

Suspend the Rules and Pass the Bill, H.R. 3728, With an Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

115TH CONGRESS
1ST SESSION

H. R. 3728

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

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 11, 2017

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

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
5 Professionals and Optimizing Workforce Efficiency and
6 Readiness Act of 2018” or the “EMPOWER Act of
7 2018”.

1 **SEC. 2. REAUTHORIZATION OF HEALTH PROFESSIONS**
2 **WORKFORCE PROGRAMS.**

3 (a) **CENTERS OF EXCELLENCE.**—Subsection (i) of
4 section 736 of the Public Health Service Act (42 U.S.C.
5 293) is amended to read as follows:

6 “(i) **AUTHORIZATION OF APPROPRIATIONS.**—To
7 carry out this section, there is authorized to be appro-
8 priated \$23,711,000 for each of fiscal years 2019 through
9 2023.”.

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

13 (1) in subsection (a), by striking “\$51,000,000
14 for fiscal year 2010, and such sums as may be nec-
15 essary for each of the fiscal years 2011 through
16 2014” and inserting “\$48,970,000 for each of fiscal
17 years 2019 through 2023”;

18 (2) in subsection (b), by striking “\$5,000,000
19 for each of the fiscal years 2010 through 2014” and
20 inserting “\$1,190,000 for each of fiscal years 2019
21 through 2023”; and

22 (3) in subsection (c), by striking “\$60,000,000
23 for fiscal year 2010 and such sums as may be nec-
24 essary for each of the fiscal years 2011 through
25 2014” and inserting “\$14,189,000 for each of fiscal
26 years 2019 through 2023”.

1 (c) PRIMARY CARE TRAINING AND ENHANCE-
2 MENT.—Section 747(c)(1) of the Public Health Service
3 Act (42 U.S.C. 293k(c)(1)) is amended by striking
4 “\$125,000,000 for fiscal year 2010, and such sums as
5 may be necessary for each of fiscal years 2011 through
6 2014” and inserting “\$48,924,000 for each of fiscal years
7 2019 through 2023”.

8 (d) TRAINING IN GENERAL, PEDIATRIC, AND PUBLIC
9 HEALTH DENTISTRY.—Section 748(f) of the Public
10 Health Service Act (42 U.S.C. 293k–2(f)) is amended by
11 striking “\$30,000,000 for fiscal year 2010 and such sums
12 as may be necessary for each of fiscal years 2011 through
13 2015” and inserting “\$40,673,000 for each of fiscal years
14 2019 through 2023”.

15 (e) AREA HEALTH EDUCATION CENTERS.—Section
16 751(j)(1) of the Public Health Service Act (42 U.S.C.
17 294a(j)(1)) is amended by striking “\$125,000,000 for
18 each of the fiscal years 2010 through 2014” and inserting
19 “\$38,250,000 for each of fiscal years 2019 through
20 2023”.

21 (f) NATIONAL CENTER FOR HEALTHCARE WORK-
22 FORCE ANALYSIS.—

23 (1) IN GENERAL.—Section 761(e)(1)(A) of the
24 Public Health Service Act (42 U.S.C.
25 294n(e)(1)(A)) is amended by striking “\$7,500,000

1 for each of fiscal years 2010 through 2014” and in-
2 serting “\$5,663,000 for each of fiscal years 2019
3 through 2023”.

4 (2) TECHNICAL CORRECTION.—Section
5 761(e)(2) of the Public Health Service Act (42
6 U.S.C. 294n(e)(2)) is amended by striking “sub-
7 section (a)” and inserting “paragraph (1)”.

8 (g) PUBLIC HEALTH WORKFORCE.—Section 770(a)
9 of the Public Health Service Act (42 U.S.C. 295e(a)) is
10 amended by striking “\$43,000,000 for fiscal year 2011,
11 and such sums as may be necessary for each of the fiscal
12 years 2012 through 2015” and inserting “\$17,000,000 for
13 each of fiscal years 2019 through 2023”.

14 **SEC. 3. EDUCATION AND TRAINING RELATING TO GERI-**
15 **ATRICS.**

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

18 **“SEC. 753. EDUCATION AND TRAINING RELATING TO GERI-**
19 **ATRICS.**

20 “(a) GERIATRICS WORKFORCE ENHANCEMENT PRO-
21 GRAMS.—

22 “(1) IN GENERAL.—The Secretary shall award
23 grants or contracts under this subsection to entities
24 described in paragraph (1), (3), or (4) of section
25 799B, section 801(2), or section 865(d), or other

1 health professions schools or programs approved by
2 the Secretary, for the establishment or operation of
3 geriatrics workforce enhancement programs that
4 meet the requirements of paragraph (2).

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

19 “(A) Transforming clinical training envi-
20 ronments to integrated geriatrics and primary
21 care delivery systems to ensure trainees are well
22 prepared to practice in and lead in such sys-
23 tems.

24 “(B) Developing providers who can assess
25 and address the needs and preferences of older

1 adults and their families and caregivers at the
2 individual, community, and population levels.

3 “(C) Creating and delivering community-
4 based programs that will provide older adults
5 and their families and caregivers with the
6 knowledge and skills to improve health out-
7 comes and the quality of care for such adults.

8 “(D) Providing Alzheimer’s disease and re-
9 lated dementias (ADRD) education to the fami-
10 lies and caregivers of older adults, direct care
11 workers, health professions students, faculty,
12 and providers.

13 “(3) DURATION.—The Secretary shall award
14 grants and contracts under paragraph (1) for a pe-
15 riod not to exceed five years.

