

# Union Calendar No. 169

116TH CONGRESS  
1ST SESSION

# H. R. 2781

[Report No. 116–214]

To amend title VII of the Public Health Service Act to reauthorize certain programs relating to the health professions workforce, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 16, 2019

Ms. SCHAKOWSKY (for herself and Mr. BURGESS) introduced the following bill; which was referred to the Committee on Energy and Commerce

SEPTEMBER 24, 2019

Additional sponsors: Mr. FITZPATRICK, Mr. LONG, Mr. RUSH, Mr. GRIJALVA, Mr. CASTEN of Illinois, Ms. NORTON, Ms. ROYBAL-ALLARD, Ms. KELLY of Illinois, Ms. CASTOR of Florida, Mr. WALDEN, Ms. CLARKE of New York, Ms. JOHNSON of Texas, Miss RICE of New York, and Mr. MORELLE

SEPTEMBER 24, 2019

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on May 16, 2019]

# **A BILL**

To amend title VII of the Public Health Service Act to reauthorize certain programs relating to the health professions workforce, and for other purposes.

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

3 **SECTION 1. SHORT TITLE.**

4 *This Act may be cited as the “Educating Medical Pro-*  
 5 *fessionals and Optimizing Workforce Efficiency and Read-*  
 6 *iness for Health Act of 2019” or the “EMPOWER for Health*  
 7 *Act of 2019”.*

8 **SEC. 2. REAUTHORIZATION OF HEALTH PROFESSIONS**  
 9 **WORKFORCE PROGRAMS.**

10 *(a) CENTERS OF EXCELLENCE.—Subsection (i) of sec-*  
 11 *tion 736 of the Public Health Service Act (42 U.S.C. 293)*  
 12 *is amended to read as follows:*

13 *“(i) AUTHORIZATION OF APPROPRIATIONS.—To carry*  
 14 *out this section, there is authorized to be appropriated*  
 15 *\$24,897,000 for each of fiscal years 2020 through 2024.”.*

16 *(b) HEALTH PROFESSIONS TRAINING FOR DIVER-*  
 17 *SITY.—Section 740 of the Public Health Service Act (42*  
 18 *U.S.C. 293d) is amended—*

19 *(1) in subsection (a), by striking “\$51,000,000*  
 20 *for fiscal year 2010, and such sums as may be nec-*  
 21 *essary for each of the fiscal years 2011 through 2014”*  
 22 *and inserting “\$51,419,000 for each of fiscal years*  
 23 *2020 through 2024”;*

24 *(2) in subsection (b), by striking “\$5,000,000 for*  
 25 *each of the fiscal years 2010 through 2014” and in-*

1       serting “\$1,250,000 for each of fiscal years 2020  
2       through 2024”; and

3               (3) in subsection (c), by striking “\$60,000,000  
4       for fiscal year 2010 and such sums as may be nec-  
5       essary for each of the fiscal years 2011 through 2014”  
6       and inserting “\$20,000,000 for each of fiscal years  
7       2020 through 2024”.

8       (c) *PRIMARY CARE TRAINING AND ENHANCEMENT*.—  
9       Section 747(c)(1) of the Public Health Service Act (42  
10      U.S.C. 293k(c)(1)) is amended by striking “\$125,000,000  
11      for fiscal year 2010, and such sums as may be necessary  
12      for each of fiscal years 2011 through 2014” and inserting  
13      “\$51,371,000 for each of fiscal years 2020 through 2024”.

14      (d) *TRAINING IN GENERAL, PEDIATRIC, AND PUBLIC*  
15      *HEALTH DENTISTRY*.—Section 748(f) of the Public Health  
16      Service Act (42 U.S.C. 293k–2(f)) is amended by striking  
17      “\$30,000,000 for fiscal year 2010 and such sums as may  
18      be necessary for each of fiscal years 2011 through 2015”  
19      and inserting “\$42,707,000 for each of fiscal years 2020  
20      through 2024”.

