Rosen #1

TAM22507 HMW

AMENDMENT NO.

Calendar No.__

Purpose: To improve the program of continuing educational support for health professionals serving in rural and underserved communities.

IN THE SENATE OF THE UNITED STATES-117th Cong., 2d Sess.

S.3799

To prepare for, and respond to, existing viruses, emerging new threats, and pandemics.

Referred to the Committee on ______ and ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT intended to be proposed by Ms. ROSEN (for herself and Ms. MURKOWSKI)

Viz:

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1 At the appropriate place in subtitle C of title II, in-2 sert the following:

 3 SEC. 2_____. CONTINUING EDUCATIONAL SUPPORT FOR

 4
 HEALTH PROFESSIONALS SERVING IN RURAL

 5
 AND UNDERSERVED COMMUNITIES.

6 Section 752 of the Public Health Service Act (42
7 U.S.C. 294b) is amended—

8 (1) in the section heading, by inserting
9 "RURAL AND" after "SERVING IN";

(2) in subsection (a)—

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1 (A) by striking "shall make grants to, and 2 enter into contracts with, eligible entities" and inserting ", as appropriate, shall make grants 3 4 to, and enter into contracts with, eligible enti-5 ties to support access to accredited continuing 6 medical education for primary care physicians 7 and health care providers at community health 8 centers or rural health clinics to improve and 9 increase access to care for patients in rural and 10 medically underserved areas. Such grants or 11 contracts may be used"; (B) by striking "faculty members" and in-12 13 serting "health care providers"; and 14 (C) by inserting "increase primary care 15 physician and health care provider knowledge," 16 after "practice environment,"; 17 (3) in subsection (b), by inserting ", such as a 18 community health center or rural health clinic" be-19 fore the period; (4) in subsection (c), by striking "by require." 20 21 and inserting the following: "may require, includ-22 ing-23 "(1) a description of how participation in activi-24 ties funded under this section will help improve ac-25 cess to, and quality of, health care services and

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1	training needs of primary care physicians and health
2	care providers; and
3	"(2) a plan for providing peer-to-peer training,
4	as appropriate.";
5	(5) by amending subsection (d) to read as fol-
6	lows:
7	"(d) Use of Funds.—
8	"(1) IN GENERAL.—An eligible entity shall use
9	amounts awarded under a grant or contract under
10	this section to provide innovative supportive activi-
11	ties to enhance education for primary care physi-
12	cians and health care providers described in sub-
13	section (a) through distance learning, continuing
14	educational activities, collaborative conferences, and
15	electronic and telelearning activities, with priority
16	for primary care providers who are seeking addi-
17	tional education in specialty fields such as infectious
18	disease, endocrinology, pediatrics, mental health and
19	substance use disorders, pain management, geri-
20	atrics, and other areas, as appropriate, in order to—
21	"(A) improve retention of primary care
22	physicians and health care providers and in-
23	crease access to specialty health care services
24	for patients; and

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"(B) support access to the integration of specialty care through existing service delivery locations and care across settings.
"(2) CLARIFICATION.—Entities may use amounts awarded under a grant or contract under this section for continuing educational activities that include a clinical training component, including inperson patient care, in the respective community

9 health center or rural health clinic, with the primary
10 care physician or health care provider at such site
11 and the clinical specialist from whom such additional
12 training is being provided.";

13 (6) by redesignating subsection (e) as sub-14 section (g);

15 (7) by inserting after subsection (d) the fol-16 lowing:

17 "(e) ADMINISTRATIVE EXPENSES.—An entity that
18 revives a grant or contract under this section shall use
19 not more than 5 percent of the amounts received under
20 the grant or contract under this section for administrative
21 expenses.

22 "(f) NON-DUPLICATION OF EFFORT.—The Secretary
23 shall ensure that activities under this section do not un24 necessarily duplicate efforts of other programs overseen

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by the Health Resources and Services Administration, in cluding activities described in section 330N."; and

3 (8) in subsection (g), as so redesignated, by
4 striking "\$5,000,000 for each of the fiscal years
5 2010 through 2014, and such sums as may be nec6 essary for each subsequent fiscal year" and inserting
7 "such sums as may be necessary for each of fiscal
8 years 2022 through 2025".