



NATIONAL CONFERENCE OF STATE LEGISLATURES

LEGISLATIVE SUMMIT
August 2025
BOSTON, MASSACHUETTS

DEBATE CALENDAR

BANKING, FINANCIAL SERVICES AND INSURANCE

LIABILITY INSURANCE FOR ARTIFICIAL INTELLIGENCE

EDUCATION

URGING PROMPT ALLOCATION OF FY25 FEDERAL EDUCATION FUNDING TO STATES

REAUTHORIZATION OF THE HIGHER EDUCATION ACT

HEALTH

ADDRESSING HEALTH WORKFORCE SHORTAGES

PUBLIC HEALTH

ARTIFICIAL INTELLIGENCE IN HEALTH CARE

LAW AND PUBLIC SAFETY

REGARDING TREATMENT OF ASYLUM SEEKERS AT SOUTHERN BORDER AND PORTS OF ENTRY

LAW AND PUBLIC SAFETY AND LABOR AND ECONOMIC DEVELOPMENT

INCREASING VISA CAPS AND LEGAL IMMIGRATION TO END LABOR SHORTAGE

LAW AND PUBLIC SAFETY AND NATURAL RESOURCES, ENERGY AND ENVIRONMENT

NATURAL DISASTER MANAGEMENT

NATURAL RESOURCES, ENERGY AND ENVIRONMENT

DATA CENTER IMPACTS ON POWER GENERATION AND GRID RESILIENCY

ELECTROMAGNETIC PULSES AND SOLAR FLARES

RECOVERING AMERICA'S WILDLIFE

TECHNOLOGY AND COMMUNICATIONS

UNIVERSAL SERVICE FUND

1 **COMMITTEE: BANKING, FINANCIAL SERVICES & INSURANCE**

2 **POLICY: LIABILITY INSURANCE FOR ARTIFICIAL**
3 **INTELLIGENCE**

4 **TYPE: DEBATE DIRECTIVE**

5 **Responsible AI Development**

6 An important goal of federal policy should be to ensure that the development and
7 deployment of advanced AI systems is conducted responsibly.

8 Advanced AI systems may generate risks of harm that exceed the ability of their
9 developers or deployers to compensate the victims.

10 Supporting the development of liability insurance commensurate with each technology's
11 risk level will provide an economic incentive for advanced AI system developers or
12 deployers to take appropriate precautions to avoid the occurrence of damage and
13 protect the public.

14 **Federal-State Collaboration**

15 NCSL requests that Congress work with state insurance regulators to create a
16 framework to support the insurance industry in the voluntary development of suitable
17 and sound liability insurance products for the developers and deployers of advanced AI
18 systems, with coverage and premium requirements that are based on an assessment of
19 the system's high-risk potential and on sound actuarial principles that appropriately
20 account for risk and uncertainty.

21 High-risk AI applications, such as those used in autonomous vehicles, financial
22 decision-making, healthcare diagnostics and critical infrastructure, require closer
23 oversight and accountability measures to prevent harm. These applications present
24 elevated potential for major losses that could affect entire communities or economic
25 sectors. Any liability or insurance framework for AI systems should be grounded in clear
26 and transparent standards to ensure fairness, accountability, financial solvency and
27 public trust.

1 **COMMITTEE: EDUCATION**

2 **POLICY: URGING PROMPT ALLOCATION OF FY25 FEDERAL**
3 **EDUCATION FUNDING TO STATES**

4 **TYPE: DEBATE RESOLUTION**

5 **WHEREAS**, NCSL’s directive on “The State-Federal Partnership in Elementary and
6 Secondary Education” states that a “healthy state-federal partnership ... Maintains
7 steady resource streams, such as formula funding, as the primary funding source for
8 state education aid”; and

9

10 **WHEREAS**, Congress appropriated annual funding for programs authorized by the
11 Elementary and Secondary Education Act (ESEA) through a fiscal year 2025 continuing
12 resolution, which was signed into law on March 15, 2025; and

13

14 **WHEREAS**, the U.S. Department of Education has traditionally announced allocations
15 for the upcoming school year by July 1 and states and districts have come to rely on this
16 date for budget planning; and

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18 **WHEREAS**, the Department of Education has already announced fiscal year 2025
19 allocations for the ESEA Title I program and state grants through the Individuals with
20 Disabilities Education Act; and

21

22 **WHEREAS**, the Department of Education recently announced on June 30 “Given the
23 change in Administrations, the Department is reviewing the FY 2025 funding for the
24 [Title I-C, II-A, III-A, IV-A, IV-B] grant program(s), and decisions have not yet been made
25 concerning submissions and awards for this upcoming academic year. Accordingly, the
26 Department will not be issuing Grant Award Notifications obligating funds for these
27 programs on July 1 prior to completing that review.”; and

28

29 **WHEREAS**, programs undergoing ongoing review amount to more than \$6 billion in
30 funding and include support for teacher professional development, English learners,

31 student academic enrichment, summer and afterschool programs, and migrant
32 education; and

33

34 **WHEREAS**, these programs amount to between 10 and 20 percent of federal support to
35 states for elementary and secondary education; and

36

37 **WHEREAS**, further delays in funding allocations create fiscal uncertainty for states and
38 school districts as the new school year begins; and

39

40 **WHEREAS**, an extended period of review and withholding may result in schools scaling
41 back or ending education programs and letting go of teachers and support staff who had
42 committed to teach in the upcoming school year;

43

44 **NOW, THEREFORE BE IT RESOLVED**, the National Conference of State Legislatures
45 urges the U.S. Office of Management and Budget and the U.S. Department of
46 Education to expedite its review of federal education formula grant programs and
47 promptly allocate funding for these programs to minimize the disruption to the education
48 of students across the states; and

49

50 **NOW, THEREFORE BE IT FURTHER RESOLVED**, the federal government should
51 communicate and consult with state legislatures should it continue to withhold funds so
52 that states can understand the rationale for its review and its anticipated timeline for
53 completing that review; and

54

55 **BE IT FINALLY RESOLVED**, that NCSL should send a copy of this resolution to the
56 U.S. Office of Management and Budget and the U.S. Department of Education.

