

AMENDMENT TO H.R. 4641
OFFERED BY MR. ENGEL OF NEW YORK

At the end of the bill, add the following:

1 **SEC. 2. PALLIATIVE CARE AND HOSPICE EDUCATION AND**
2 **TRAINING.**

3 (a) IN GENERAL.—Part D of title VII of the Public
4 Health Service Act (42 U.S.C. 294 et seq.) is amended
5 by adding at the end the following:

6 **“SEC. 759A. PALLIATIVE CARE AND HOSPICE EDUCATION**
7 **AND TRAINING.**

8 “(a) PALLIATIVE CARE AND HOSPICE EDUCATION
9 CENTERS.—

10 “(1) IN GENERAL.—The Secretary shall award
11 grants or contracts under this section to entities de-
12 scribed in paragraph (1), (3), or (4) of section
13 799B, and section 801(2), for the establishment or
14 operation of Palliative Care and Hospice Education
15 Centers that meet the requirements of paragraph
16 (2).

17 “(2) REQUIREMENTS.—A Palliative Care and
18 Hospice Education Center meets the requirements of
19 this paragraph if such Center—

1 “(A) improves the training of health pro-
2 fessionals in palliative care, including residen-
3 cies, traineeships, or fellowships;

4 “(B) develops and disseminates curricula
5 relating to the palliative treatment of the com-
6 plex health problems of individuals with serious
7 or life threatening illnesses;

8 “(C) supports the training and retraining
9 of faculty to provide instruction in palliative
10 care;

11 “(D) supports continuing education of
12 health professionals who provide palliative care
13 to patients with serious or life threatening ill-
14 ness;

15 “(E) provides students (including resi-
16 dents, trainees, and fellows) with clinical train-
17 ing in palliative care in long-term care facilities,
18 home care, hospices, chronic and acute disease
19 hospitals, and ambulatory care centers;

20 “(F) establishes traineeships for individ-
21 uals who are preparing for advanced education
22 nursing degrees, social work degrees, or ad-
23 vanced degrees in physician assistant studies,
24 with a focus in palliative care in long-term care
25 facilities, home care, hospices, chronic and

1 acute disease hospitals, and ambulatory care
2 centers; and

3 “(G) does not duplicate the activities of ex-
4 isting education centers funded under this sec-
5 tion or under section 753 or 865.

6 “(3) EXPANSION OF EXISTING CENTERS.—

7 Nothing in this section shall be construed to—

8 “(A) prevent the Secretary from providing
9 grants to expand existing education centers, in-
10 cluding geriatric education centers established
11 under section 753 or 865, to provide for edu-
12 cation and training focused specifically on pal-
13 liative care, including for non-geriatric popu-
14 lations; or

15 “(B) limit the number of education centers
16 that may be funded in a community.

17 “(b) PALLIATIVE MEDICINE PHYSICIAN TRAINING.—

18 “(1) IN GENERAL.—The Secretary may make
19 grants to, and enter into contracts with, schools of
20 medicine, schools of osteopathic medicine, teaching
21 hospitals, and graduate medical education programs,
22 for the purpose of providing support for projects
23 that fund the training of physicians (including resi-
24 dents, trainees, and fellows) who plan to teach pal-
25 liative medicine.

1 “(2) REQUIREMENTS.—Each project for which
2 a grant or contract is made under this subsection
3 shall—

4 “(A) be staffed by full-time teaching physi-
5 cians who have experience or training in pallia-
6 tive medicine;

7 “(B) be based in a hospice and palliative
8 medicine fellowship program accredited by the
9 Accreditation Council for Graduate Medical
10 Education;

11 “(C) provide training in palliative medicine
12 through a variety of service rotations, such as
13 consultation services, acute care services, ex-
14 tended care facilities, ambulatory care and com-
15 prehensive evaluation units, hospice, home
16 health, and community care programs;

17 “(D) develop specific performance-based
18 measures to evaluate the competency of train-
19 ees; and

20 “(E) provide training in palliative medicine
21 through one or both of the training options de-
22 scribed in subparagraphs (A) and (B) of para-
23 graph (3).

