly  
23 through the expansion of the application of such system  
24 to include the 50 States. Participation in the system by  
25 the States shall be voluntary.

1 **SEC. 302. REAFFIRMING CENTERS FOR DISEASE CONTROL**2 **AND PREVENTION'S AUTHORITY.**

3 (a) IN GENERAL.—Section 391 of the Public Health

4 Service Act (42 U.S.C. 280b) is amended—

5 (1) in subsection (a)(1), by striking “research  
6 relating to the causes, mechanisms, prevention, diag-  
7 nosis, treatment of injuries, and rehabilitation from  
8 injuries;” and inserting “research, including data  
9 collection, relating to—10 “(A) the causes, mechanisms, prevention, diag-  
11 nosis, and treatment of injuries, including with re-  
12 spect to gun violence; and

13 “(B) rehabilitation from such injuries;”; and

14 (2) by adding at the end the following new sub-  
15 section:16 “(c) NO ADVOCACY OR PROMOTION OF GUN CON-  
17 TROL.—Nothing in this section shall be construed to—18 “(1) authorize the Secretary to give assistance,  
19 make grants, or enter into cooperative agreements or  
20 contracts for the purpose of advocating or promoting  
21 gun control; or22 “(2) permit a recipient of any assistance, grant,  
23 cooperative agreement, or contract under this section  
24 to use such assistance, grant, agreement, or contract  
25 for the purpose of advocating or promoting gun con-  
26 trol.”.

1       (b) AUTHORIZATION OF APPROPRIATIONS.—Section  
2 394A(a) of the Public Health Service Act (42 U.S.C.  
3 280b–3(a)) is amended by striking “authorized to be ap-  
4 propriated” and all that follows through the end and in-  
5 serting the following: “authorized to be appropriated such  
6 sums as may be necessary for each of fiscal years 2018  
7 through 2022.”.

8 **SEC. 303. PROTECTING CONFIDENTIAL DOCTOR-PATIENT  
9 RELATIONSHIP.**

10       Section 2717(c) of the Public Health Service Act (42  
11 U.S.C. 300gg–17(c)) is amended by adding at the end the  
12 following new paragraph:

13           “(6) RULE OF CONSTRUCTION.—Notwith-  
14 standing the previous provisions of this subsection,  
15 none of the authorities provided to the Secretary  
16 under this subsection, Public Law 111–148, or an  
17 amendment made by such Public Law shall be con-  
18 strued to prohibit a physician or other health care  
19 provider from—

20           “(A) asking a patient about the ownership,  
21 possession, use, or storage of a firearm or am-  
22 munition in the home of such patient;

23           “(B) speaking to a patient about gun safe-  
24 ty; or

1                 “(C) reporting to the authorities a pa-  
2                 tient’s threat of violence.”.

3                 **TITLE IV—ENSURING SAFE  
4                 COMMUNITIES**

5                 **SEC. 401. BAN ON FIREARM POSSESSION BY PERSON COM-**  
6                 **MITTED INVOLUNTARILY TO MENTAL INSTI-**  
7                 **TUTION ON AN OUTPATIENT BASIS.**

8                 Subsections (d)(4) and (g)(4) of section 922 of title  
9     18, United States Code, are each amended by inserting  
10   “on an involuntary inpatient or involuntary outpatient  
11   basis” before the semicolon.

12                 **SEC. 402. GRANT PROGRAM REGARDING FIREARMS.**

13                 Section 506(b) of the Omnibus Crime Control and  
14   Safe Streets Act of 1968 (34 U.S.C. 10157(b)) is amend-  
15   ed—

16                 (1) by striking “1 or more States or units of  
17   local government, for 1 or more of the purposes  
18   specified in section 501, pursuant to his determina-  
19   tion that the same is necessary”;

20                 (2) by inserting before paragraph (1) the fol-  
21   lowing:

22                 “(1) one or more States or units of local gov-  
23   ernment, for one or more of the purposes specified  
24   in section 501, pursuant to his determination that  
25   the same is necessary—”;