1 **COMMITTEE: EDUCATION**

2 **POLICY: REAUTHORIZATION OF THE HIGHER EDUCATION**
3 **ACT**

4 **TYPE: DEBATE RESOLUTION**

5 **WHEREAS**, Congress has not reauthorized the Higher Education Act (HEA) since
6 2008; and

7

8 **WHEREAS**, student loan debt has nearly tripled since that time and total debt for
9 graduate education has steadily increased and surpassed undergraduate debt; and

10

11 **WHEREAS**, higher education remains a great investment for many, yet nearly one third
12 of borrowers have debt but no degree and more than 7 million borrowers are in default;
13 and

14

15 **WHEREAS**, annual federal spending on loan repayment has recently surpassed annual
16 spending on need-based financial aid through the Pell Grant; and

17

18 **WHEREAS**, almost all of the significant federal policies on higher education have been
19 enacted through regulations from the U.S. Department of Education since the last HEA
20 reauthorization; and

21

22 **WHEREAS**, federal policymaking that relies heavily on regulation creates an unstable
23 policy environment for states and higher education, as administrations have engaged in
24 a pattern of rewriting or rescinding previous rules, or courts have temporarily blocked or
25 overturned rules; and

26

27 **WHEREAS**, federal regulation is not well-designed to proactively achieve state and
28 federal goals for better outcomes in higher education;

29

30 **NOW, THEREFORE,** the National Conference of States Legislatures calls on Congress
31 to reauthorize the Higher Education Act on a bipartisan basis to clarify and articulate
32 anew the role of the federal government in supporting the affordability of higher
33 education and advancing better student outcomes; and

34
35 **NOW, THEREFORE, BE IT RESOLVED,** that a reauthorized Higher Education Act
36 should emphasize federal efforts to promote transparency and improvement in higher
37 education, rather than pursue expansive affordability or accountability policies, in order
38 to help states and higher education better understand student outcomes and take action
39 to address circumstances where those outcomes fall short of expectations; and

40
41 **NOW, THEREFORE, BE IT FURTHER RESOLVED,** that a reauthorized Higher
42 Education Act must clarify and articulate the role and goals of the student loan program,
43 especially as it relates to loan terms, loan limits, repayment assistance, and
44 forgiveness; and

45
46 **NOW, THEREFORE, BE IT FURTHER RESOLVED,** that a reauthorized Higher
47 Education Act should better support students' understanding of the costs of higher
48 education by: requiring universities to communicate financial aid through a standardized
49 offer letter, creating a universal net price calculator, requiring students to engage in
50 annual loan counseling with enhanced disclosure requirements; notifying students of
51 their uptake of federal aid relative to cumulative limits; improving the accuracy of
52 student outcomes in federal data collection; and

53
54 **NOW, THEREFORE, BE IT FURTHER RESOLVED,** that a reauthorized Higher
55 Education Act should better support student success by: providing greater access to
56 TRIO programs for non-traditional students, increasing meaningful work-based
57 opportunities through the Federal Work-Study program, including allowing students to
58 work for federal Head Start programs.

59

60 **BE IT FINALLY RESOLVED**, that NCSL send a copy of this resolution to Members of
61 Congress, including the Chairs, Ranking Members, and members of the Senate Health,
62 Education, Labor, and Pensions Committee and the House Committee on Education
63 and the Workforce.

1 **COMMITTEE: HEALTH**

2 **POLICY: ADDRESSING HEALTH WORKFORCE**
3 **SHORTAGES**

4 **TYPE: DEBATE DIRECTIVE**

5 NCSL supports federal efforts to address health workforce shortages. In particular:

6

7 **National Health Services Corps**

8 NCSL urges Congress through the National Health Service Corps (NHSC) programs to:

- 9 1. develop additional mechanisms to recruit and retain participants;
- 10 2. augment informal efforts to match communities with specific cultural traditions with
11 health care providers with shared cultural experiences, or who are specifically
12 trained in culturally diverse community-based systems of care;
- 13 3. increase and formalize efforts to recruit and place health professionals who
14 represent racial and ethnic minorities in communities who request them;
- 15 4. improve training to encompass cultural competency that considers
16 geographical/regional differences that may affect the health delivery system;
- 17 5. more directly involve communities in the recruitment, selection and retention of
18 health care professionals through community sponsorships;
- 19 6. increase the emphasis on public/private partnerships, including faith-based
20 institutions, to enhance community involvement and contractual arrangements with
21 independent health care providers;
- 22 7. develop programs, including a community needs assessment and telehealth, to
23 assist remote communities that are too small for community health centers but
24 need assistance in obtaining primary health care for its citizens; and
- 25 8. provide technical assistance to states and local communities in implementing
26 NHSC programs and maximizing resources.

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The Conrad 30 State J-1 Visa Program

NCSL urges Congress to:

- Permanently authorize the Conrad 30 State J-1 Visa program;
- Make additional waivers in states for academic medical centers;
- Increase the current cap on the number of visa waivers per state;
- Allow physicians who work in underserved areas for five years (three of which could be through the Conrad 30 program) to be eligible for a green card through the physician National Interest Waiver (NIW) program and exempt from the worldwide cap on employment-based green cards;
- Allow physicians who serve in Conrad 30 "flex" spots to be eligible for the National Interest Waiver (NIW) green card program.
- Allow physicians who enter the country on a J visa to receive graduate medical education or training with the intent to immigrate permanently; and
- Allow spouses and children of physicians on J visas to be exempt from the two-year home country return requirement.

Health Professions Grants and Cooperative Agreements

NCSL urges Congress to support programs that:

- support innovations and expansions in health professions education and training;
- prepare health care providers to serve diverse populations; and
- prepare health providers to practice in the nation's medically underserved areas and health professional shortage areas.

Community Health Centers, Rural Health Clinics, Rural Emergency Hospitals and Federally-Qualified Health Centers

53 NCSL urges Congress to continue its support of community health centers, rural health
54 clinics, rural emergency hospitals and Federally Qualified Health Centers and similar and
55 related facilities that play critical roles in the health care safety net.

56 NCSL urges Congress to adopt legislation that amends the Public Health Service Act to
57 deem a health professional volunteer providing primary health care to an individual at a
58 community health center or rural health center to be an employee of the Public Health
59 Service for purposes of any civil action that may arise from providing services to patients.

60 This protection would apply when:

- 61 1. the service is provided to the individual at a community health center or rural
62 health center through offsite programs or events carried out by the center; and
- 63 2. the health care practitioner does not receive any compensation for providing the
64 service, except repayment for reasonable expenses.

65

66 **Rural Health Programs and State Rural Health Offices**

67 NCSL urges Congress to:

- 68 • Support discretionary rural health programs that provide important health service
69 support and resources to rural and remote areas of the country. Programs include,
70 but are not limited to:

- 71 ○ Rural health outreach grants
- 72 ○ Rural health research program
- 73 ○ Rural health flexibility grants
- 74 ○ Telehealth programs

75 NCSL urges Congress to continue its support of the State Office of Rural Health Grant
76 Program. Today's state offices provide an institutional framework that links small rural
77 communities with state and federal resources and develops long-term solutions to rural
78 health problems. States have become a major agent for change in rural health policy and
79 service delivery, due in part to the work performed by the state rural health offices.

80

81 **Telehealth**

82 NCSL urges Congress to support state-driven efforts to modernize licensure portability
83 while preserving the integrity of state-based regulation, oversight, and public
84 accountability by:

- 85 • preserving state authority in licensure and scope of practice for care provided in-
86 person or via telehealth.
- 87 • supporting state-driven licensure portability solutions through aligned federal
88 policy, funding and administrative flexibility
- 89 • enabling portability while ensuring all patients receive high-quality, accountable
90 care—regardless of how or where it is delivered.
- 91 • bolstering state data-sharing systems, reporting infrastructure, and disciplinary
92 coordination—particularly in cases involving cross-border practice.
- 93 • preserving state authority to investigate misconduct, enforce professional
94 standards, and safeguard public health.
- 95 • providing flexible federal funding to support licensure system modernization, data
96 infrastructure, and portability initiatives;
- 97 • supporting cross-jurisdictional collaboration, led by states, that preserves
98 accountability and protects patients.