1 “(3) TRAINING OPTIONS.—The training options
2 referred to in subparagraph (E) of paragraph (2)
3 shall be as follows:

4 “(A) 1-year retraining programs in hospice
5 and palliative medicine for physicians who are
6 faculty at schools of medicine and osteopathic
7 medicine, or others determined appropriate by
8 the Secretary.

9 “(B) 1- or 2-year training programs that
10 shall be designed to provide training in hospice
11 and palliative medicine for physicians who have
12 completed graduate medical education programs
13 in any medical specialty leading to board eligi-
14 bility in hospice and palliative medicine pursu-
15 ant to the American Board of Medical Special-
16 ties.

17 “(4) DEFINITIONS.—For purposes of this sub-
18 section the term ‘graduate medical education’ means
19 a program sponsored by a school of medicine, a
20 school of osteopathic medicine, a hospital, or a pub-
21 lic or private institution that—

22 “(A) offers postgraduate medical training
23 in the specialties and subspecialties of medicine;
24 and

1 “(B) has been accredited by the Accredita-
2 tion Council for Graduate Medical Education or
3 the American Osteopathic Association through
4 its Committee on Postdoctoral Training.

5 “(c) PALLIATIVE MEDICINE AND HOSPICE AKA-
6 DEMIC CAREER AWARDS.—

7 “(1) ESTABLISHMENT OF PROGRAM.—The Sec-
8 retary shall establish a program to provide awards,
9 to be known as the ‘Palliative Medicine and Hospice
10 Academic Career Awards’, to eligible individuals to
11 promote the career development of such individuals
12 as academic hospice and palliative care physicians.

13 “(2) ELIGIBLE INDIVIDUALS.—To be eligible to
14 receive an award under paragraph (1), an individual
15 shall—

16 “(A) be board certified or board eligible in
17 hospice and palliative medicine; and

18 “(B) have a junior (non-tenured) faculty
19 appointment at an accredited (as determined by
20 the Secretary) school of medicine or osteopathic
21 medicine.

22 “(3) LIMITATIONS.—No award under para-
23 graph (1) may be made to an eligible individual un-
24 less the individual—

1 “(A) has submitted to the Secretary an ap-
2 plication, at such time, in such manner, and
3 containing such information as the Secretary
4 may require, and the Secretary has approved
5 such application;

6 “(B) provides, in such form and manner as
7 the Secretary may require, assurances that the
8 individual will meet the service requirement de-
9 scribed in paragraph (6); and

10 “(C) provides, in such form and manner as
11 the Secretary may require, assurances that the
12 individual has a full-time faculty appointment
13 in a health professions institution and docu-
14 mented commitment from such institution to
15 spend a majority of the total funded time of
16 such individual on teaching and developing
17 skills in interdisciplinary education in palliative
18 care.

19 “(4) MAINTENANCE OF EFFORT.—An eligible
20 individual who receives an award under paragraph
21 (1) shall provide assurances to the Secretary that
22 funds provided to the eligible individual under this
23 subsection will be used only to supplement, not to
24 supplant, the amount of Federal, State, and local
25 funds otherwise expended by the eligible individual.

1 “(5) AMOUNT AND TERM.—

2 “(A) AMOUNT.—The amount of an award
3 under this subsection shall be equal to the
4 award amount provided for under section
5 753(c)(5)(A) for the fiscal year involved.

6 “(B) TERM.—The term of an award made
7 under this subsection shall not exceed 5 years.

8 “(C) PAYMENT TO INSTITUTION.—The
9 Secretary shall make payments for awards
10 under this subsection to institutions which in-
11 clude schools of medicine and osteopathic medi-
12 cine.

13 “(6) SERVICE REQUIREMENT.—An individual
14 who receives an award under this subsection shall
15 provide training in palliative care and hospice, in-
16 cluding the training of interdisciplinary teams of
17 health care professionals. The provision of such
18 training shall constitute a majority of the total fund-
19 ed obligations of such individual under the award.

