

# A Bill to Lower Vehicle Insurance Rates for New Drivers

BE IT ENACTED BY THE CONGRESS HERE ASSEMBLED THAT:

1 **SECTION 1.** The federal government shall implement a policy to significantly lower  
2 vehicle insurance premiums for new drivers under the age of 25, with the  
3 goal of reducing the financial barriers to safe driving and promoting greater  
4 access to responsible vehicle ownership.

5 **SECTION 2.** (a) "New drivers" refers to individuals who have held a valid driver's license  
6 for fewer than three years.

7 (b) "Vehicle insurance premiums" refers to the cost paid to insurance  
8 providers for coverage against vehicular accidents, theft, and damage. (c)  
9 "Under the age of 25" refers to individuals who have not yet reached their  
10 25th birthday at the time of purchasing insurance.

11 **SECTION 3.** The Department of Transportation (DOT) shall oversee the implementation  
12 of this policy as well as the Federal Insurance Regulatory Commission  
13 (FIRC). The FIRC will establish a national standard for how insurance  
14 premiums for new drivers are calculated. This policy will ensure that  
15 insurance premiums are reduced by at least 15% for qualifying new drivers.  
16 The FIRC will provide guidelines to insurance companies on how to  
17 calculate premiums based on a new driver's age and driving history, taking  
18 into account relevant factors such as completion of driver's education  
19 courses or proof of safe driving habits. The policy will be phased in  
20 gradually over the next two years, with full implementation occurring no  
21 later than FY 2027.

22 A. This initiative will be funded through a small surcharge on insurance  
23 premiums for drivers who do not meet the criteria for new driver status.  
24 This surcharge will be capped at 5% of annual premiums and will be used  
25 to fund the premium reduction program.

26 B. Insurance companies that fail to comply with the federal guidelines and fail  
27 to reduce premiums for qualifying new drivers will be subject to penalties,  
28 including a fine up to 3% of their annual revenue or suspension of their  
29 ability to operate in federally insured markets for up to six months. Regular  
30 audits will be conducted by the FIRC to ensure compliance.

31

32 **SECTION 4.** This legislation will take effect immediately, with full compliance by FY  
33 2027. All laws in conflict with this legislation are hereby declared null and  
34 void.

*Introduced for Congressional Debate by Holy Family High School.*

**A Bill to Mandate the Right to Repair Medical Devices to Enhance Patient Care and Cost Efficiency**

BE IT ENACTED BY THE CONGRESS HERE ASSEMBLED THAT:

- 1   **SECTION 1.**   Manufacturers of medical devices shall be required to provide access to  
2                   parts, tools, and repair manuals necessary for the repair and maintenance of  
3                   their devices to patients, healthcare providers, and independent repair  
4                   technicians upon request.
- 5   **SECTION 2.**   A) "Medical devices" shall refer to any instrument, apparatus, machine, or  
6                   similar article intended for use in the diagnosis, treatment, or prevention of  
7                   disease or other medical conditions. B) "Repair manuals" shall include all  
8                   documentation detailing diagnostics, service codes, and step-by-step  
9                   procedures necessary for proper repair and maintenance.
- 10  **SECTION 3.**   The Food and Drug Administration (FDA) shall oversee the enforcement of  
11                   this Act. The FDA shall establish guidelines ensuring safety and quality  
12                   control in the repair of medical devices. Manufacturers failing to comply  
13                   with the provisions of this Act shall be subject to fines not exceeding  
14                   \$50,000 per violation, with additional penalties for repeated offenses.
- 15  **SECTION 4.**   This legislation will take effect on July 1st 2026.
- 16  **SECTION 5.**   All laws in conflict with this legislation are hereby declared null and void.