99

100 **Workforce Training**

101 NCSL urges Congress to consider legislation that will help health professionals better
102 meet the unique needs of the communities they are serving.

103

104 **Graduate Education**

105 Recognizing that states are best equipped to assess and address their unique workforce
106 needs, NCSL urges the federal government to:

- 107 • expand federal funding for GME slots with priority given to states with provider
108 shortages and underserved areas.

- 109 • allow states greater flexibility in how Medicare-funded GME slots are allocated to
110 meet regional needs (e.g., by specialty, rural location, or high-need populations).
- 111 • create a federal-state matching mechanism for new GME slots to incentivize
112 investment in community-based and rural training sites.
- 113 • prioritize funding for providers who commit to serving in shortage areas as defined
114 by federal workforce assessments.
- 115 • provide states with block grants or matching funds to create or enhance state-level
116 loan repayment programs tailored to their workforce gaps.
- 117 • establish a federal Health Workforce Innovation Fund for states to pilot and scale
118 strategies such as apprenticeship models, residency consortia, telehealth training,
119 and career pipelines into and throughout health care centers.
- 120 • ensure equitable access to federal workforce funds for states regardless of
121 population size or political affiliation.
- 122 • enhance federal investment in workforce data infrastructure to support state
123 workforce planning, including standardized data sharing, forecasting tools, and
124 labor market analysis.

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COMMITTEE: HEALTH

POLICY: PUBLIC HEALTH

TYPE: DEBATE DIRECTIVE

Federal support through grants and cooperative agreements, research and technical assistance is key to the stabilization and effective operation of the nation’s public health system and provides critical support for the state and local public health infrastructure NCSL urges the administration and Congress to continue to support:

- timely funding of grants and cooperative agreements to state and local governments for a broad range of public health activities; and
- research and technical assistance, which assists states in the development and implementation of effective public health programs.
- efforts to foster the development of public and private sector partnerships to increase community accessibility to public health information and public health programs.

Health Disparities

NCSL urges HHS and its agencies, offices, institutes, and centers to work with NCSL and state policymakers to reduce and eliminate health disparities by: (1) identifying non medical drivers of health that are major contributors to health disparities; and (2) helping to create and enhance standards for the collection and reporting of data by federally funded health and health care programs. This data should include:

1. race, ethnicity, sex, primary language, disability status;
2. those living in rural, underserved metropolitan and frontier areas; and
3. other characteristics identified by the Secretary of HHS.

25 Improved data collection and reporting will enable the analysis and monitoring of health
26 disparity trends and support the development of promising practices and programs to
27 eliminate disparities, based on the data collected.

28

29 **Reporting Requirements**

30 NCSL believes reporting requirements are important but should be limited to
31 requirements where there is a reasonable expectation that the data will be used to: (1)
32 analyze trends; (2) improve patient outcomes; (3) improve program effectiveness; and
33 (4) eliminate health disparities. In addition, efforts must be made to impose data
34 collection and reporting requirements in the least burdensome way possible.

35

36 **Funding**

37 NCSL urges the President and Congress to maintain funding to HHS agencies and
38 offices, to:

- 39 1. support the continued efforts to mobilize a nationwide, comprehensive,
40 community-driven and sustained approach to combating health disparities, and;
- 41 2. continue support for strategies to help guide action at the local, state, and
42 regional levels;
- 43 3. augment outreach and other efforts targeting populations, including racial and
44 ethnic minorities, at higher risk of chronic diseases and illnesses;
- 45 4. provide quality and efficient care;
- 46 5. improve health outcomes;
- 47 6. increase cost-effectiveness;
- 48 7. meet legislative, organizational, and accreditation standards; and
- 49 8. develop additional evidence-based prevention and interventions targeting ethnic
50 and racial minorities.

51

52 **Clinical Trials and Research**

53 NCSL urges the federal government to make every effort to include more women and
54 minorities in clinical trials and other research initiatives to improve health care strategies
55 and programs and to eliminate disparities.

56

57 **Health Promotion and Disease Prevention**

58 NCSL urges the administration and Congress to continue to support public health
59 education initiatives that:

- 60 • are culturally sensitive, language accessible, and age appropriate
- 61 • integrate messages that promote healthy lifestyle choices;
- 62 • include strategies for disease prevention; and
- 63 • are tailored approaches for all communities and age groups, including
64 populations with specific health concerns, needs or elevated risks.

65

66 **Healthy and Responsible Lifestyle Choices**

67 NCSL supports programs that promote voluntary healthy lifestyle choices and reduce
68 high-risk behaviors through education, counseling and treatment, and encourages the
69 federal government to provide adequate funding for these programs.

70

71 **Preventive Health and Health Services Block Grant**

72 NCSL urges Congress to continue to support this program. Under this program, states
73 are given maximum flexibility to design and implement programs that meet the needs of
74 their citizens.

75

76 **Preventive Health Screenings and Check-Ups**

77 NCSL urges Congress to increase support for initiatives to promote regular preventive
78 health screenings and check-ups. NCSL strongly supports efforts to educate the public
79 about and encourage e screenings for conditions such as cardiovascular disease,
80 dental disease, obesity, asthma, diabetes, and cancer. NCSL also supports efforts to
81 ensure that children receive age-appropriate check-ups and screenings, including:

82 recommended childhood immunizations, comprehensive dental, vision and hearing
83 screenings, and access to appropriate follow-up care and treatment. NCSL encourages
84 efforts to maintain affordable and accessible preventive services. These preventive
85 efforts help to improve long-term health outcomes and reduce chronic disease.

86

87 **Chronic Disease Management**

88 NCSL urges Congress to continue to support initiatives that promote affordable access
89 to care and effective management of chronic conditions such as obesity, cardiovascular
90 disease, dental disease, diabetes, asthma, kidney disease, mental health disorders, and
91 a wide range of autoimmune diseases. NCSL supports initiatives that provide case
92 management services – particularly to children with one or more chronic conditions – to
93 ensure coordinated, comprehensive, and continuous care.

94

95 **Oral Health**

96 NCSL supports federal initiatives that promote oral health by encouraging individuals to
97 have regular check-ups and to practice good oral hygiene. These initiatives should
98 include educational activities that emphasize the connection between oral health and
99 overall well-being. NCSL supports efforts to increase access to quality, affordable dental
100 care, including initiatives to improve public and private sector coverage of dental
101 services, and improve oral health literacy within the public. NCSL also urges HHS to
102 provide states flexibility to develop innovative Medicaid dental programs to increase
103 access to and utilization of oral health care services.