20 “(d) PALLIATIVE CARE WORKFORCE DEVELOP-
21 MENT.—

22 “(1) IN GENERAL.—The Secretary shall award
23 grants or contracts under this subsection to entities
24 that operate a Palliative Care and Hospice Edu-
25 cation Center pursuant to subsection (a)(1).

1 “(2) APPLICATION.—To be eligible for an
2 award under paragraph (1), an entity described in
3 such paragraph shall submit to the Secretary an ap-
4 plication at such time, in such manner, and con-
5 taining such information as the Secretary may re-
6 quire.

7 “(3) USE OF FUNDS.—Amounts awarded under
8 a grant or contract under paragraph (1) shall be
9 used to carry out the fellowship program described
10 in paragraph (4).

11 “(4) FELLOWSHIP PROGRAM.—

12 “(A) IN GENERAL.—Pursuant to para-
13 graph (3), a Palliative Care and Hospice Edu-
14 cation Center that receives an award under this
15 subsection shall use such funds to offer short-
16 term intensive courses (referred to in this sub-
17 section as a ‘fellowship’) that focus on palliative
18 care that provide supplemental training for fac-
19 ulty members in medical schools and other
20 health professions schools with programs in
21 psychology, pharmacy, nursing, social work,
22 physician assistant education, chaplaincy, or
23 other health disciplines, as approved by the Sec-
24 retary. Such a fellowship shall be open to cur-
25 rent faculty, and appropriately credentialed vol-

1 unteer faculty and practitioners, who do not
2 have formal training in palliative care, to up-
3 grade their knowledge and clinical skills for the
4 care of individuals with serious or life-threat-
5 ening illness and to enhance their interdiscipli-
6 nary and interprofessional teaching skills.

7 “(B) LOCATION.—A fellowship under this
8 paragraph shall be offered either at the Pallia-
9 tive Care and Hospice Education Center that is
10 sponsoring the course, in collaboration with
11 other Palliative Care and Hospice Education
12 Centers, or at medical schools, schools of nurs-
13 ing, schools of pharmacy, schools of social work,
14 schools of chaplaincy or pastoral care education,
15 graduate programs in psychology, physician as-
16 sistant education programs, or other health pro-
17 fessions schools approved by the Secretary with
18 which the Centers are affiliated.

19 “(C) CONTINUING EDUCATION CREDIT.—
20 Participation in a fellowship under this para-
21 graph shall be accepted with respect to com-
22 plying with continuing health profession edu-
23 cation requirements. As a condition of such ac-
24 ceptance, the recipient shall subsequently pro-
25 vide a minimum of 18 hours of voluntary in-

1 struction in palliative care content (that has
2 been approved by a palliative care and hospice
3 education center) to students or trainees in
4 health-related educational, home, hospice, or
5 long-term care settings.

6 “(5) TARGETS.—A Palliative Care and Hospice
7 Education Center that receives an award under this
8 subsection shall meet targets approved by the Sec-
9 retary for providing palliative care training to a cer-
10 tain number of faculty or practitioners during the
11 term of the award, as well as other parameters es-
12 tablished by the Secretary.

13 “(6) AMOUNT OF AWARD.—An award under
14 this subsection shall be in an amount of \$150,000.
15 Not more than 24 Palliative Care and Hospice Edu-
16 cation Centers may receive an award under this sub-
17 section.

18 “(7) MAINTENANCE OF EFFORT.—A Palliative
19 Care and Hospice Education Center that receives an
20 award under this subsection shall provide assurances
21 to the Secretary that funds provided to the Center
22 under the award will be used only to supplement,
23 not to supplant, the amount of Federal, State, and
24 local funds otherwise expended by such Center.

1 “(e) PALLIATIVE CARE AND HOSPICE CAREER IN-
2 CENTIVE AWARDS.—

3 “(1) IN GENERAL.—The Secretary shall award
4 grants or contracts under this subsection to individ-
5 uals described in paragraph (2) to foster greater in-
6 terest among a variety of health professionals in en-
7 tering the field of palliative care.