21      (e) *AREA HEALTH EDUCATION CENTERS*.—Section  
22      751(j)(1) of the Public Health Service Act (42 U.S.C.  
23      294a(j)(1)) is amended by striking “\$125,000,000 for each  
24      of the fiscal years 2010 through 2014” and inserting  
25      “\$42,075,000 for each of fiscal years 2020 through 2024”.

1       (f) *NATIONAL CENTER FOR HEALTHCARE WORKFORCE*  
 2 *ANALYSIS.*—

3           (1) *IN GENERAL.*—Section 761(e)(1)(A) of the  
 4 *Public Health Service Act* (42 U.S.C. 294n(e)(1)(A))  
 5 is amended by striking “\$7,500,000 for each of fiscal  
 6 years 2010 through 2014” and inserting “\$5,947,000  
 7 for each of fiscal years 2020 through 2024”.

8           (2) *TECHNICAL CORRECTION.*—Section 761(e)(2)  
 9 of the *Public Health Service Act* (42 U.S.C.  
 10 294n(e)(2)) is amended by striking “subsection (a)”  
 11 and inserting “paragraph (1)”.

12       (g) *PUBLIC HEALTH WORKFORCE.*—Section 770(a) of  
 13 the *Public Health Service Act* (42 U.S.C. 295e(a)) is  
 14 amended by striking “\$43,000,000 for fiscal year 2011, and  
 15 such sums as may be necessary for each of the fiscal years  
 16 2012 through 2015” and inserting “\$17,850,000 for each  
 17 of fiscal years 2020 through 2024”.

18 **SEC. 3. EDUCATION AND TRAINING RELATING TO GERI-**  
 19 **ATRICS.**

20       Section 753 of the *Public Health Service Act* (42  
 21 U.S.C. 294c) is amended to read as follows:

22 **“SEC. 753. EDUCATION AND TRAINING RELATING TO GERI-**  
 23 **ATRICS.**

24       “(a) *GERIATRICS WORKFORCE ENHANCEMENT PRO-*  
 25 *GRAMS.*—

1           “(1) *IN GENERAL.*—*The Secretary shall award*  
2           *grants or contracts under this subsection to entities*  
3           *described in paragraph (1), (3), or (4) of section*  
4           *799B, section 801(2), or section 865(d), or other*  
5           *health professions schools or programs approved by*  
6           *the Secretary, for the establishment or operation of*  
7           *geriatrics workforce enhancement programs that meet*  
8           *the requirements of paragraph (2).*

9           “(2) *REQUIREMENTS.*—*A geriatrics workforce*  
10          *enhancement program meets the requirements of this*  
11          *paragraph if such program supports the development*  
12          *of a health care workforce that maximizes patient and*  
13          *family engagement and improves health outcomes for*  
14          *older adults by integrating geriatrics with primary*  
15          *care and other appropriate specialties. Special em-*  
16          *phasis should be placed on providing the primary*  
17          *care workforce with the knowledge and skills to care*  
18          *for older adults and collaborating with community*  
19          *partners to address gaps in health care for older*  
20          *adults through individual, system, community, and*  
21          *population level changes. Areas of programmatic focus*  
22          *may include the following:*

23               “(A) *Transforming clinical training envi-*  
24               *ronments to integrated geriatrics and primary*  
25               *care delivery systems to ensure trainees are well*

1        *prepared to practice in and lead in such sys-*  
2        *tems.*

3                *“(B) Developing providers from multiple*  
4        *disciplines and specialties to work interprofes-*  
5        *sionally to assess and address the needs and pref-*  
6        *erences of older adults and their families and*  
7        *caregivers at the individual, community, and*  
8        *population levels with cultural and linguistic*  
9        *competency.*

10               *“(C) Creating and delivering community-*  
11        *based programs that will provide older adults*  
12        *and their families and caregivers with the*  
13        *knowledge and skills to improve health outcomes*  
14        *and the quality of care for such adults.*

15               *“(D) Providing Alzheimer’s disease and re-*  
16        *lated dementias (ADRD) education to the fami-*  
17        *lies and caregivers of older adults, direct care*  
18        *workers, health professions students, faculty, and*  
19        *providers.*