104

105 **Health Education for Health Care Professionals**

106 NCSL supports efforts to encourage institutions that train health professionals to
107 incorporate greater emphasis on culturally competent health promotion and disease
108 prevention in their curricula. Expanding provider training in these areas can improve
109 patient communication, increase trust, and lead to better health outcomes in diverse
110 communities.

111

112 **Access to Health Screenings and Disease Treatment**

113 NCSL supports efforts to encourage insurers and other third-party payers, including
114 Medicare and Medicaid, to cover evidence-based cancer screening tests and
115 treatments. NCSL supports federal initiatives to improve coverage of cancer-related
116 services that have been proven effective through evidence-based evaluations,
117 ensuring individuals have access to timely and appropriate screening and care.

118

119 **Technical Assistance to States to Improve the Quality, Capacity, and Access of** 120 **Mental Health Services**

121 NCSL urges HHS to provide technical assistance to states to monitor and improve the
122 provision of mental health services to adults and children. NCSL also encourages HHS
123 to collaborate with the medical community to develop guidance regarding behavior
124 therapies, either as alternatives to or in combination with psychotropic medications, to
125 reduce reliance medications as the primary or sole treatment option.

126

127 **Mental Health Treatment of Children**

128 NCSL encourages the federal government to support efforts to:

- 129 1. Develop evidence-based treatment protocols to be used prior to initiating
130 pharmacotherapies;
- 131 2. Offer guidance to the primary care community on effective alternatives to
132 pharmacotherapy for treating mental illness in children; and
- 133 3. Strengthen and expand the pediatric mental health workforce.

134

135 **Vaccines and Immunizations**

136

137 **Childhood Immunizations**

138 NCSL supports efforts to increase the overall number of children immunized. This
139 includes expanding the availability of vaccines through alternative sites – such as
140 schools, community health centers, or other community settings – to deliver vaccines to
141 children when appropriate, cost effective, and convenient. NCSL urges the federal
142 government to increase public education initiatives that provide parents with accurate,

143 up-to-date information about recommended childhood immunizations for their children.
144 NCSL also supports continued research to improve the safety and efficacy of childhood
145 immunizations. NCSL urges Congress and the Administration to work with states to
146 ensure every child receives the recommended childhood immunizations and to improve
147 immunization delivery, education, and funding and other policies to help meet that goal
148 over the long term. Finally, NCSL asks Congress to continue to allow states to set their
149 own childhood vaccine coverage policies.

150

151 **Adult Immunizations**

152 NCSL urges Congress to continue efforts to increase the number of adults who receive
153 recommended immunizations and encourages targeted outreach to ensure high-risk
154 adults, young adults, and older adults receive all recommended immunizations, with
155 particular attention to addressing barriers related to cost, convenience, and health
156 literacy.

157

158 **Vaccine Supply**

159 NCSL urges the administration and Congress to provide or appropriate sufficient funds
160 to maintain a reasonable national stockpile of vaccines, including pediatric
161 immunizations, seasonal influenza vaccines and vaccines that may be used during
162 potential pandemics to ensure timely access for all individuals and to support equitable
163 distribution during times of increased demand.

164

165 **Workplace Safety and Health Care Workers**

166

167 **Occupational Hazards/Workplace Safety**

168 NCSL urges the federal government to increase awareness of occupational hazards
169 and promote workplace safety through accessible education and prevention strategies..
170 Information and resources must be provided to both employers and employees and
171 should be included in broader national efforts to emphasize health promotion and
172 disease prevention.

173

174 **Pandemic and All-Hazards Preparedness**

175 State and local governments are the first line of defense against acts of bioterrorism and
176 other public health emergencies. State legislators are committed to enhancing the ability
177 of their states to prepare for and respond to these events. A strong partnership between
178 states, the federal government, and other public and private non-profit entities is the
179 best way to accomplish this goal. NCSL urges to the administration and Congress to:

- 180 1. provide states, territories, and the District of Columbia with direct, sufficient and
181 stable funding to enable them to continue to build and maintain infrastructure to
182 support ongoing efforts to respond to bioterrorism and other public health
183 emergencies;
- 184 2. pass federal funds through the states for distribution to local governments,
185 hospitals and other entities, permitting state officials to take the lead in planning
186 on a regional and statewide basis and utilize federal funds in the most efficient
187 and effective way;
- 188 3. require federal grantees to collaborate with their respective states and coordinate
189 all of their activities with the state plan;
- 190 4. provide states the flexibility necessary to meet their diverse needs and priorities;
- 191 5. build upon existing national and state preparedness initiatives rather than
192 duplicating efforts;
- 193 6. ensure that regulations and requirements imposed on states are accompanied by
194 sufficient funding and realistic deadlines for implementation, both immediately
195 and in the long term; and
- 196 7. authorize the appropriate federal official to temporarily waive or modify the
197 application of federal laws that may impede timely state-level responses during a
198 bioterrorist attack or other public health emergency.

199

200 **Public Health and the Environment**

201

202 **Lead Poisoning**

203 NCSL supports federal efforts to prevent and detect lead poisoning in children and the
204 environment. NCSL urges the federal government to continue to assist state and local
205 health officials in addressing this serious health care problem.

206
207 **Vector-Borne Illness**

208 NCSL supports the efforts of the CDC to prevent and respond to vector-borne illness,
209 including-Chikungunya, Eastern equine encephalitis virus (EEEV), Lyme-Disease,
210 Malaria, Rocky Mountain spotted fever, West Nile Virus, and Zika virus—by:

- 211 1. providing training and assistance to front-line disease surveillance and response
212 staff;
- 213 2. offering clinical education programs to health care providers;
- 214 3. collaborating with state and local health departments; and
- 215 4. providing funding to states to support epidemiology, vector control, and response
216 activities addressing vector-borne disease.

217

218 **Maternal and Child Health**

219

220 **Maternal and Child Health (MCH) Block Grant**

221 The MCH block grant allows states to provide a broad range of health services for
222 mothers and children. NCSL supports the MCH block grant and urges Congress to
223 continue to provide adequate funding. NCSL opposes efforts to transfer program
224 responsibilities to the MCH block grant without the funding to accompany it, thereby
225 reducing the funding available to functions currently funded through the block grant.

226

227 **The Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)**

228 The MIECHV program facilitates collaboration and partnership at the federal, state, and
229 community levels to improve the outcomes of at-risk children through evidence-based
230 home visiting programs. NCSL supports community-based, state-federal partnerships

231 and initiatives work with parents and caregivers to provide a supportive environments
232 that:

- 233 1. improve maternal and child health;
- 234 2. promote healthy child development and school readiness;
- 235 3. improve parenting skills; and
- 236 4. prevent child abuse and neglect.

237
238 NCSL urges Congress to continue financial support for the MIECHV program and to
239 provide state flexibility in the administration of the program based on needs
240 assessments that identify community and family vulnerabilities.