*Introduced for Congressional Debate by Cheyenne Mountain High School.*

# A Bill to Pre-Register Clinical Studies to Enhance Research

BE IT ENACTED BY THE CONGRESS HERE ASSEMBLED THAT:

- 1   **SECTION 1.**   All clinical studies conducted within the United States must be  
2                   pre-registered with the Department of Health and Human Services prior to  
3                   experimentation.
- 4   **SECTION 2.**   A. A “clinical study” is defined as any scientific research conducted on  
5                   human participants aimed to add to medical knowledge.  
6                   B. “Experimentation” is defined as any step in conducting research after  
7                   conducting a prior literature review, the formation of a hypothesis, and the  
8                   designing of the study.
- 9   **SECTION 3.**   The Department of Health and Human Services will oversee the  
10                  enforcement and funding of this legislation.  
11                  A. All clinical studies are required to submit their research plan, including  
12                  their study design and hypothesis, to a public registry.  
13                  B. Before scientific journal publication, journal companies will  
14                  cross-reference the submitted studies to the public registries.  
15                  Experiments without pre-registration will not be published.
- 16 **SECTION 4.**   This legislation will take effect on January 1, 2026. All research with data  
17 collection before this date will be exempt from this legislation. All laws in conflict with this  
18 legislation are hereby declared null and void.

*Introduced for Congressional Debate by Palmer Ridge High School.*



# A Bill to Cover Swimming Lessons by Insurance Companies

BE IT ENACTED BY THE CONGRESS HERE ASSEMBLED THAT:

1     **SECTION 1.**     To mandate health insurance companies to cover certified swimming lessons for  
2                       children and at-risk populations as a preventive health measure, reducing  
3                       drowning-related fatalities and improving public safety.

4     **SECTION 2.**     **A. Certified Swimming Lessons** – Instruction provided by certified instructors from  
5                       nationally recognized aquatic safety organizations, as determined by the  
6                       Department of Health and Human Services (HHS).

7                       **B. Eligible Individuals** –

- 8                       1. Children under the age of 18.
- 9                       2. High-risk adults, including but not limited to individuals with limited  
10                      swimming proficiency, those living in high-drowning-risk areas, and those  
11                      regularly exposed to water.
- 12                     3. Additional at-risk populations as identified by HHS.

13    **SECTION 3.**     **Insurance Coverage Requirements**

14                     A. All private and public health insurance plans, including group and individual  
15                     plans, must provide coverage for certified swimming lessons as a **preventive**  
16                     **service** under the Affordable Care Act.

17                     B. **Cost-Sharing Prohibition** – Coverage for swimming lessons must be provided  
18                     **without** copayments, coinsurance, or deductibles.

19                     C. **Coverage Limits** – Insurers may establish a reasonable annual limit on the  
20                     number of lessons covered, provided that it is sufficient to achieve basic  
21                     swimming proficiency as defined by HHS.

22    **SECTION 4.**     **Implementation and Oversight**

23                     A. The **Secretary of HHS** shall:

- 24                      1. Establish national standards for certified swimming instruction.
- 25                      2. Set guidelines on the minimum number of lessons required to achieve  
26                      basic swimming proficiency.
- 27                      3. Determine eligibility criteria for high-risk populations based on drowning  
28                      risk factors.

29                     B. HHS shall provide **grants** to states, local governments, and community  
30                     organizations to expand access to swimming instruction facilities and certified  
31                     instructors, particularly in underserved and low-income communities.

32                     C. The **Secretary of HHS** shall submit a **report** to Congress within three years of  
33                     enactment, evaluating the program's effectiveness in reducing drowning rates and  
34                     improving public health.

35    **SECTION 5.**     This legislation will take effect on January 1st, 2026. All laws in conflict with this  
36                       legislation are hereby declared null and void.

*Introduced for Congressional Debate by Palisade High School.*

## A Bill to Mandate the Reuse of Coal Ash

BE IT ENACTED BY THE CONGRESS HERE ASSEMBLED THAT:

**SECTION 1.** This bill would mandate that power plants send the ash to a suitable recycling or extracting facility or to a coal mine for safe re-use.

**SECTION 2.** Definitions provided for this legislation:

A. Coal ash shall be defined as the residue that remains after burning coal

B. Re-use shall be defined as the safe action of using something for a different purpose than was originally intended.

**SECTION 3.** The EPA will enforce this legislation and set safety and environmental standards for how the ash may be reused or recycled.

A. Any facility found in violation of this legislation will face a 1 million fine per individual violation.

B. All fine money collected will go to the EPA.

**SECTION 4.** This legislation will take effect on January 1st, 2027. All laws in conflict with this legislation are hereby declared null and void.

*Introduced for Congressional Debate by Delta High School.*