8 “(2) ELIGIBLE INDIVIDUALS.—To be eligible to
9 receive an award under paragraph (1), an individual
10 shall—

11 “(A) be an advanced practice nurse, a so-
12 cial worker, physician assistant, pharmacist,
13 chaplain, or student of psychology who is pur-
14 suing a doctorate, masters, or other advanced
15 degree with a focus in palliative care or related
16 fields in an accredited health professions school;
17 and

18 “(B) submit to the Secretary an applica-
19 tion at such time, in such manner, and con-
20 taining such information as the Secretary may
21 require.

22 “(3) CONDITIONS OF AWARD.—As a condition
23 of receiving an award under this subsection, an indi-
24 vidual shall agree that, following completion of the
25 award period, the individual will teach or practice

1 palliative care in health-related educational, home,
2 hospice or long-term care settings for a minimum of
3 5 years under guidelines established by the Sec-
4 retary.

5 “(4) PAYMENT TO INSTITUTION.—The Sec-
6 retary shall make payments for awards under this
7 subsection to institutions which include schools of
8 medicine, osteopathic medicine, nursing, social work,
9 psychology, chaplaincy or pastoral care education,
10 dentistry, and pharmacy, or other allied health dis-
11 cipline in an accredited health professions school or
12 program (such as a physician assistant education
13 program) that is approved by the Secretary.

14 “(f) AUTHORIZATION OF APPROPRIATIONS.—There
15 are authorized to be appropriated to carry out this section,
16 \$44,100,000 for each of the fiscal years 2017 through
17 2021.”.

18 (b) EFFECTIVE DATE.—The amendment made by
19 this section shall be effective beginning on the date that
20 is 90 days after the date of enactment of this Act.

21 **SEC. 3. HOSPICE AND PALLIATIVE NURSING.**

22 (a) PREFERENCE FOR GRANTS OR AWARDS FOR
23 NURSING WORKFORCE DEVELOPMENT PROJECTS.—Sec-
24 tion 805 of the Public Health Service Act (42 U.S.C.
25 296d) is amended—

1 (1) by striking “or help” and inserting “help”;
2 and

3 (2) by inserting the following before the period
4 at the end: “, or for education and training in hos-
5 pice and palliative nursing”.

6 (b) **ADVANCED EDUCATION NURSING GRANTS.**—Sec-
7 tion 811 of the Public Health Service Act (42 U.S.C.
8 296j) is amended—

9 (1) in subsection (a)—

10 (A) in paragraph (1), by striking “and” at
11 the end;

12 (B) by redesignating paragraph (2) as
13 paragraph (3);

14 (C) by inserting after paragraph (1), the
15 following new paragraph:

16 “(2) palliative care and hospice career incentive
17 awards authorized under section 759A(e); and”;

18 (D) in subsection (g)(2), by inserting “or
19 for education and training in hospice and pal-
20 liative nursing” after “section 332”.

21 (c) **NURSE EDUCATION, PRACTICE, AND QUALITY**
22 **GRANTS.**—Section 831 of the Public Health Service Act
23 (42 U.S.C. 296p) is amended—

24 (1) in subsection (a)—

1 (A) by striking “or” at the end of para-
2 graph (1);

3 (B) by striking the period at the end of
4 paragraph (2) and inserting “; or”; and

5 (C) by adding at the end the following new
6 paragraph:

7 “(3) education and training in hospice and pal-
8 liative nursing.”; and

9 (2) in subsection (b)(3), by inserting “hospice
10 and palliative nursing,” after “coordinated care,”.

11 (d) NURSE RETENTION GRANTS.—Section 831A of
12 the Public Health Service Act (42 U.S.C. 296p–1) is
13 amended—

14 (1) in subsection (c)(2), by adding at the end
15 the following: “The Secretary shall also give pref-
16 erence to applicants with programs that include ini-
17 tiatives to train nurses in hospice and palliative
18 nursing.”; and

19 (2) in subsection (d), by adding at the end the
20 following: “The Secretary may also award grants to,
21 or enter into contracts with, eligible entities to train
22 nurses in hospice and palliative nursing.”.