20               *“(3) DURATION.—The Secretary shall award*  
21        *grants and contracts under paragraph (1) for a pe-*  
22        *riod not to exceed five years.*

23               *“(4) APPLICATION.—To be eligible to receive a*  
24        *grant or contract under paragraph (1), an entity de-*  
25        *scribed in such paragraph shall submit to the Sec-*

1        *retary an application at such time, in such manner,*  
2        *and containing such information as the Secretary*  
3        *may require, including the specific measures the ap-*  
4        *plicant will use to demonstrate that the project is im-*  
5        *proving the quality of care provided to older adults*  
6        *in the applicant's region, which may include—*

7                *“(A) improvements in access to care pro-*  
8                *vided by a health professional with training in*  
9                *geriatrics or gerontology;*

10               *“(B) improvements in family caregiver ca-*  
11               *capacity to care for older adults;*

12               *“(C) patient outcome data demonstrating*  
13               *an improvement in older adult health status or*  
14               *care quality; and*

15               *“(D) reports on how the applicant will im-*  
16               *plement specific innovations with the target au-*  
17               *dience to improve older adults' health status or*  
18               *the quality of care.*

19               *“(5) EQUITABLE GEOGRAPHIC DISTRIBUTION.—*  
20        *The Secretary may award grants and contracts under*  
21        *paragraph (1) in a manner which will equitably dis-*  
22        *tribute such grants among the various regions of the*  
23        *United States.*



1           “(6) *QUALIFICATIONS.*—*In awarding grants and*  
2           *contracts under paragraph (2), the Secretary shall*  
3           *consider programs that—*

4                   “(A) *have the goal of improving and pro-*  
5                   *viding comprehensive coordinated care of older*  
6                   *adults, including medical, dental, and psycho-*  
7                   *social needs;*

8                   “(B) *demonstrate coordination with other*  
9                   *programmatic efforts funded under this program*  
10                  *or other public or private entities;*

11                  “(C) *support the training and retraining of*  
12                  *faculty, preceptors, primary care providers, and*  
13                  *providers in other specialties to increase their*  
14                  *knowledge of geriatrics and gerontology;*

15                  “(D) *provide clinical experiences across care*  
16                  *settings, including ambulatory care, hospitals,*  
17                  *post-acute care, nursing homes, federally quali-*  
18                  *fied health centers, and home and community-*  
19                  *based services;*

20                  “(E) *emphasize education and engagement*  
21                  *of family caregivers on disease self-management,*  
22                  *medication management, and stress reduction*  
23                  *strategies;*

24                  “(F) *provide training to the health care*  
25                  *workforce on disease self-management, motiva-*

1        *tional interviewing, medication management,*  
2        *and stress reduction strategies;*

3                *“(G) provide training to the health care*  
4        *workforce on social determinants of health in*  
5        *order to better address the geriatric health care*  
6        *needs of diverse populations with cultural and*  
7        *linguistic competency;*

8                *“(H) integrate geriatrics competencies and*  
9        *interprofessional collaborative practice into*  
10       *health care education and training curricula for*  
11       *residents, fellows, and students;*

12               *“(I) substantially benefit rural or under-*  
13       *served populations of older adults or conduct*  
14       *outreach to communities that have a shortage of*  
15       *geriatric workforce professionals;*

16               *“(J) integrate behavioral health com-*  
17       *petencies into primary care practice, especially*  
18       *with respect to elder abuse, pain management,*  
19       *and advance care planning; or*

20               *“(K) offer short-term intensive courses*  
21       *that—*

22                        *“(i) focus on geriatrics, gerontology,*  
23                        *chronic care management, and long-term*  
24                        *care that provide supplemental training for*  
25                        *faculty members in medical schools and*

1           *other health professions schools or graduate*  
2           *programs in psychology, pharmacy, nurs-*  
3           *ing, social work, dentistry, public health, al-*  
4           *lied health, or other health disciplines, as*  
5           *approved by the Secretary; and*

6           “(ii) *are open to current faculty, and*  
7           *appropriately credentialed volunteer faculty*  
8           *and practitioners, to upgrade their knowl-*  
9           *edge and clinical skills for the care of older*  
10          *adults and adults with functional and cog-*  
11          *nitive limitations and to enhance their*  
12          *interdisciplinary teaching skills.*

