

105TH CONGRESS
1ST SESSION

S. 892

To amend title VII of the Public Health Service Act to revise and extend the area health education center program.

IN THE SENATE OF THE UNITED STATES

JUNE 12, 1997

Mr. GRAHAM (for himself, Mr. MCCAIN, Mr. SMITH of Oregon, Mr. WYDEN, Mr. BUMPERS, Mr. THOMAS, Mr. HUTCHINSON, Mr. BOND, Mr. GREGG, Mr. REID, Mr. FORD, Mr. ROBB, Mr. INOUYE, Mr. SANTORUM, Mr. BREAUX, Mr. HOLLINGS, Mr. GLENN, and Mr. DURBIN) introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

A BILL

To amend title VII of the Public Health Service Act to revise and extend the area health education center program.

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 “Area Health Education
5 Center Program Extension Act”.

6 **SEC. 2. AREA HEALTH EDUCATION CENTER PROGRAM.**

7 Section 746 of the Public Health Service Act (42
8 U.S.C. 293j et seq.) is amended to read as follows:

1 **“SEC. 746. AREA HEALTH EDUCATION CENTER PROGRAMS.**

2 “(a) AUTHORITY FOR PROVISION OF FINANCIAL AS-
3 SISTANCE.—

4 “(1) ASSISTANCE FOR PLANNING, DEVELOP-
5 MENT, AND OPERATION OF PROGRAMS.—

6 “(A) IN GENERAL.—The Secretary shall
7 award grants to and enter into contracts with
8 schools of medicine and osteopathic medicine
9 and incorporated consortia made up of such
10 schools, or the parent institutions of such
11 schools, for projects for the planning, develop-
12 ment and operation of area health education
13 center programs that—

14 “(i) improve the recruitment, distribu-
15 tion, supply, quality and efficiency of per-
16 sonnel providing health services in under-
17 served rural and urban areas and person-
18 nel providing health services to populations
19 having demonstrated serious unmet health
20 care needs;

21 “(ii) increase the number of primary
22 care physicians and other primary care
23 providers who provide services in under-
24 served areas through the offering of an
25 educational continuum of health career re-
26 cruitment through clinical education con-

1 cerning underserved areas in a comprehen-
2 sive health workforce strategy;

3 “(iii) carry out recruitment and health
4 career awareness programs to recruit indi-
5 viduals from underserved areas and under-
6 represented populations into the health
7 professions;

8 “(iv) prepare individuals to more ef-
9 fectively provide health services to under-
10 served areas or underserved populations
11 through field placements, preceptorships,
12 the conduct of or support of community-
13 based primary care residency programs,
14 and agreements with community-based or-
15 ganizations such as community health cen-
16 ters, migrant health centers, Indian health
17 centers, public health departments and
18 others;

19 “(v) conduct health professions edu-
20 cation and training activities for students
21 and medical residents;

22 “(vi) conduct at least 10 percent of
23 medical student required clinical education
24 at sites remote to the primary teaching fa-
25 cility of the contracting institution; and

1 “(vii) provide information dissemina-
2 tion and educational support to reduce pro-
3 fessional isolation, increase retention,
4 enhance the practice environment, and im-
5 prove health care through the timely dis-
6 semination of research findings using rel-
7 evant resources.

8 “(B) PROJECT TERMS.—

9 “(i) IN GENERAL.—Except as pro-
10 vided in clause (ii), the period during
11 which payments may be made under an
12 award under subparagraph (A) may not
13 exceed—

14 “(I) in the case of a project, 12
15 years or

16 “(II) in the case of a center with-
17 in a project, 6 years.

18 “(ii) EXCEPTION.—The periods de-
19 scribed in clause (i) shall not apply to—

20 “(I) projects that have completed
21 the initial period of Federal funding
22 under this section and that desire to
23 compete for model awards under para-
24 graph (2)(A); and

1 “(II) projects that apply for
2 awards under subsection (d) regard-
3 less of whether such projects have
4 completed their initial period of Fed-
5 eral funding under this section.

6 “(2) ASSISTANCE FOR OPERATION OF MODEL
7 PROGRAMS.—

8 “(A) IN GENERAL.—In the case of any en-
9 tity described in paragraph (1)(A) that—

10 “(i) has previously received funds
11 under this section;

12 “(ii) is operating an area health edu-
13 cation center program; and

14 “(iii) is no longer receiving financial
15 assistance under paragraph (1);

16 the Secretary may provide financial assistance
17 to such entity to pay the costs of operating and
18 carrying out the requirements of the program
19 as described in 746(a)(1).

20 “(B) MATCHING REQUIREMENT.—With re-
21 spect to the costs of operating a model program
22 under subparagraph (A), an entity, to be eligi-
23 ble for financial assistance under subparagraph
24 (A), shall make available (directly or through
25 contributions from State, county or municipal

1 governments, or the private sector) recurring
2 non-Federal contributions in cash toward such
3 costs in an amount that is equal to not less
4 than 50 percent of such costs.

5 “(C) LIMITATION.—The aggregate amount
6 of awards provided under subparagraph (A) to
7 entities in a State for a fiscal year may not ex-
8 ceed the lesser of—

9 “(i) \$2,000,000; or

10 “(ii) an amount equal to the product
11 of \$250,000 and the aggregate number of
12 area health education centers operated in
13 the State by such entities.