1                             (3) by redesignating the second paragraph (1)  
2                             as subparagraph (A);

3                             (4) in paragraph (2)—

4                                 (A) by striking the period at the end and  
5                             inserting “; or”; and

6                                 (B) by redesignating paragraph (2) as sub-  
7                             paragraph (B); and

8                             (5) by adding at the end the following:

9                                 “(2) one or more States, if that State has dem-  
10                             onstrated, in the determination of the Attorney Gen-  
11                             eral, that the State has adopted policies, procedures,  
12                             protocols, laws or regulations pertaining to the pos-  
13                             session or transfer of firearms or ammunition that—

14                                 “(A)(i) give State and local law enforce-  
15                             ment the authority, to the extent allowable  
16                             under Federal laws and the United States Con-  
17                             stitution, to seize firearms or ammunition from  
18                             an individual pursuant to a warrant, where  
19                             there is probable cause to believe that the indi-  
20                             vidual in possession of such firearms or ammu-  
21                             nition poses an elevated risk of harm to himself  
22                             or herself or to another individual, which may  
23                             be determined by considering whether the indi-  
24                             vidual has caused harm to himself or herself or  
25                             another individual, has detailed plans to cause

1           harm to himself or herself or another individual,  
2           has a history of substance abuse, or  
3           lacks impulse control; and

4                 “(ii) provide that not later than 14 days  
5           after such a seizure, an individual from whom  
6           a firearm or ammunition was so seized shall be  
7           given an opportunity to contest such seizure in  
8           court, and any firearm or ammunition so seized  
9           shall be returned to the individual, unless a  
10          State or local law enforcement officer dem-  
11          onstrates in court by a preponderance of the  
12          evidence that the individual from whom a fire-  
13          arm or ammunition was seized poses an ele-  
14          vated risk of harm to himself or herself or to  
15          another individual; or

16                 “(B) temporarily prohibit an individual  
17          who has been involuntarily hospitalized for a  
18          period of not less than 48 hours for mental ill-  
19          ness on an emergency basis, from possessing a  
20          firearm or ammunition;”.

1     **SEC. 403. NOTIFICATION OF STATE AND LOCAL LAW EN-**  
2                 **FORCEMENT AUTHORITIES OF ATTEMPT TO**  
3                 **PURCHASE FIREARM BY INELIGIBLE PER-**  
4                 **SON.**

5         (a) IN GENERAL.—The Attorney General shall estab-  
6 lish a system for the prompt notification of the relevant  
7 State and local enforcement agencies when the National  
8 Instant Criminal Background Check System established  
9 under section 103 of the Brady Handgun Violence Preven-  
10 tion Act notifies a licensed dealer that the information  
11 available to the system indicates that the possession of a  
12 firearm by an individual attempting to obtain a firearm  
13 from the licensed dealer would violate subsection (g) or  
14 (n) of section 922 of title 18, United States Code, or State  
15 law, except when it is determined, on a case-by-case basis,  
16 that law enforcement purposes would best be served by  
17 not providing such a notice.

18         (b) DEFINITIONS.—In this section, the terms “fire-  
19 arm” and “licensed dealer” shall have the meanings given  
20 such terms in section 921(a) of title 18, United States  
21 Code.

22                 **TITLE V—RESTORATION**

23     **SEC. 501. FEDERAL AGENCY RELIEF PROGRAM.**

24         Section 101(e) of the NICS Improvement Amend-  
25 ments Act of 2007 (34 U.S.C. 40911) is amended—

1                             (1) in paragraph (2)(A)(i), by inserting after  
2        “imposed by such subsections” the following: “if  
3        such person is a person described in subparagraph  
4        (C) and submits the opinion (and records and infor-  
5        mation supporting the opinion) of a psychiatrist, a  
6        clinical psychologist, or a licensed or qualified men-  
7        tal health professional who can provide adequate in-  
8        formation who has personally evaluated the person”;  
9        and