241

242 **Universal Newborn Screening**

243 The Universal Screening program provides competitive grants to states for the
244 implementation of a national program of universal newborn screening that includes
245 using a few drops of blood from a newborn's heel within 24-48 hours after birth to
246 screen for certain genetic, endocrine and metabolic disorders, as well as newborn
247 hearing screening. Newborn hearing screening consists of: (1) physiologic testing prior
248 to hospital discharge; (2) audiologic evaluation by three months of age; and (3) entry
249 into a program of early intervention by six months of age.

250

251 NCSL supports the State Universal Newborn Screening program and urges Congress to
252 continue to provide adequate funding. NCSL supports the autonomy of each state to
253 execute its state screening program and supports federal efforts that incentivize states
254 to screen for every disorder included on the federal Recommended Uniform Screening
255 Panel (RUSP) and to include new conditions added to the RUSP in the future to the
256 state screening panel in a timely manner.

257

258 **Teen Pregnancy Prevention**

259 The federal government offers a range of programs and supports to state governments
260 to help reduce teen pregnancies recognizing that state, tribal, and local governments

261 are best situated to determine the best programs for their constituents. NCSL supports
262 the full range of programs available to state, tribal, and local governments and
263 researchers to help prevent unplanned teen pregnancies. NCSL supports continued
264 funding for these critically important programs.

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1 **COMMITTEE: HEALTH**

2 **POLICY: ARTIFICIAL INTELLIGENCE IN HEALTH CARE**

3 **TYPE: DEBATE RESOLUTION**

4 **WHEREAS**, the integration of Artificial Intelligence (AI) in health care presents
5 significant opportunities to enhance patient care, improve health outcomes and increase
6 operational efficiencies;

7
8 **WHEREAS**, states are at the forefront of developing and implementing AI policies
9 tailored to their unique health care needs and challenges;

10
11 **WHEREAS**, robust data privacy and security measures must be enforced to protect
12 patient information used in AI systems, in compliance with existing federal and state
13 regulations;

14
15 **WHEREAS**, AI technologies must undergo validation appropriate to the level of risk they
16 present, with healthcare applications—subject to rigorous, ongoing evaluation to assess
17 and verify their performance, reliability, fairness and safety prior to deployment;

18
19 **WHEREAS**, in light of state legislative and regulatory activity in this area, federal
20 preemption of state AI laws and regulations could interfere with state efforts to create
21 solutions that meet the unique needs of their residents and businesses.

22
23 **NOW, THEREFORE, BE IT RESOLVED**, that the National Conference of State
24 Legislatures urges the federal government to:

- 25
- 26 • Collaborate with states to develop guidelines for the reasonable, trustworthy, and
27 human-centered use of AI, including transparency in AI decision-making
28 processes, accountability mechanisms for AI developers, deployers and users,
29 robust privacy protection of health information, and uses that enhance rather
than replace the patient/provider relationship;

- 30 • Incorporate insights and best practices from state-level initiatives in establishing
31 any federal framework for the regulation of AI in health care;
- 32 • Work with states, standards development organization and federal partners to
33 advance standardized protocols for data sharing and interoperability, ensuring
34 that AI systems can securely and efficiently access and utilize health data across
35 state lines;
- 36 • Support initiatives such as model cards and nutrition labels and/or other formats
37 that convey source attribute information to ensure consistent and standard
38 transparency of AI developers;
- 39 • Work with states to adopt plain language descriptions of the logic and rationale
40 for AI applications (including attributes defining the intended use and
41 inappropriate use of the model, the testing data sets used for developing the
42 model, and the results of feasibility and real-world testing) used by AI/Machine
43 Learning so the functionality, risk, potential bias, and signs of model drift are
44 easily understood by end users.
- 45 • Provide regulatory support for initiatives that ensure developers have safe
46 access to diverse data sets and initiatives that allow models to be trained and
47 tested on robust data appropriate to the populations for whom the models will be
48 used;
- 49 • Collaborate with states to support the development of a diverse and skilled AI
50 workforce in health care;
- 51 • Partner with states on financial investments in education and training programs
52 to equip health care professionals with the skills needed recognize the risks and
53 limitations of AI;
- 54 • Work with states and standards development organizations to develop federal
55 standards for AI performance monitoring and evaluation to keep AI system
56 reliable, fair and safe over time. This should include, local, recurrent validation
57 (process of ongoing technical checks and improvements after deployment) and
58 post-market surveillance (monitoring real-world impact and user safety) of AI
59 systems.

- 60 • Consult with states as they debate and develop AI legislation and regulations,
61 paying particular attention to how any federal law or regulation will impact state
62 laws governing AI. Federal laws and regulations in the AI space should establish
63 a strong national policy floor, set a consistent and aligned baseline of rights,
64 safety and accountability while preserving states' ability to adopt additional
65 protections in their own laws as needed; and
- 66 • Ensure that federal AI legislation and regulation does not usurp states' ability to
67 legislate and regulate in areas that traditionally rest under the oversight of states
68 and local governments; and

69

70 **BE IT FINALLY RESOLVED** that a copy of this resolution be sent to the President of
71 the United States, all members of Congress, and all relevant federal and state officials.

72

1 **COMMITTEE: LAW AND PUBLIC SAFETY**

2 **POLICY: REGARDING TREATMENT OF ASYLUM SEEKERS AT**
3 **SOUTHERN BORDER AND PORTS OF ENTRY**

4 **TYPE: DEBATE RESOLUTION**

5 **WHEREAS**, the United States has a vested interest in securing its borders; and

6 **WHEREAS**, promoting legal immigration is paramount to the prosperity of the United
7 States; and

8 **WHEREAS**, the right to seek and enjoy asylum from persecution is a commonly
9 accepted human right in the international community that the United States upholds;
10 and

11 **NOW, THEREFORE, BE IT RESOLVED**, the National Conference of State Legislatures
12 urges Congress and the Administration to invest in procedural and technological
13 improvements to its ports of entry and judicial system in order to facilitate a safe,
14 efficient, timely, and humane immigration process for asylum seekers.

1 **COMMITTEE: LAW AND PUBLIC SAFETY AND LABOR AND**
2 **ECONOMIC DEVELOPMENT**

3 **POLICY: INCREASING VISA CAPS AND LEGAL IMMIGRATION**
4 **TO END LABOR SHORTAGE**

5 **TYPE: DEBATE RESOLUTION**

6 **WHEREAS**, the U.S. is experiencing a tight labor market and increased cultural and
7 ethnic diversity is a recognized benefit to our society; and

8 **WHEREAS**, the pandemic highlighted the need for a diverse and robust workforce able
9 to withstand shocks and unforeseen circumstances, particularly in industries such as
10 healthcare, manufacturing, agriculture, education, and trade industries; and

11 **WHEREAS**, immigrants tend to be of optimal working age and eager to find
12 employment; and

13 **WHEREAS**, employment-based visa holders are non-citizen workers that complement
14 U.S. workers and help to fill labor gaps in critical industries; and

15 **WHEREAS**, employment-based visa holders benefit the country not only with their
16 gainful employment but also by contributing to the tax base, as they pay federal, state,
17 Social Security, and Medicare taxes proportional to their wages; and

18 **WHEREAS**, employer control of these visa programs can constrain workers' rights and
19 may result in abuse and exploitation; and

20 **WHEREAS**, employment visa programs across industries have been shown to create
21 captive employment dynamics, undercut wages and working conditions, and drive down
22 labor standards; and

23 **WHEREAS**, according to the United States Department of State, permanent
24 employment-based immigration is statutorily limited to 140,000 principals and
25 dependents annually, number of H-2B visas statutorily limited to 66,000, and the
26 number of H-1B visas limited to 65,000 with an additional 20,000 visas available for
27 those with a master's degree or doctorate.