13          “(7) *PRIORITY.—In awarding grants under*  
14          *paragraph (1), particularly with respect to awarding,*  
15          *in fiscal year 2020, any amount appropriated for*  
16          *such fiscal year for purposes of carrying out this sub-*  
17          *section that is in excess of the amount appropriated*  
18          *for the most previous fiscal year for which appropria-*  
19          *tions were made for such purposes, the Secretary may*  
20          *give priority to entities that operate—*

21                “(A) *in communities that have a shortage of*  
22                *geriatric workforce professionals; and*

23                “(B) *in States in which no entity has pre-*  
24                *viously received an award under such paragraph*  
25                *(including as in effect before the date of enact-*

1           *ment of the Educating Medical Professionals and*  
2           *Optimizing Workforce Efficiency and Readiness*  
3           *for Health Act of 2019).*

4           “(8) *AWARD AMOUNTS.*—Awards under para-  
5           graph (1) shall be in an amount determined by the  
6           Secretary. Entities that submit applications under  
7           this subsection that describe a plan for providing  
8           geriatric education and training for home health  
9           workers and family caregivers are eligible to receive  
10          \$100,000 per year more than entities that do not in-  
11          clude a description of such a plan.

12          “(9) *REPORTING.*—Each entity awarded a grant  
13          under paragraph (1) shall submit an annual report  
14          to the Secretary on financial and programmatic per-  
15          formance under such grant, which may include fac-  
16          tors such as the number of trainees, the number of  
17          professions and disciplines, the number of partner-  
18          ships with health care delivery sites, the number of  
19          faculty and practicing professionals who participated  
20          in continuing education programs, and such other  
21          factors as the Secretary may require.

22          “(b) *GERIATRIC ACADEMIC CAREER AWARDS.*—

23                 “(1) *ESTABLISHMENT OF PROGRAM.*—The Sec-  
24                 retary shall establish a program to award grants, to  
25                 be known as Geriatric Academic Career Awards, to

1 *eligible entities applying on behalf of eligible individ-*  
 2 *uals to promote the career development of such indi-*  
 3 *viduals as academic geriatricians or other academic*  
 4 *geriatrics health professionals.*

5 “(2) *ELIGIBILITY.*—

6 “(A) *ELIGIBLE ENTITY.*—*For purposes of*  
 7 *this subsection, the term ‘eligible entity’ means—*

8 “(i) *an accredited school of allopathic*  
 9 *medicine, osteopathic medicine, nursing, so-*  
 10 *cial work, psychology, dentistry, pharmacy,*  
 11 *or allied health; or*

12 “(ii) *another type of accredited health*  
 13 *professions school or graduate program*  
 14 *deemed by the Secretary to be eligible under*  
 15 *this subsection.*

16 “(B) *ELIGIBLE INDIVIDUAL.*—

17 “(i) *IN GENERAL.*—*For purposes of*  
 18 *this subsection, the term ‘eligible individual’*  
 19 *means an individual who—*

20 “(I) *has a junior, nontenured, fac-*  
 21 *ulty appointment at an accredited*  
 22 *school of allopathic medicine, osteo-*  
 23 *pathic medicine, nursing, social work,*  
 24 *psychology, dentistry, pharmacy, or al-*  
 25 *lied health or at another type of ac-*

1           *credited health professions school or*  
2           *graduate program described in sub-*  
3           *paragraph (A)(ii);*

4           *“(II)(aa) is board certified or*  
5           *board eligible in internal medicine,*  
6           *family practice, psychiatry, or licensed*  
7           *dentistry, or has completed the train-*  
8           *ing required for the individual’s dis-*  
9           *cipline; and*

10          *“(bb) is employed at an eligible*  
11          *entity; or*

12          *“(III) has completed an approved*  
13          *fellowship program in geriatrics or*  
14          *gerontology, or has completed specialty*  
15          *training in geriatrics or gerontology as*  
16          *required for the individual’s discipline*  
17          *and any additional geriatrics or geron-*  
18          *tology training as required by the Sec-*  
19          *retary.*

20          *“(ii) SPECIAL RULE.—If during the*  
21          *period of an award under this subsection*  
22          *respecting an eligible individual, the indi-*  
23          *vidual is promoted to associate professor*  
24          *and thereby no longer meets the criteria of*  
25          *clause (i)(I), the individual may continue*

1           to be treated as an eligible individual  
2           through the term of the award.