10                           (2) by adding at the end of paragraph (2) the  
11        following:

12                           “(C) PERSON DESCRIBED.—A person is  
13        described in this subparagraph if, beginning not  
14        earlier than 1 year after the person is subject  
15        to the disabilities imposed by subsection (d)(4)  
16        or (g)(4) of section 922 of title 18, United  
17        States Code, and after affording the Federal  
18        department or agency the opportunity to re-  
19        quest an additional evaluation, by a psychia-  
20        trist, a clinical psychologist, or a licensed or  
21        qualified mental health professional who can  
22        provide adequate information appointed by the  
23        department or agency, the department or agen-  
24        cy determines by a preponderance of the evi-  
25        dence received that—

1                     “(i) the person no longer manifests  
2                     the symptoms of mental disorder that re-  
3                     sulted in that person’s adjudication as in-  
4                     eligible due to disqualifying mental status  
5                     or involuntary commitment or that other-  
6                     wise significantly elevate the risk of harm  
7                     to self or others;

8                     “(ii) the person has adhered consist-  
9                     ently to any prescribed treatment for a  
10                     substantial period of time preceding the  
11                     date of the application and has expressed  
12                     a willingness to continue treatment under  
13                     an appropriate mental health professional;

14                     “(iii) if ongoing treatment is required,  
15                     that adherence to that treatment is likely  
16                     to minimize the risk that the person will  
17                     revert to a mental state that would present  
18                     a danger to self or others; and

19                     “(iv) the granting of the relief would  
20                     not be contrary to the public interest.”.

21 **SEC. 502. STATE RELIEF PROGRAMS.**

22             (a) IN GENERAL.—Section 105 of the NICS Im-  
23             provement Amendments Act of 2007 (34 U.S.C. 40915)  
24             is amended—



1                             (2) by adding at the end the following:

2                 “(c) ELIGIBLE PERSON DESCRIBED.—A person de-  
3 scribed in this subsection is any person who submits with  
4 the application for relief under subsection (a)(1), the opin-  
5 ion (and records and information supporting the opinion)  
6 of a psychiatrist, a clinical psychologist, or a licensed or  
7 qualified mental health professional who can provide ade-  
8 quate information who has personally evaluated the peti-  
9 tioner and which attests that—

10                 “(1) the person no longer manifests the symp-  
11 toms of disqualifying mental status that resulted in  
12 that person’s adjudication as ineligible due to dis-  
13 qualifying mental status or involuntary commitment;

14                 “(2) the person appears to have adhered con-  
15 sistently to any prescribed treatment for a substan-  
16 tial period of time preceding the date of the applica-  
17 tion and has expressed a willingness to continue  
18 treatment under an appropriate mental health pro-  
19 fessional;

20                 “(3) if ongoing treatment is required, that ad-  
21 herence to that treatment is likely to minimize the  
22 risk that the person will revert to a mental state  
23 that would present a danger to self or others; and

24                 “(4) the granting of the relief would not be con-  
25 trary to the public interest.

1       “(d) DEFINITIONS.—The Attorney General may, by  
2 rule, define terms used in this section to ensure conformity  
3 with Federal programs providing relief from disabilities  
4 imposed under subsections (d) and (g) of section 922 of  
5 title 18, United States Code.”.

(b) TRANSITION RULE.—The amendment made by subsection (a) shall apply only beginning on the date that is 5 years after the date of enactment of this Act, in the case of any State that has a program described in section 105 of the NICS Improvement Amendments Act of 2007 (34 U.S.C. 40915) in effect on the date of enactment of this Act.

13 SEC. 503. INELIGIBILITY DUE TO DISQUALIFYING MENTAL  
14 STATUS.

15       (a) Section 922(d)(4) of title 18, United States Code,  
16 is amended by striking “adjudicated as a mental defec-  
17 tive” and inserting “adjudicated as ineligible due to dis-  
18 qualifying mental status”.