28 **WHEREAS**, these visa caps are often met within the first few months of each year; and

29 **WHEREAS**, many visa recipients must reapply yearly and these applications can be
30 lengthy and burdensome; and

31 **NOW, THEREFORE, BE IT RESOLVED**, the National Conference of State Legislatures
32 urges Congress to significantly increase the statutory visa caps and simplify the
33 application and reapplication processes to allow employment-based visa recipients to
34 easily maintain their visa status; and

35 **LET IT BE FURTHER RESOLVED**, that NCSL shall call for reforms to work visa
36 programs to promote employer accountability, high labor standards, fair wages, safe
37 working conditions, and ensure rights and protections for U.S. and immigrant workers
38 alike; and

39 **LET IT BE FURTHER RESOLVED**, the National Conference of State
40 Legislatures urges Congress and the Administration to create legal pathways to
41 immigration and streamline the process for immigration into our country in order to
42 fortify the labor market and achieve economic prosperity.

1 **COMMITTEE: LAW AND PUBLIC SAFETY AND NATURAL**
2 **RESOURCES, ENERGY & ENVIRONMENT**

3 **POLICY: NATURAL DISASTER MANAGEMENT**

4 **TYPE: DEBATE RESOLUTION**

5 **WHEREAS**, natural disasters impacting the United States, including hurricanes, storms,
6 flooding, tornados, fires, wind, hail and extreme heat, are more severe, occurring more
7 frequently, and at greater scale. According to the Federal Emergency Management
8 Agency (FEMA), 44 of 50 states experienced a federal disaster declaration somewhere
9 in their state in 2024; and

10 **WHEREAS**, the National Oceanic and Atmospheric Administration’s National Center for
11 Environmental Information has identified 73 natural disasters, largely comprised of
12 severe storms, tropical cyclones and winter storm events, between 2022 and 2024 with
13 individual losses of over \$1 billion adjusted for inflation. Five-year average costs have
14 spiked to \$151.2 billion in 2024 from \$19.1 billion in 1984, meaning states and local
15 communities rely on federal assistance before, during and after disasters now more
16 than ever; and

17 **WHEREAS**, in 2020 the National Institute of Building Sciences evaluated federal
18 investments in disaster mitigation since 1995 and found that for every \$1 federal
19 invested, communities saved \$13; and

20 **WHEREAS**, state and local governments own approximately 44% of public roads, 38%
21 of national bridges, over 900 hospitals and directly support about a third of the nation’s
22 airports. States are constantly working to improve disaster response and recovery
23 systems and technology and federal funding and technical assistance enhances state
24 investments in pre-disaster resiliency, disaster mitigation and preparedness and
25 supports the rapid repair and replacement of damaged and destroyed infrastructure and
26 quicker economic recovery; and

27 **WHEREAS**, given the severity of natural disasters in recent years, federal support to
28 state activities and existing state funding mechanisms is vital to repairing damaged
29 communities; and

30 **WHEREAS**, the majority of federal disaster funding is distributed to states through
31 FEMA, which has obligated over \$160 billion in funding since 2017 as a result non-
32 Covid-19 disaster declarations; and

33 **WHEREAS**, the primary role of the Federal Emergency Management Agency relied
34 upon by the states is leading interagency coordination before, during, and after
35 multijurisdictional disasters as a full-service federal partner; and

36 **WHEREAS**, state and local governments already have a 25% cost share with awarded
37 FEMA funds unless specifically adjusted by the president. The majority of states lack
38 sufficient funding, capacity and need for a full-time disaster-response staff, and are
39 unable to replace federal disaster-response infrastructure and expertise; and

40 **WHEREAS**, federal assistance to states which provides and supports the delivery of
41 basic services such as clean water, food and shelter to communities post-disaster is a
42 necessity; and

43 **WHEREAS**, the dissolution of federal agencies addressing disasters and assistance for
44 disaster preparedness, mitigation, resilience, response and recovery would result in the
45 loss of a centralized federal research and innovation hub for new resiliency techniques
46 and improved methods for protecting lives and property during emerging and
47 increasingly worsening disaster threats, an increase in direct cost burdens on states by
48 requiring states to spend more money on routine items and would adversely impact
49 investments in other areas and a decrease in national security during times of crisis;
50 and

51 **WHEREAS**, intergovernmental communications, ongoing federal-state partnerships and
52 long-term staff relationships are vital to effective coordination and disaster
53 preparedness and response; and

54 **WHEREAS**, according to the Congressional Budget Office, insurers covered \$80 billion
55 in losses caused by natural disasters in 2023 and some insurers were rendered
56 insolvent due to the impacts of and the resulting claims after natural disasters. Other
57 insurance companies are reducing coverage and are pulling out of states like California
58 and Florida – both of which experienced catastrophic disasters in recent years; and

59 **WHEREAS**, given the interconnectedness of the global economy, vulnerable supply
60 chains and regionalized American industry, it is in America’s best economic interest to
61 ensure expedient services and relief to states after disasters to assist with speedy local,
62 regional and national economic recovery; and

63 **NOW, THEREFORE, BE IT RESOLVED**, the National Conference of State Legislatures
64 urges Congress and the administration to maintain and sustain the role, scope and
65 adequate and appropriate funding levels of all federal disaster agencies, programs,
66 grants and projects, such as the Building Resilient Infrastructure and Communities
67 (BRIC) grant program, that assist states with disaster preparedness, mitigation,
68 resilience, response and recovery and to reject any changes to federal agencies,
69 programs, grants or projects that would disrupt or decrease federal disaster assistance
70 funding currently provided to states, create direct or indirect cost burden shifts to states,
71 or create any new direct or indirect spending or other precondition requirements,
72 including the implementation of a so called “disaster deductible,” for states to access
73 federal funding for disaster preparedness, mitigation, resilience, response or recovery;
74 and

75 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures
76 urges Congress and the Administration to maintain a consistent schedule for disaster
77 relief grant cycles to ensure states can adequately make informed planning and budget
78 decisions without undue uncertainty; and

79 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures calls
80 on Congress, the administration and relevant federal agencies to ensure that federal
81 funding intended for shelter after disaster be continued s, and ensure that the shelter
82 and services issued meet the needs of all Americans, both urban and rural; and

83 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures
84 urges Congress, the administration and relevant federal agencies to support the
85 principles of state-to-state mutual aid and resource sharing as agreed to by the
86 signatory states and territories of the Emergency Management Assistance Compact
87 (EMAC) by continuing EMAC program funding, in addition too, rather than as a
88 replacement of, federal financial and technical support and assistance; and