23 (e) ADDITIONAL PALLIATIVE CARE AND HOSPICE
24 EDUCATION AND TRAINING PROGRAMS.—Part D of title

1 VIII of the Public Health Service Act (42 U.S.C. 296p
2 et seq.) is amended by adding at the end the following:

3 **“SEC. 832. PALLIATIVE CARE AND HOSPICE EDUCATION**
4 **AND TRAINING.**

5 “(a) PROGRAM AUTHORIZED.—The Secretary shall
6 award grants to eligible entities to develop and implement,
7 in coordination with programs under section 759A, pro-
8 grams and initiatives to train and educate individuals in
9 providing palliative care in health-related educational, hos-
10 pice, home, or long-term care settings.

11 “(b) USE OF FUNDS.—An eligible entity that receives
12 a grant under subsection (a) shall use funds under such
13 grant to—

14 “(1) provide training to individuals who will
15 provide palliative care in health-related educational,
16 home, hospice, or long-term care settings;

17 “(2) develop and disseminate curricula relating
18 to palliative care in health-related educational, home,
19 hospice, or long-term care settings;

20 “(3) train faculty members in palliative care in
21 health-related educational, home, hospice, or long-
22 term care settings; or

23 “(4) provide continuing education to individuals
24 who provide palliative care in health-related edu-
25 cational, home, hospice, or long-term care settings.

1 “(c) APPLICATION.—An eligible entity desiring a
2 grant under subsection (a) shall submit an application to
3 the Secretary at such time, in such manner, and con-
4 taining such information as the Secretary may reasonably
5 require.

6 “(d) ELIGIBLE ENTITY.—For purposes of this sec-
7 tion, the term ‘eligible entity’ shall include a school of
8 nursing, a health care facility, a program leading to cer-
9 tification as a certified nurse assistant, a partnership of
10 such a school and facility, or a partnership of such a pro-
11 gram and facility.

12 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
13 are authorized to be appropriated to carry out this section
14 \$5,000,000 for each of fiscal years 2017 through 2021.”.

15 **SEC. 4. NATIONAL PALLIATIVE CARE EDUCATION AND**
16 **AWARENESS CAMPAIGN.**

17 Part A of title IX of the Public Health Service Act
18 (42 U.S.C. 299 et seq.) is amended by adding at the end
19 the following new section:

20 **“SEC. 904. NATIONAL PALLIATIVE CARE EDUCATION AND**
21 **AWARENESS CAMPAIGN.**

22 “(a) IN GENERAL.—Under the authority under sec-
23 tion 902(a) to disseminate information on health care and
24 on systems for the delivery of such care, the Director shall
25 provide for the planning and implementation of a national

1 education and awareness campaign to inform patients,
2 families, and health professionals about the benefits of
3 palliative care throughout the continuum of care for pa-
4 tients with serious or life-threatening illness.

5 “(b) INFORMATION DISSEMINATED.—

6 “(1) MANDATORY INFORMATION.—The cam-
7 paign under subsection (a) shall include dissemina-
8 tion of the following:

9 “(A) PALLIATIVE CARE.—Information, re-
10 sources, and communication materials about
11 palliative care as an essential part of the con-
12 tinuum of quality care for patients and families
13 facing serious or life-threatening illness (includ-
14 ing cancer; heart, kidney, liver, lung, and infec-
15 tious diseases; as well as neurodegenerative dis-
16 ease such as dementia, Parkinson’s disease, or
17 amyotrophic lateral sclerosis (ALS)).

18 “(B) PALLIATIVE CARE SERVICES.—Spe-
19 cific information regarding the services provided
20 to patients by professionals trained in hospice
21 and palliative care, including pain and symptom
22 management, support for shared decisionmak-
23 ing, care coordination, psychosocial care, and
24 spiritual care, explaining that such services may
25 be provided starting at the point of diagnosis

1 and alongside curative treatment and are in-
2 tended to—

3 “(i) provide patient-centered and fam-
4 ily-centered support throughout the con-
5 tinuum of care for serious and life-threat-
6 ening illness;

7 “(ii) anticipate, prevent, and treat
8 physical, emotional, social, and spiritual
9 suffering;

10 “(iii) optimize quality of life; and

11 “(iv) facilitate and support goals and
12 values of patients and the families of pa-
13 tients.