19 (b) Section 922(g)(4) of title 18, United States Code,  
20 is amended by striking “adjudicated as a mental defec-  
21 tive” and inserting “adjudicated as ineligible due to dis-  
22 qualifying mental status”.

23 (c) Section 922(s)(3)(B)(iv) of title 18, United States  
24 Code, is amended by striking “adjudicated as a mental

1 defective” and inserting “adjudicated as ineligible due to  
2 disqualifying mental status”.

3 (d) Section 175b(d)(2)(F) of title 18, United States  
4 Code, is amended by striking “adjudicated as a mental  
5 defective” and inserting “adjudicated as ineligible due to  
6 disqualifying mental status”.

7 (e) Section 842(d)(6) of title 18, United States Code,  
8 is amended by striking “adjudicated as a mental defec-  
9 tive” and inserting “adjudicated as ineligible due to dis-  
10 qualifying mental status”.

11 (f) Section 842(i)(4) of title 18, United States Code,  
12 is amended by striking “adjudicated as a mental defec-  
13 tive” and inserting “adjudicated as ineligible due to dis-  
14 qualifying mental status”.

15 (g) Section 3(2) of the NICS Improvement Amend-  
16 ments Act of 2007 (34 U.S.C. 40903) is amended by  
17 striking “adjudicated as a mental defective” and inserting  
18 “adjudicated as ineligible due to disqualifying mental sta-  
19 tus”.

20 (h) Section 101(b)(2)(C)(ii) of the NICS Improve-  
21 ment Amendments Act of 2007 (34 U.S.C. 40911) is  
22 amended by striking “adjudicated as a mental defective”  
23 and inserting “adjudicated as ineligible due to disquali-  
24 fying mental status”.

1       (i) Section 101(c)(1)(C) of the NICS Improvement  
2 Amendments Act of 2007 (34 U.S.C. 40911) is amended  
3 by striking “adjudicated as a mental defective” and insert-  
4 ing “adjudicated as ineligible due to disqualifying mental  
5 status”.

6       (j) Section 101(c)(3) of the NICS Improvement  
7 Amendments Act of 2007 (34 U.S.C. 40911) is amended  
8 in the matter preceding subparagraph (A), by striking  
9 “adjudicate a person as a mental defective,” and inserting  
10 “adjudicate a person as ineligible due to disqualifying  
11 mental status”.

12       (k) Section 101(c)(3)(A) of the NICS Improvement  
13 Amendments Act of 2007 (34 U.S.C. 40911) is amended  
14 by striking “adjudicate the person as a mental defective,”  
15 and inserting “adjudicate the person as ineligible due to  
16 disqualifying mental status”.

17       (l) Section 102(b)(1)(C)(iv) of the NICS Improve-  
18 ment Amendments Act of 2007 (34 U.S.C. 40912) is  
19 amended by striking “adjudicated as a mental defective”  
20 and inserting “adjudicated as ineligible due to disquali-  
21 fying mental status”.

**1 TITLE VI—SUBMISSION OF**  
**2 RECORDS TO NATIONAL IN-**  
**3 STANT CRIMINAL BACK-**  
**4 GROUND CHECK SYSTEM**

**5 SEC. 601. REPORTS RELATING TO SUBMISSION OF INFOR-**

**6 MATION TO NICS.**

7       Section 201 of the NICS Improvement Amendments  
8   Act of 2007 (34 U.S.C. 40931) is amended—

(1) by amending subsection (b) to read as follows:

“(b) REPORT ON PERSONS PROHIBITED FROM OB-  
TAINING FIREARMS AS A RESULT OF A CONVICTION OF  
A MISDEMEANOR CRIME OF DOMESTIC VIOLENCE.—Not  
later than January 31 of each year, the Director shall sub-  
mit to Congress a report containing the number of persons  
reported by each State to the National Instant Criminal  
Background Check System who are prohibited from pos-  
sessing or receiving a firearm under section 922(g)(9) of  
title 18, United States Code.”;