89 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures calls
90 on Congress, the administration and relevant federal agencies to enhance
91 intergovernmental partnerships; increase in-person assistance to states, including
92 communication and coordination assistance and other on the ground support before,
93 after, and during disaster response and recovery to better serve the needs of the
94 American public; and bolster clear and accurate communications with all relevant
95 stakeholders including state and local entities as well as the public about state and
96 federal disaster preparation, response and recovery efforts, before, during and after
97 disasters; and

98 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures calls
99 on Congress, the administration and relevant federal agencies to maintain federal
100 disaster resources for the public, including information to assist the public with
101 preparedness and response, scientific databases and federal data tracking and
102 collection programs; and

103 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures
104 supports efforts by the federal government to improve community preparedness prior to
105 disaster, including the federal government's assistance with and facilitation of broad
106 preventative actions that could be conducted across the nation, such as contracting for
107 shelter in preparation for future disasters; and

108 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures calls
109 on Congress, the administration and relevant federal agencies to provide financial and
110 technical support for state resource sharing programs and disaster response systems
111 and software; and

112 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures
113 supports efforts by the federal government, in consultation with states, to improve,
114 streamline, simplify, and increase the consistency, flexibility and transparency of federal
115 disaster funding applications and distribution processes to states, who are responsible
116 managers of federal dollars, to more quickly assist with disaster response and recovery;
117 and

118 **LET IT BE FURTHER RESOLVED**, the National Conference of State Legislatures
119 supports changes to the National Flood Insurance Program to ensure its solvency while
120 also maintaining its affordability and availability to all Americans.

1 **COMMITTEE: NATURAL RESOURCES, ENERGY AND**
2 **ENVIRONMENT**

3 **POLICY: DATA CENTER IMPACTS ON POWER GENERATION**
4 **AND GRID RESILIENCY**

5 **TYPE: DEBATE RESOLUTION**

6 **WHEREAS**, the increasing digitization of everyday life and technological innovations
7 such as artificial intelligence, cloud computing, cryptocurrency mining and more are
8 driving the construction of large-scale data centers.

9
10 **WHEREAS**, data centers are critical for the modern economy and can provide
11 significant economic development for regions through growth of local property tax
12 bases, job creation during and after construction, and attraction of other high-tech
13 businesses due to proximity to data centers;

14
15 **WHEREAS**, according to the U.S. Department of Energy and the Electric Power
16 Research Institute, total energy demand in the U.S. is expected to spike in coming
17 years, potentially increasing 15-20 percent in the next decade. Data centers could use 9
18 percent of all electricity generated in the country by 2030, up from 4 percent in 2023.

19
20 **WHEREAS**, existing and new data centers increase pressures on an overburdened and
21 aging power grid that requires large investments in new and existing infrastructure, as
22 well as significant permitting reform.

23
24 **WHEREAS**, when paired with smart planning and infrastructure investment, data
25 centers can help modernize the grid, accelerate renewable integration, and provide
26 backup generation capacity during peak demand or emergencies – supporting grid
27 innovation,

28
29 **WHEREAS**, the increased demand for power caused by data centers can significantly
30 raise costs for rate payers and cause serious concerns about cost sharing among

31 residential users, small businesses and large companies, especially when companies
32 negotiate for “behind the meter” access to power.

33

34 **WHEREAS**, many data centers are already taking steps to increase sustainability and
35 mitigate potential environmental impacts, data centers can generate significant
36 sustainability and community concerns, including vast water consumption, greenhouse
37 gas and heat emissions, noise pollution, and electronic waste.

38

39 **WHEREAS**, these large-scale building projects come with siting concerns, especially
40 around grid connection and facility accessibility in areas that lack existing power or
41 service infrastructure to support large facilities.

42

43 **WHEREAS**, many states share security concerns regarding companies owned by
44 adversarial countries (as defined by the Department of Homeland Security) using
45 domestic data centers, building their own data centers and connecting them to the
46 existing domestic power grid.

47

48 **WHEREAS**, cooperation and collaboration between data centers, by states and regions
49 is necessary to invest in infrastructure, improve energy management, and create
50 cohesive and integrated systems and prevent interstate conflicts over cost burdens,
51 power supply and transmission.

52

53 **NOW BE IT RESOLVED**, that the National Conference of State Legislatures urges
54 Congress and the administration to take the following actions with input and
55 consultation from the states or their national associations to help states address this
56 rapidly growing issue:

57

58 1. Include state policy makers in all stakeholder discussions regarding data center
59 placement and energy usage and refrain from pre-empting states on siting,
60 permitting, taxation and other regulatory issues relating to the construction and
61 operation of data centers.

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2. Recognize opportunities for data centers to contribute to grid stability and resiliency while mitigating the impact of data centers on rate payers and communities, as well as protect local consumers' need for power when disruptions limit the amount of available power.

3. Develop incentives and/or implement requirements for data centers regarding onsite generation of power, integration of energy-storage and demand-management systems at new data center projects.

4. Require utility operators to file documentation related to data centers with appropriate state and federal regulatory agencies that detail terms and conditions of service and associated prices to facilitate transparency and protect rate payers.

5. In cooperation with states and localities, encourage regional planning for power generation, including building national infrastructure in a way that makes sense for states and localities, nuclear power generation and valuing the grid as a national asset. This approach could disincentivize states from engaging in undue and damaging competition.

6. Expand oversight of the process by which large customers—such as large data centers or manufacturing plants—obtain power while protecting smaller consumers equitable access to power and other limited resources.

7. In consultation with states and their national associations, establish guidance and oversight of sustainability practices, including reducing emissions, mitigating onsite water consumption, reducing noise pollution and other community concerns.

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8. Provide funding and resources to states to help data centers optimize operations through power management, workload optimization and other innovations.

9. Require data centers to regularly report to the appropriate local, state and federal agencies on their electricity and water usage to ensure transparency and facilitate equity in costs.

10. Work with states to create cost allocation methods that help ensure large-scale energy users are paying their fair share of costs using the “cost causation” and “beneficiary pays” principles.

11. Provide funding and resources to Department of Energy labs and other relevant federal agencies to increase their capacity to work with states and provide technical assistance to help navigate future energy needs and supplies.

12. Promote best-practice cybersecurity, physical security, and supply-chain security measures to protect U.S. data center operations from foreign adversary access or compromise.