3           “(3) *LIMITATIONS.*—An eligible entity may not  
4           receive an award under paragraph (1) on behalf of an  
5           eligible individual unless the eligible entity—

6                   “(A) submits to the Secretary an applica-  
7                   tion, at such time, in such manner, and con-  
8                   taining such information as the Secretary may  
9                   require, and the Secretary approves such appli-  
10                  cation;

11                   “(B) provides, in such form and manner as  
12                   the Secretary may require, assurances that the  
13                   eligible individual on whose behalf an applica-  
14                   tion was submitted under subparagraph (A) will  
15                   meet the service requirement described in para-  
16                   graph (8); and

17                   “(C) provides, in such form and manner as  
18                   the Secretary may require, assurances that such  
19                   individual has a full-time faculty appointment  
20                   in an accredited health professions school or  
21                   graduate program and documented commitment  
22                   from such school or program to spend 75 percent  
23                   of the individual’s time that is supported by the  
24                   award on teaching and developing skills in  
25                   interprofessional education in geriatrics.

1           “(4) *REQUIREMENTS.—In awarding grants*  
2           *under this subsection, the Secretary—*

3                   “(A) *shall give priority to eligible entities*  
4                   *that apply on behalf of eligible individuals who*  
5                   *are on the faculty of institutions that integrate*  
6                   *geriatrics education, training, and best practices*  
7                   *into academic program criteria;*

8                   “(B) *may give priority to eligible entities*  
9                   *that operate a geriatrics workforce enhancement*  
10                  *program under subsection (a);*

11                  “(C) *shall ensure that grants are equitably*  
12                  *distributed across the various geographical re-*  
13                  *gions of the United States, including rural and*  
14                  *underserved areas;*

15                  “(D) *shall pay particular attention to geri-*  
16                  *iatrics health care workforce needs among under-*  
17                  *served populations, diverse communities, and*  
18                  *rural areas;*

19                  “(E) *may not require an eligible indi-*  
20                  *vidual, or an eligible entity applying on behalf*  
21                  *of an eligible individual, to be a recipient of a*  
22                  *grant or contract under this part; and*

23                  “(F) *shall pay the full amount of the award*  
24                  *to the eligible entity.*



1           “(5) *MAINTENANCE OF EFFORT.*—*An eligible en-*  
2           *tity receiving an award under paragraph (1) on be-*  
3           *half of an eligible individual shall provide assurances*  
4           *to the Secretary that funds provided to such indi-*  
5           *vidual under this subsection will be used only to sup-*  
6           *plement, not to supplant, the amount of Federal,*  
7           *State, and local funds otherwise expended by such in-*  
8           *dividual.*

9           “(6) *AMOUNT AND TERM.*—

10           “(A) *AMOUNT.*—*The amount of an award*  
11           *under this subsection for eligible individuals who*  
12           *are physicians shall equal \$100,000 for fiscal*  
13           *year 2020, adjusted for subsequent fiscal years to*  
14           *reflect the increase in the Consumer Price Index.*  
15           *The Secretary shall determine the amount of an*  
16           *award under this subsection for individuals who*  
17           *are not physicians.*

18           “(B) *TERM.*—*The term of any award made*  
19           *under this subsection shall not exceed 5 years.*

20           “(7) *SERVICE REQUIREMENT.*—*An eligible indi-*  
21           *vidual on whose behalf an application was submitted*  
22           *and approved under paragraph (3)(A) shall provide*  
23           *training in clinical geriatrics or gerontology, includ-*  
24           *ing the training of interprofessional teams of health*  
25           *care professionals.*

1       “(c) *AUTHORIZATION OF APPROPRIATIONS.*—To carry  
 2       out this section, there is authorized to be appropriated  
 3       \$51,000,000 for each of fiscal years 2020 through 2024. Not-  
 4       withstanding the preceding sentence, no funds shall be made  
 5       available to carry out subsection (b) for a fiscal year unless  
 6       the amount made available to carry out this section for such  
 7       fiscal year is more than the amount made available to carry  
 8       out this section for fiscal year 2017.”.