20                   (2) by redesignating subsection (d) as (e); and  
21                   (3) by inserting after subsection (c) the fol-  
22                   lowing:

**23        "(d) REPORT ON PROMISING PRACTICES.—**

“(1) IN GENERAL.—Not later than 180 days after the date of enactment of the Safer Commu-

1       nities Act of 2017, and annually thereafter, the Di-  
2       rector shall submit to Congress and to each State  
3       participating in the National Criminal History Im-  
4       provement Program, a report of the practices of the  
5       States that the Director considers to be promising  
6       practices.

7               “(2) PROMISING PRACTICE DEFINED.—For  
8       purposes of this subsection, the term ‘promising  
9       practice’ means a program, activity, or strategy of a  
10      State regarding the collection, maintenance, automa-  
11      tion, and transmittal of information relevant to de-  
12      termining whether a person is prohibited from pos-  
13      sessing or receiving a firearm by Federal or State  
14      law, by the State or any other agency, or any other  
15      records relevant to the National Instant Criminal  
16      Background Check System, that the Director deter-  
17      mines—

18               “(A) has been used by a State or other  
19       agency to successfully increase or expand its  
20       ability to collect, maintain, automate, and  
21       transmit the information described in the mat-  
22       ter preceding this subparagraph;

23               “(B) shows promise in its early stages of  
24       becoming a best practice under subsection (c),  
25       with long-term sustainable impact; and

1               “(C) may be replicated by other States or  
2               agencies.”.

3 **SEC. 602. REAUTHORIZATION OF THE NATIONAL CRIMINAL  
4               HISTORY RECORDS IMPROVEMENT PRO-  
5               GRAM.**

6               Section 106(b) of Public Law 103–159 (34 U.S.C.  
7 40302) is amended—

8               (1) in paragraph (1), in the matter preceding  
9               subparagraph (A), by striking “of this Act” and in-  
10              serting “of the Safer Communities Act of 2017”;  
11              and

12              (2) by striking paragraph (2) and inserting the  
13              following:

14              “(2) AUTHORIZATION OF APPROPRIATIONS.—  
15              There are authorized to be appropriated for grants  
16              under this subsection \$100,000,000 for each of fis-  
17              cal years 2019 through 2023.”.

18 **SEC. 603. IMPROVEMENT OF METRICS AND INCENTIVES.**

19              Section 102(b) of the NICS Improvement Amend-  
20              ments Act of 2007 (34 U.S.C. 40912) is amended to read  
21              as follows:

22              “(b) IMPLEMENTATION PLAN.—

23              “(1) IN GENERAL.—Not later than 1 year after  
24              the date of enactment of the Safer Communities Act  
25              of 2017, the Attorney General, in coordination with

1       the States, shall establish for each State or Indian  
2       tribal government applying for a grant under section  
3       103 a 4-year implementation plan to ensure max-  
4       imum coordination and automation of the reporting  
5       of records or making records available to the Na-  
6       tional Instant Criminal Background Check System.

7               “(2) BENCHMARK REQUIREMENTS.—Each 4-  
8       year plan established under paragraph (1) shall in-  
9       clude annual benchmarks, including both qualitative  
10      goals and quantitative measures, to assess imple-  
11      mentation of the 4-year plan.

12               “(3) PENALTIES FOR NON-COMPLIANCE.—

13               “(A) IN GENERAL.—During the 4-year pe-  
14       riod covered by a 4-year plan established under  
15       paragraph (1), the Attorney General shall with-  
16       hold—

17               “(i) 10 percent of the amount that  
18       would otherwise be allocated to a State  
19       under section 505 of the Omnibus Crime  
20       Control and Safe Streets Act of 1968 (34  
21       U.S.C. 10156) if the State does not meet  
22       the benchmark established under para-  
23       graph (2) for the first year in the 4-year  
24       period;