1 **COMMITTEE: NATURAL RESOURCES, ENERGY AND**
2 **ENVIRONMENT**

3 **POLICY: ELECTROMAGNETIC PULSES AND SOLAR**
4 **FLARES**

5 **TYPE: DEBATE RESOLUTION**

6 WHEREAS, protecting the nation's electric power grid and ensuring a reliable and
7 affordable supply of energy are key priorities for the electric power sector and state
8 and federal governments; and

9 WHEREAS, the power grid is a complex, interconnected network of generation,
10 transmission, distribution, control, and communication technologies that can be
11 impacted by natural events-including weather, earthquakes and geomagnetic
12 disturbances (GMDs) like those caused by solar flares-and by malicious events, like
13 cyber or physical attacks including electromagnetic pulses (EMPs); and

14 WHEREAS, the electric and nuclear sectors are critical infrastructure providers with
15 mandatory and enforceable standards to help protect the reliability and security of
16 the power and grid assets they own and operate; and

17 WHEREAS, standards can ensure that every electric utility meets a baseline level
18 of security and the electric industry also relies on close coordination and
19 partnerships with federal law enforcement and security agencies to help defend
20 against hostile nation-states or other attacks against the United States, including
21 EMP threats from a nuclear device; and

22 WHEREAS, intentional, manmade EMPS, such as those from directed energy
23 weapons or high-altitude nuclear blasts, and naturally occurring GMDs, such as
24 those caused by solar flares, need to be assessed and addressed with appropriate
25 mitigation and protection strategies implemented for each; and

26 WHEREAS, preventing an EMP event is a national security issue, as the planning
27 and launching of a nuclear attack on U.S. critical infrastructure constitutes an act of
28 war or terrorism, thus the federal government is primarily responsible for preventing
29 a high-altitude EMP as a matter of national security; and

30 WHEREAS, reasonably cost-effective technological solutions are emerging to
31 protect from EMP threats that could be implemented in phases, starting with the
32 greatest risks first; and

33 NOW, THEREFORE, BE IT RESOLVED, that the National Conference of State
34 Legislatures urges members of Congress and the President of the United States to
35 initiate and coordinate efforts with state governments and the electric power sector
36 to implement plans and preparation for the protection of electric power generation,
37 transmission and distribution assets from EMPs and geomagnetic disturbances
38 (solar flares); first addressing those sectors most vulnerable and with the longest
39 lead times for repair, and then by using a risk based assessment approach to
40 harden the remainder of nation's electric production, transmission and distribution
41 systems for resilience against, and recovery from, all types of malicious or naturally
42 occurring events that could adversely impact the electric power grid.

1 **COMMITTEE: NATURAL RESOURCES, ENERGY AND**
2 **ENVIRONMENT**

3 **POLICY: RECOVERING AMERICA’S WILDLIFE**

4 **TYPE: DEBATE RESOLUTION**

5 **WHEREAS**, habitat loss, wildlife diseases, invasive species, pollution, and the impacts
6 of climate change pose significant threats to fish and wildlife species; and

7 **WHEREAS**, over 1,600 United States’ native species are federally protected under the
8 Endangered Species Act and estimates suggest one in five native species is at risk of
9 extinction; and

10 **WHEREAS**, State Wildlife Action Plans have identified nearly 12,000 Species of
11 Greatest Conservation Need (SGCN), including federal and state endangered and
12 threatened species and other rare and at-risk fish and wildlife species; and

13 **WHEREAS**, current funding is far below what is necessary to conserve the species
14 most at-risk; and

15 **WHEREAS**, the Blue Ribbon Panel on Sustaining America's Diverse Fish and Wildlife
16 Resources recommended that up to \$1.3 billion a year of existing revenue from energy
17 and mineral resources development on federal lands and waters be redirected to the
18 Wildlife Conservation Restoration Program; and

19 **WHEREAS**, the Recovering America’s Wildlife Act would provide the additional funding,
20 providing state wildlife agencies the money necessary to accelerate implementation of
21 State Wildlife Action Plans; and

22 **WHEREAS**, the additional funding will help states to address at-risk wildlife before they
23 require protection under the federal Endangered Species Act which can be more costly
24 and disruptive.

25 **NOW, THEREFORE, BE IT RESOLVED**, that the National Conference of State
26 Legislators urges the President of the United States and Members of Congress to act to
27 pass and sign into law the Recovering America’s Wildlife Act, and

28 **BE IT FURTHER RESOLVED**, that copies of this resolution be immediately transmitted
29 to the President of the United States, the President of the United States Senate, the
30 Speaker of the House of Representatives, and each member of Congress.

1 **COMMITTEE: TECHNOLOGY AND COMMUNICATIONS**

2 **POLICY: UNIVERSAL SERVICE FUND**

3 **TYPE: DEBATE RESOLUTION**

4 **WHEREAS**, the ability to access and maintain secure, reliable, affordable high-speed
5 internet is essential to the success of our Country; to our families, our businesses, our
6 government services; and

7 **WHEREAS**, we must evolve to reflect a 21st-century digital reality. The benefit of
8 expanding universal access is three-fold:

- 9 • **Public safety and resilience** – advanced networks improve emergency
10 response, disaster recovery, and cybersecurity;
- 11 • **Economic growth and innovation** – enhanced broadband access fuels local
12 business growth, remote work, STEM education, and telehealth, and upgrading
13 infrastructure boosts U.S. competitiveness in the global digital economy;
- 14 • **Bridging the digital divide** – access to new technologies is uneven, leaving
15 rural and low-income populations behind; and

16 **WHEREAS**, this transformation is not just a technical upgrade, it is a necessary step
17 toward a more inclusive, connected, and competitive society; and

18 **WHEREAS**, today, digital inclusion depends not just on basic connectivity, but on
19 robust, high-speed, and scalable internet infrastructure; and

20 **WHEREAS**, a modernized infrastructure can prioritize and ensure all Americans can
21 fully participate in digital life; and

22 **WHEREAS**, Congress recognized the importance of universal service as a cornerstone
23 of the Communications Act of 1934, requiring incumbent telecom providers to serve all
24 households in their service area; and

25 **WHEREAS**, Congress created the Universal Service Fund (USF) in the
26 Telecommunications Act of 1996 to ensure continued support for universal service in a
27 competitive market; and

28 **WHEREAS**, the USF, while created to ensure affordable access to telecommunications
29 for all Americans, is increasingly outdated in the face of rapidly evolving digital
30 technologies; and

31 **WHEREAS**, the USF continues to rely heavily on declining revenues from traditional
32 telecommunications services, and its funding mechanisms and focus areas—primarily

33 voice services—are increasingly misaligned with current connectivity needs, rendering
34 its funding model unsustainable; and

35 **WHEREAS**, as broadband internet becomes as essential as electricity, and emerging
36 technologies redefine connectivity, it is imperative that the USF evolve to meet modern
37 demands; and

38 **WHEREAS**, despite USF programs like E-Rate and Lifeline, millions of Americans—
39 especially in rural areas—still lack access to reliable, high-speed internet; and

40 **WHEREAS**, by expanding support to include the next generation’s communication
41 technologies, we move closer to securing closure of the digital divide, strengthening
42 national competitiveness, and upholding the fund's foundational mission of equitable
43 access; and

44 **NOW, THEREFORE, BE IT RESOLVED**, that the National Conference of State
45 Legislatures urges Congress to prioritize reform and to modernize the USF framework
46 to align with contemporary and future connectivity needs, so that the USF can fulfill its
47 mission of universal access and ensure that no American is left behind in the digital age.