9       **SEC. 4. INVESTMENT IN TOMORROW’S PEDIATRIC HEALTH**  
 10       **CARE WORKFORCE.**

11       Section 775 of the Public Health Service Act (42  
 12       U.S.C. 295f) is amended to read as follows:

13       **“SEC. 775. INVESTMENT IN TOMORROW’S PEDIATRIC**  
 14       **HEALTH CARE WORKFORCE.**

15       “(a) *IN GENERAL.*—The Secretary shall establish and  
 16       carry out a program of entering into pediatric specialty  
 17       loan repayment agreements with qualified health profes-  
 18       sionals under which—

19               “(1) the qualified health professional agrees to a  
 20               period of not less than 2 years of obligated service  
 21               during which the professional will—

22                       “(A) participate in an accredited pediatric  
 23                       medical subspecialty, pediatric surgical spe-  
 24                       cialty, child and adolescent psychiatry sub-

1       *specialty, or child and adolescent mental and be-*  
2       *havioral health residency or fellowship; or*

3               *“(B) be employed full-time in providing pe-*  
4       *diatric medical subspecialty care, pediatric sur-*  
5       *gical specialty care, child and adolescent psychi-*  
6       *atry subspecialty care, or child and adolescent*  
7       *mental and behavioral health care, including*  
8       *substance use disorder prevention and treatment*  
9       *services, in an area with—*

10               *“(i) a shortage of health care profes-*  
11       *sionals practicing in the pediatric medical*  
12       *subspecialty, the pediatric surgical spe-*  
13       *cialty, the child and adolescent psychiatry*  
14       *subspecialty, or child and adolescent mental*  
15       *and behavioral health, as applicable; and*

16               *“(ii) a sufficient pediatric population,*  
17       *as determined by the Secretary, to support*  
18       *the addition of a practitioner in the pedi-*  
19       *atric medical subspecialty, the pediatric*  
20       *surgical specialty, the child and adolescent*  
21       *psychiatry subspecialty, or child and ado-*  
22       *lescent mental and behavioral health, as ap-*  
23       *plicable; and*

24               *“(2) the Secretary agrees to make payments on*  
25       *the principal and interest of undergraduate, grad-*

uate, or graduate medical education loans of the  
 qualified health professional of not more than \$35,000  
 a year for each year of agreed upon service under  
 paragraph (1) for a period of not more than 3 years.

“(b) *ELIGIBILITY REQUIREMENTS.*—

“(1) *PEDIATRIC MEDICAL SPECIALISTS AND PE-  
 DIATRIC SURGICAL SPECIALISTS.*—For purposes of  
 loan repayment agreements under this section with  
 respect to pediatric medical subspecialty and pedi-  
 atric surgical specialty practitioners, the term ‘quali-  
 fied health professional’ means a licensed physician  
 who—

“(A) is entering or receiving training in an  
 accredited pediatric medical subspecialty or pe-  
 diatric surgical subspecialty residency or fellow-  
 ship; or

“(B) has completed (but not prior to the  
 end of the calendar year in which the *Educating  
 Medical Professionals and Optimizing Workforce  
 Efficiency and Readiness for Health Act of 2019*  
 is enacted) the training described in subpara-  
 graph (A).