1                     “(ii) 11 percent of the amount that  
2                     would otherwise be allocated to a State  
3                     under section 505 of the Omnibus Crime  
4                     Control and Safe Streets Act of 1968 (34  
5                     U.S.C. 10156) if the State does not meet  
6                     the benchmark established under para-  
7                     graph (2) for the second year in the 4-year  
8                     period;

9                     “(iii) 13 percent of the amount that  
10                    would otherwise be allocated to a State  
11                    under section 505 of the Omnibus Crime  
12                    Control and Safe Streets Act of 1968 (34  
13                    U.S.C. 10156) if the State does not meet  
14                    the benchmark established under para-  
15                    graph (2) for the third year in the 4-year  
16                    period; and

17                    “(iv) 15 percent of the amount that  
18                    would otherwise be allocated to a State  
19                    under section 505 of the Omnibus Crime  
20                    Control and Safe Streets Act of 1968 (34  
21                    U.S.C. 10156) if the State does not meet  
22                    the benchmark established under para-  
23                    graph (2) for the fourth year in the 4-year  
24                    period.

1                   “(B) FAILURE TO ESTABLISH A PLAN.—A  
2                   State that fails to establish a plan under para-  
3                   graph (1) shall be treated as having not met  
4                   any benchmark established under paragraph  
5                   (2).”.

**6 SEC. 604. GRANTS TO STATES TO IMPROVE COORDINATION  
7 AND AUTOMATION OF NICS RECORD REPORT-  
8 ING.**

9           (a) IN GENERAL.—The NICS Improvement Amend-  
10 ments Act of 2007 (34 U.S.C. 40901 et seq.) is amend-  
11 ed—

14 "SEC. 103. GRANTS TO STATES FOR IMPROVEMENT OF CO-  
15 ORDINATION AND AUTOMATION OF NICS  
16 RECORD REPORTING.

17       “(a) AUTHORIZATION.—From amounts made avail-  
18 able to carry out this section, the Attorney General shall  
19 make grants to States, Indian Tribal governments, and  
20 State court systems, in a manner consistent with the Na-  
21 tional Criminal History Improvement Program and con-  
22 sistent with State plans for integration, automation, and  
23 accessibility of criminal history records, for use by the  
24 State, or units of local government of the State, Indian  
25 Tribal government, or State court system to improve the

1 automation and transmittal of mental health records and  
2 criminal history dispositions, records relevant to deter-  
3 mining whether a person has been convicted of a mis-  
4 demeainer crime of domestic violence, court orders, and  
5 mental health adjudications or commitments to Federal  
6 and State record repositories in accordance with section  
7 102 and the National Criminal History Improvement Pro-  
8 gram.

9       “(b) USE OF GRANT AMOUNTS.—Grants awarded to  
10 States, Indian Tribal governments, or State court systems  
11 under this section may only be used to—

12           “(1) carry out, as necessary, assessments of the  
13 capabilities of the courts of the State or Indian Trib-  
14 al government for the automation and transmission  
15 of arrest and conviction records, court orders, and  
16 mental health adjudications or commitments to Fed-  
17 eral and State record repositories;

18           “(2) implement policies, systems, and proce-  
19 dures for the automation and transmission of arrest  
20 and conviction records, court orders, and mental  
21 health adjudications or commitments to Federal and  
22 State record repositories;

23           “(3) create electronic systems that provide ac-  
24 curate and up-to-date information which is directly  
25 related to checks under the National Instant Crimi-

1       nal Background Check System, including court dis-  
2       position and corrections records;

3               “(4) assist States or Indian Tribal governments  
4       in establishing or enhancing their own capacities to  
5       perform background checks using the National In-  
6       stant Criminal Background Check System; and

7               “(5) develop and maintain the relief from dis-  
8       abilities program in accordance with section 105.