14 “(C) PALLIATIVE CARE PROFESSIONALS.—

15 Specific materials that explain the role of pro-
16 fessionals trained in hospice and palliative care
17 in providing team-based care (including pain
18 and symptom management, support for shared
19 decisionmaking, care coordination, psychosocial
20 care, and spiritual care) for patients and fami-
21 lies throughout the continuum of care for seri-
22 ous or life-threatening illness.

23 “(D) RESEARCH.—Evidence-based re-
24 search demonstrating the benefits of patient ac-

1 cess to palliative care throughout the continuum
2 of care for serious or life-threatening illness.

3 “(E) POPULATION-SPECIFIC MATERIALS.—
4 Materials shall be developed that target specific
5 populations, including patients with serious or
6 life-threatening illness who are among medically
7 underserved populations (as defined in section
8 330(b)(3)) and families of such patients or
9 health professionals serving medically under-
10 served populations. Such populations shall in-
11 clude pediatric patients, young adult and ado-
12 lescent patients, racial and ethnic minority pop-
13 ulations, and other priority populations speci-
14 fied by the Director.

15 “(2) OTHER INFORMATION.—In addition to the
16 information described in paragraph (1), such cam-
17 paign may include dissemination of such other infor-
18 mation as the Director determines to be relevant.

19 “(3) INFORMATION FORMAT.—The information
20 and materials required to be disseminated under
21 paragraph (1) and any information disseminated
22 under paragraph (2) shall be presented in a variety
23 of formats (such as posted online, in print, and
24 through public service announcements).

1 “(4) REQUIRED PUBLICATION.—The informa-
2 tion and materials required to be disseminated under
3 paragraph (1) and any information disseminated
4 under paragraph (2) shall be posted on the Internet
5 web sites of relevant Federal agencies and Depart-
6 ments, including the Agency for Healthcare Re-
7 search and Quality, the Centers for Medicare &
8 Medicaid Services, the Administration on Aging, the
9 Centers for Disease Control and Prevention, and the
10 Department of Veterans Affairs.

11 “(c) CONSULTATION.—The Director shall consult
12 with appropriate professional societies, hospice and pallia-
13 tive care stakeholders, and relevant patient advocate orga-
14 nizations with respect to palliative care, psychosocial care,
15 and complex chronic illness with respect to the following:

16 “(1) The planning and implementation of the
17 national palliative care education and awareness
18 campaign under this section.

19 “(2) The development of information to be dis-
20 seminated under this section.

21 “(3) A definition of the term ‘serious or life-
22 threatening illness’ for purposes of this section.”.

1 **SEC. 5. ENHANCING NIH RESEARCH IN PALLIATIVE CARE.**

2 (a) IN GENERAL.—Part B of title IV of the Public
3 Health Service Act (42 U.S.C. 284 et seq.) is amended
4 by adding at the end the following new section:

5 **“SEC. 409K. ENHANCING RESEARCH IN PALLIATIVE CARE.**

6 “(a) IN GENERAL.—The Secretary, acting through
7 the Director of the National Institutes of Health, shall de-
8 velop and implement a strategy to be applied across the
9 institutes and centers of the National Institutes of Health
10 to expand national research programs in palliative care.

11 “(b) RESEARCH PROGRAMS.—The Director of the
12 National Institutes of Health shall expand and intensify
13 research programs in palliative care to address the quality
14 of care and quality of life for the rapidly growing popu-
15 lation of patients in the United States with serious or life-
16 threatening illnesses, including cancer; heart, kidney, liver,
17 lung, and infectious diseases; as well as neurodegenerative
18 disease such as dementia, Parkinson’s disease, or
19 amyotrophic lateral sclerosis (ALS).”

20 (b) EXPANDING TRANS-NIH RESEARCH REPORTING
21 TO INCLUDE PALLIATIVE CARE RESEARCH.—Section
22 402A(c)(2)(B)(i) of the Public Health Service Act (42
23 U.S.C. 282a(c)(2)(B)(i)) is amended by inserting “and,
24 beginning January 1, 2017, for conducting or supporting

1 research with respect to palliative care” after “or national
2 centers”.