16 “(4) APPLICATION.—To be eligible to receive a
17 grant or contract under paragraph (1), an entity de-
18 scribed in such paragraph shall submit to the Sec-
19 retary an application at such time, in such manner,
20 and containing such information as the Secretary
21 may require.

22 “(5) EQUITABLE GEOGRAPHIC DISTRIBUTION.—The Secretary may award grants and con-
23 tracts under paragraph (1) in a manner which will
24

1 equitably distribute such grants and contracts
2 among the various regions of the United States.

3 “(6) PRIORITY.—In awarding grants and con-
4 tracts under paragraph (1), the Secretary may give
5 priority to programs that—

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

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

14 “(C) provide clinical experiences across
15 care settings, including ambulatory care, hos-
16 pitals, post-acute care, nursing homes, federally
17 qualified health centers, and home and commu-
18 nity-based services;

19 “(D) emphasize education and engagement
20 of family caregivers on disease self-manage-
21 ment, medication management, and stress re-
22 duction strategies;

23 “(E) provide training to the health care
24 workforce on disease self-management, motiva-

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

3 “(F) 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;

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

11 “(H) substantially benefit rural or under-
12 served populations of older adults;

13 “(I) integrate behavioral health com-
14 petencies into primary care practice, especially
15 with respect to elder abuse, pain management,
16 and advance care planning; or

17 “(J) offer short-term intensive courses
18 that—

19 “(i) focus on geriatrics, gerontology,
20 chronic care management, and long-term
21 care that provide supplemental training for
22 faculty members in medical schools and
23 other health professions schools or grad-
24 uate programs in psychology, pharmacy,
25 nursing, social work, dentistry, public

1 health, allied health, or other health dis-
2 ciplines, as approved by the Secretary; and

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

10 “(b) GERIATRIC ACADEMIC CAREER AWARDS.—

11 “(1) ESTABLISHMENT OF PROGRAM.—The Sec-
12 retary shall establish a program to provide Geriatric
13 Academic Career Awards to eligible entities applying
14 on behalf of eligible individuals to promote the ca-
15 reer development of such individuals as academic
16 geriatricians or other academic geriatrics health pro-
17 fessionals.

18 “(2) ELIGIBILITY.—

19 “(A) ELIGIBLE ENTITY.—For purposes of
20 this subsection, the term ‘eligible entity’
21 means—

22 “(i) an entity described in paragraph
23 (1), (3), or (4) of section 799B or section
24 801(2); or

1 “(ii) an accredited health professions
2 school or graduate program approved by
3 the Secretary.

4 “(B) ELIGIBLE INDIVIDUAL.—For pur-
5 poses of this subsection, the term ‘eligible indi-
6 vidual’ means an individual who—

7 “(i) is board certified in internal med-
8 icine, family practice, psychiatry, or li-
9 censed dentistry, or has completed any re-
10 quired training in a discipline and is em-
11 ployed in an accredited health professions
12 school or graduate program that is ap-
13 proved by the Secretary;

14 “(ii) has completed an approved fel-
15 lowship program in geriatrics or geron-
16 tology, or has completed specialty training
17 in geriatrics or gerontology as required by
18 the discipline and any additional geriatrics
19 or gerontology training as required by the
20 Secretary; and

21 “(iii) has a junior (non-tenured) fac-
22 ulty appointment at an accredited school of
23 allopathic medicine, osteopathic medicine,
24 nursing, social work, psychology, dentistry,
25 pharmacy, or other allied health disciplines

1 in an accredited health professions school
2 or graduate program that is approved by
3 the Secretary.

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

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

12 “(B) provides, in such form and manner as
13 the Secretary may require, assurances that the
14 eligible individual on whose behalf an applica-
15 tion was submitted under subparagraph (A) will
16 meet the service requirement described in para-
17 graph (7); and

18 “(C) provides, in such form and manner as
19 the Secretary may require, assurances that such
20 individual has a full-time faculty appointment
21 in an accredited health professions school or
22 graduate program and documented commitment
23 from such school or program to spend 75 per-
24 cent of the total time of such individual on

1 teaching and developing skills in interprofes-
2 sional education in geriatrics.

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

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

10 “(B) may give priority to eligible entities
11 that operate a geriatrics workforce enhance-
12 ment program under subsection (a);

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

17 “(D) shall pay particular attention to geri-
18 atrics health care workforce needs among un-
19 derserved populations and rural areas; and

20 “(E) may not require an eligible individual,
21 or an eligible entity applying on behalf of an eli-
22 gible individual, to be a recipient of a grant or
23 contract under this part.

24 “(5) MAINTENANCE OF EFFORT.—An eligible
25 entity receiving an award under paragraph (1) on

1 behalf of an eligible individual shall provide assur-
2 ances to the Secretary that funds provided to such
3 individual under this subsection will be used only to
4 supplement, not to supplant, the amount of Federal,
5 State, and local funds otherwise expended by such
6 individual.

7 “(6) AMOUNT AND TERM.—

8 “(A) AMOUNT.—The amount of an award
9 under this subsection for eligible individuals
10 who are physicians shall equal \$100,000 for fis-
11 cal year 2017, adjusted for subsequent fiscal
12 years to reflect the increase in the Consumer
13 Price Index. The Secretary shall determine the
14 amount of an award under this subsection for
15 individuals who are not physicians.

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

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

1 “(c) AUTHORIZATION OF APPROPRIATIONS.—To
2 carry out this section, there is authorized to be appro-
3 priated \$40,737,000 for each of fiscal years 2019 through
4 2023. Notwithstanding the preceding sentence, no funds
5 shall be made available to carry out subsection (b) for a
6 fiscal year unless the amount made available to carry out
7 this section for such fiscal year is more than the amount
8 made available to carry out this section for fiscal year
9 2017.”.