14 “(b) REQUIREMENTS FOR CENTERS.—

15 “(1) GENERAL REQUIREMENT.—Each area
16 health education center that receives funds under
17 this section shall encourage the regionalization of
18 health professions schools through the establishment
19 of partnerships with community-based area health
20 education centers.

21 “(2) SERVICE AREA.—Each area health edu-
22 cation center that receives funds under this section
23 shall specifically designate a geographic area or
24 medically underserved population to be served by the
25 center. Such area or population shall be in a location

1 removed from the main location of the teaching fa-
2 cilities of the schools participating in the program
3 with such center.

4 “(3) OTHER REQUIREMENTS.—Each area
5 health education center that receives funds under
6 this section shall—

7 “(A) assess the health personnel needs of
8 the area to be served by the center and assist
9 in the planning and development of training
10 programs to meet such needs;

11 “(B) arrange and support rotations for
12 students and residents in family medicine, gen-
13 eral internal medicine or general pediatrics,
14 with at least one center in each program being
15 affiliated with or conducting a rotating osteo-
16 pathic internship or medical residency training
17 program in family medicine, general internal
18 medicine, or general pediatrics in which no
19 fewer than 4 individuals are enrolled in first-
20 year positions;

21 “(C) conduct interdisciplinary training that
22 involves physicians and other health personnel
23 including, where practicable, public health pro-
24 fessionals, physician assistants, nurse practi-
25 tioners, and nurse midwives; and

1 “(D) have an advisory board, at least 75
2 percent of the members of which shall be indi-
3 viduals, including both health service providers
4 and consumers, from the area served by the
5 center.

6 “(c) CERTAIN PROVISIONS REGARDING FUNDING.—

7 “(1) ALLOCATION TO CENTERS.—Not less than
8 75 percent of the total amount of Federal funds pro-
9 vided to an entity under this section shall be allo-
10 cated by an area health education center program to
11 the area health education centers. Such entity shall
12 enter into an agreement with each center for pur-
13 poses of specifying the allocation of such 75 percent
14 of funds.

15 “(2) OPERATING COSTS.—With respect to the
16 operating costs of the area health education program
17 of an entity receiving funds under this section, the
18 entity shall make available (directly or through con-
19 tributions from State, county or municipal govern-
20 ments, or the private sector) non-Federal contribu-
21 tions in cash toward such costs in an amount that
22 is equal to not less than 50 percent of such costs,
23 except that the Secretary may grant a waiver for up
24 to 75 percent of the amount of the required non-

1 Federal match in the first three years in which an
2 entity receives funds under this section.

3 “(d) HEALTH EDUCATION AND TRAINING CEN-
4 TERS.—

5 “(1) REQUIREMENTS.—A health education
6 training center shall be an entity eligible for funds
7 under this section that—

8 “(A) addresses the persistent and severe
9 unmet health care needs in States along the
10 border between the United States and Mexico
11 and in the State of Florida, and in other urban
12 and rural areas with populations with serious
13 unmet health care needs;

14 “(B) establishes an advisory board com-
15 prised of health service providers, educators and
16 consumers from the service area;

17 “(C) conducts training and education pro-
18 grams for health professions students in these
19 areas;

20 “(D) conducts training in health education
21 services, including training to prepare commu-
22 nity health workers; and

23 “(E) supports health professionals practic-
24 ing in the area through educational and other
25 services.

1 “(2) ALLOCATION OF FUNDS.—The Secretary
2 shall make available 50 percent of the amounts ap-
3 propriated for each fiscal year under subsection (e)
4 for the establishment or operation of health edu-
5 cation training centers through projects in States
6 along the border between the United States and
7 Mexico and in the State of Florida.

8 “(e) AUTHORIZATION OF APPROPRIATIONS.—

9 “(1) AREA HEALTH EDUCATION CENTER PRO-
10 GRAMS.—

11 “(A) IN GENERAL.—There is authorized to
12 be appropriated to carry out this section, other
13 than subsection (d), \$40,000,000 for each of
14 the fiscal years 1998 through 2002.

15 “(B) REQUIRED OBLIGATION.—Of the
16 amounts appropriated under subparagraph (A)
17 for each fiscal year, the Secretary may obligate
18 for awards under subsection (a)(2)—

19 “(i) not less than 20 percent of such
20 amounts in fiscal year 1998;

21 “(ii) not less than 25 percent of such
22 amounts in fiscal year 1999;

23 “(iii) not less than 30 percent of such
24 amounts in fiscal year 2000;

1 “(iv) not less than 35 percent of such
2 amounts in fiscal year 2001; and

3 “(v) not less than 40 percent of such
4 amounts in fiscal year 2002.

5 “(C) HEALTH EDUCATION AND TRAINING
6 CENTERS.—There is authorized to be appro-
7 priated to carry out subsection (d),
8 \$10,000,000 for each of the fiscal years 1998
9 through 2002.

10 “(2) SENSE OF CONGRESS.—It is the sense of
11 the Congress that—

12 “(A) every State have an active area health
13 education center program in effect under this
14 section; and

15 “(B) the ratio of Federal funding for the
16 model program under section 746(a)(2) should
17 increase over time and that Federal funding for
18 other awards under this section shall decrease
19 so that the national program will become en-
20 tirely comprised of programs that are funded at
21 least 50 percent by State and local partners.”.

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