“(2) *CHILD AND ADOLESCENT PSYCHIATRY AND  
 MENTAL AND BEHAVIORAL HEALTH.*—For purposes of  
 loan repayment agreements under this section with

1       *respect to child and adolescent mental and behavioral*  
2       *health care, the term ‘qualified health professional’*  
3       *means a health care professional who—*

4               “(A) *has received specialized training or*  
5               *clinical experience in child and adolescent men-*  
6               *tal health in psychiatry, psychology, school psy-*  
7               *chology, or psychiatric nursing;*

8               “(B) *has a license or certification in a*  
9               *State to practice allopathic medicine, osteopathic*  
10              *medicine, psychology, school psychology, or psy-*  
11              *chiatric nursing; or*

12              “(C) *is a mental health service professional*  
13              *who has completed (but not before the end of the*  
14              *calendar year in which the Educating Medical*  
15              *Professionals and Optimizing Workforce Effi-*  
16              *ciency and Readiness for Health Act of 2019 is*  
17              *enacted) specialized training or clinical experi-*  
18              *ence in child and adolescent mental health de-*  
19              *scribed in subparagraph (A).*

20              “(3) *ADDITIONAL ELIGIBILITY REQUIREMENTS.—*

21       *The Secretary may not enter into a loan repayment*  
22       *agreement under this section with a qualified health*  
23       *professional unless—*

24              “(A) *the professional agrees to work in, or*  
25              *for a provider serving, an area or community*

1           *with a shortage of eligible qualified health profes-*  
2           *sionals (as defined in paragraphs (1) and (2));*

3           *“(B) the professional is a United States cit-*  
4           *izen, a permanent legal United States resident,*  
5           *or lawfully present in the United States; and*

6           *“(C) if the professional is enrolled in a*  
7           *graduate program, the program is accredited,*  
8           *and the professional has an acceptable level of*  
9           *academic standing (as determined by the Sec-*  
10          *retary).*

11          *“(c) PRIORITY.—In entering into loan repayment*  
12          *agreements under this section, the Secretary shall give pri-*  
13          *ority to applicants who—*

14                *“(1) have familiarity with evidence-based meth-*  
15                *ods and cultural and linguistic competence in health*  
16                *care services; and*

17                *“(2) demonstrate financial need.*

18          *“(d) AUTHORIZATION OF APPROPRIATIONS.—There*  
19          *are authorized to be appropriated for each of fiscal years*  
20          *2020 through 2024—*

21                *“(1) \$30,000,000 to carry out this section with*  
22                *respect to loan repayment agreements with qualified*  
23                *health professionals described in subsection (b)(1);*  
24                *and*

1           “(2) \$20,000,000 to carry out this section with  
 2       respect to loan repayment agreements with respect to  
 3       qualified health professionals described in subsection  
 4       (b)(2).”.

5   **SEC. 5. INCREASING WORKFORCE DIVERSITY IN THE PRO-**  
 6                   **FESSIONS OF PHYSICAL THERAPY, OCCUPA-**  
 7                   **TIONAL THERAPY, AUDIOLOGY, AND SPEECH-**  
 8                   **LANGUAGE PATHOLOGY.**

9       *Title VII of the Public Health Service Act is amend-*  
 10   *ed—*

11           (1) *by redesignating part G (42 U.S.C. 295j et*  
 12       *seq.) as part H; and*

13           (2) *by inserting after part F (42 U.S.C. 294n et*  
 14       *seq.) the following new part:*

15   **“PART G—INCREASING WORKFORCE DIVERSITY**  
 16       **IN THE PROFESSIONS OF PHYSICAL THER-**  
 17       **APY, OCCUPATIONAL THERAPY, AUDIOLOGY,**  
 18       **AND SPEECH-LANGUAGE PATHOLOGY**

19   **“SEC. 783. SCHOLARSHIPS AND STIPENDS.**

20       “(a) *IN GENERAL.—The Secretary may award grants*  
 21       *and contracts to eligible entities to increase educational op-*  
 22       *portunities in the professions of physical therapy, occupa-*  
 23       *tional therapy, audiology, and speech-language pathology*  
 24       *for eligible individuals by—*

1           “(1) providing student scholarships or stipends,  
2       including for—

3           “(A) completion of an accelerated degree  
4       program;

5           “(B) completion of an associate’s, bachelor’s,  
6       master’s, or doctoral degree program; and

7           “(C) entry by a diploma or associate’s de-  
8       gree practitioner into a bridge or degree comple-  
9       tion program;

10          “(2) providing assistance for completion of pre-  
11       requisite courses or other preparation necessary for  
12       acceptance for enrollment in the eligible entity; and

13          “(3) carrying out activities to increase the reten-  
14       tion of students in one or more programs in the pro-  
15       fessions of physical therapy, occupational therapy,  
16       audiology, and speech-language pathology.