9       “(c) ELIGIBILITY.—

10               “(1) IN GENERAL.—To be eligible for a grant  
11       under this section, a State, Indian Tribal govern-  
12       ment, or State court system shall certify, to the sat-  
13       isfaction of the Attorney General, that the State, In-  
14       dian Tribal government, or State court system—

15               “(A) is not prohibited by State law or  
16       court order from submitting mental health  
17       records to the National Instant Criminal Back-  
18       ground Check System; and

19               “(B) subject to paragraph (2), has imple-  
20       mented a relief from disabilities program in ac-  
21       cordance with section 105.

22       “(2) RELIEF FROM DISABILITIES PROGRAM.—  
23       For purposes of obtaining a grant under this sec-  
24       tion, a State, Indian Tribal government, or State  
25       court system shall not be required to meet the eligi-

1       bility requirement described in paragraph (1)(B)  
2       until the date that is 2 years after the date of enact-  
3       ment of the Safer Communities Act of 2017.

4       “(d) FEDERAL SHARE.—

5           “(1) STUDIES, ASSESSMENTS, NON-MATERIAL  
6       ACTIVITIES.—The Federal share of a study, assess-  
7       ment, creation of a task force, or other non-material  
8       activity, as determined by the Attorney General, car-  
9       ried out with a grant under this section shall be not  
10      more than 25 percent.

11       “(2) INFRASTRUCTURE OR SYSTEM DEVELOP-  
12      MENT.—The Federal share of an activity involving  
13       infrastructure or system development, including  
14       labor-related costs, for the purpose of improving  
15       State or Indian Tribal government record reporting  
16       to the National Instant Criminal Background Check  
17       System carried out with a grant under this section  
18       may amount to 100 percent of the cost of the activ-  
19       ity.

20       “(e) GRANTS TO INDIAN TRIBES.—Up to 5 percent  
21      of the grant funding available under this section may be  
22      reserved for Indian tribal governments for use by Indian  
23      tribal judicial systems.

24       “(f) AUTHORIZATION OF APPROPRIATIONS.—There  
25      are authorized to be appropriated to carry out this section

1 \$100,000,000 for each of fiscal years 2018 through  
2 2021.”;

3 (2) by striking title III; and  
4 (3) in section 401(b), by inserting after “of this  
5 Act” the following: “and 18 months after the date  
6 of enactment of the Safer Communities Act of  
7 2017”.

8 (b) TECHNICAL AND CONFORMING AMENDMENT.—  
9 The table of sections in section 1(b) of the NICS Improve-  
10 ment Amendments Act of 2007 is amended by striking  
11 the item relating to section 103 and inserting the fol-  
12 lowing:

“Sec. 103. Grants to States for improvement of coordination and automation  
of NICS record reporting.”.

13 **SEC. 605. SHARING OF RECORDS BY FEDERAL DEPART-  
14 MENTS AND AGENCIES WITH NICS.**

15 Section 101(b) of the NICS Improvement Act of  
16 2007 (34 U.S.C. 40911) is amended—

17 (1) in paragraph (2)—  
18 (A) in subparagraph (B), by striking  
19 “and” at the end;  
20 (B) in subparagraph (C), by striking the  
21 period at the end and inserting “; and”; and  
22 (C) by inserting at the end the following:  
23 (D) not later than 180 days after the  
24 date of the enactment of the Safer Communities

1           Act of 2017, and annually thereafter, submit a  
2           report to Congress on the compliance of the  
3           heads of Federal departments and agencies  
4           with the requirements of paragraphs (1) and  
5           (3).”;

6           (2) by adding at the end the following:

7           “(3) OTHER FEDERAL DEPARTMENTS AND  
8           AGENCIES.—The head of each Federal department  
9           or agency in possession of records which are relevant  
10          to a determination of whether a person is disquali-  
11          fied from possessing or receiving a firearm under  
12          subsection (g) or (n) of section 922 of title 18,  
13          United States Code, shall make available to the At-  
14          torney General, such records, updated not less than  
15          quarterly, for use in the background checks per-  
16          formed by the National Instant Criminal Back-  
17          ground Check System.”.

○