17       “(b) CONSIDERATION OF RECOMMENDATIONS.—In  
18       carrying out subsection (a), the Secretary shall take into  
19       consideration the recommendations of national organiza-  
20       tions representing the professions of physical therapy, occu-  
21       pational therapy, audiology, and speech-language pathol-  
22       ogy, including the American Physical Therapy Association,  
23       the American Occupational Therapy Association, the Amer-  
24       ican Speech-Language-Hearing Association, the American



1 *Academy of Audiology, and the Academy of Doctors of*  
 2 *Audiology.*

3 “(c) *REQUIRED INFORMATION AND CONDITIONS FOR*  
 4 *AWARD RECIPIENTS.*—

5 “(1) *IN GENERAL.*—*The Secretary may require*  
 6 *recipients of awards under this section to report to*  
 7 *the Secretary concerning the annual admission, reten-*  
 8 *tion, and graduation rates for eligible individuals in*  
 9 *programs of the recipient leading to a degree in any*  
 10 *of the professions of physical therapy, occupational*  
 11 *therapy, audiology, and speech-language pathology.*

12 “(2) *FALLING RATES.*—*If any of the rates re-*  
 13 *ported by a recipient under paragraph (1) fall below*  
 14 *the average for such recipient over the two years pre-*  
 15 *ceding the year covered by the report, the recipient*  
 16 *shall provide the Secretary with plans for imme-*  
 17 *diately improving such rates.*

18 “(3) *INELIGIBILITY.*—*A recipient described in*  
 19 *paragraph (2) shall be ineligible for continued fund-*  
 20 *ing under this section if the plan of the recipient fails*  
 21 *to improve the rates within the 1-year period begin-*  
 22 *ning on the date such plan is implemented.*

23 “(d) *DEFINITIONS.*—*In this section:*

24 “(1) *ELIGIBLE ENTITIES.*—*The term ‘eligible en-*  
 25 *tity’ means an education program that—*

1 “(A) is accredited by—

2 “(i) the Council on Academic Accreddi-  
3 tation in Audiology and Speech-Language  
4 Pathology or the Accreditation Commission  
5 for Audiology Education;

6 “(ii) the Commission on Accreditation  
7 in Physical Therapy Education; or

8 “(iii) the Accreditation Council for Oc-  
9 cupational Therapy Education; and

10 “(B) is carrying out a program for recruit-  
11 ing and retaining students underrepresented in  
12 the professions of physical therapy, occupational  
13 therapy, audiology, and speech-language pathol-  
14 ogy (including racial or ethnic minorities, or  
15 students from disadvantaged backgrounds).

16 “(2) *ELIGIBLE INDIVIDUAL*.—The term ‘eligible  
17 individual’ means an individual who—

18 “(A) is a member of a class of persons who  
19 are underrepresented in the professions of phys-  
20 ical therapy, occupational therapy, audiology,  
21 and speech-language pathology (including indi-  
22 viduals who are racial or ethnic minorities, or  
23 are from disadvantaged backgrounds);

24 “(B) has a financial need for a scholarship  
25 or stipend; and

1                   “(C) is enrolled (or accepted for enrollment)  
2                   at an audiology, speech-language pathology,  
3                   physical therapy, or occupational therapy pro-  
4                   gram as a full-time student at an eligible entity.  
5                   “(e) *AUTHORIZATION OF APPROPRIATIONS.*—There are  
6                   authorized to be appropriated to carry out this section  
7                   \$5,000,000 for each of fiscal years 2020 through 2024.”.

Union Calendar No. 169

116TH CONGRESS  
1ST Session

**H. R. 2781**

[Report No. 116-214]

**A BILL**

To amend title VII of the Public Health Service Act to reauthorize certain programs relating to the health professions workforce, and for other purposes.

SEPTEMBER 24, 2019

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed