

107TH CONGRESS
1ST SESSION

S. 1878

To establish programs to address the health care needs of residents of the United States-Mexico Border Area, and for other purposes.

IN THE SENATE OF THE UNITED STATES

DECEMBER 20 (legislative day, DECEMBER 18), 2001

Mrs. HUTCHISON (for herself and Mr. BINGAMAN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To establish programs to address the health care needs of residents of the United States-Mexico Border Area, 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 “United States/Mexico
5 Border Health Improvement Act of 2001”.

6 **SEC. 2. FINDINGS.**

7 Congress makes the following findings:

8 (1) The United States-Mexico Border Area is
9 the area located in the United States within 100 kil-

1 ometers of the border between the United States and
2 Mexico.

3 (2) In the United States, the United States-
4 Mexico Border Area encompasses 46 counties in
5 California, Arizona, New Mexico, and Texas.

6 (3) Presently, the United States-Mexico Border
7 Area is experiencing explosive population growth. In
8 the United States, this region currently has
9 11,500,000 residents. However, this number is ex-
10 pected to exceed 22,000,000 by the year 2025. The
11 population of the region in Mexico is growing at an
12 ever faster rate. In total, the population of the com-
13 munities in both countries is expected to double be-
14 tween the years 2020 and 2025.

15 (4) With 11,500,000 residents and a 2,000-mile
16 expanse, the United States-Mexico Border Area has
17 the population and size of a State of the United
18 States. If the region was such a State, it would
19 rank—

20 (A) last in access to health care;

21 (B) second in death rates (due to hepa-
22 titis);

23 (C) third in deaths related to diabetes;

24 (D) first in the number of tuberculosis
25 cases;

1 (E) first in schoolchildren living in poverty;
2 and
3 (F) last in per capita income.

4 (5) In addition to the specific health problems
5 listed in paragraph (5), hundreds of thousands of
6 Area residents also each day face increased health
7 risks due to being exposed to the polluted water,
8 soil, and air of the region.

9 (6) Every county in the United States-Mexico
10 Border Area in the United States has at least a par-
11 tial health professional shortage area designation.
12 Twenty-five percent of such counties have severe
13 shortages and lack adequate primary care physi-
14 cians. The shortage of dentists is also severe in
15 many Area localities.

16 (7) According to GAO, the United States-Mex-
17 ico Border Area contains hundreds of colonias.
18 Colonias are substandard developments that typi-
19 cally lack running water, sewerage systems, and
20 electricity. Many of the residents of colonias are mi-
21 grant farmworker families.

22 (8) Due to the poor living conditions in the
23 colonias, the United States-Mexico Border Area has
24 a much higher rate of waterborne infectious dis-
25 eases. The occurrence of hepatitis A, for example, is

1 3 times the national rate, and the occurrence of sal-
2 monella and shigella dysentery occur is 2 to 4 times
3 the national rate.

4 **SEC. 3. DEFINITIONS.**

5 In this Act:

6 (1) UNITED STATES-MEXICO BORDER AREA.—

7 The term “United States-Mexico Border Area”
8 means the area located in the United States within
9 100 kilometers of the border between the United
10 States and Mexico.

11 (2) SECRETARY.—The term “Secretary” means
12 the Secretary of Health and Human Services.

13 **SEC. 4. OFFICE OF BORDER HEALTH.**

14 (a) IN GENERAL.—There is established within the
15 Department of Health and Human Services an Office of
16 Border Health (referred to in this section as the “Office”).

17 (b) DIRECTOR.—The Secretary shall appoint a Direc-
18 tor of the Office to administer and oversee the functions
19 of such Office.

20 (c) AUTHORITY.—In overseeing the Office, the Sec-
21 retary, acting through the Director—

22 (1) shall be responsible for the overall direction
23 of the Office and for the establishment and imple-
24 mentation of general policies respecting the manage-

1 ment and operation of programs and activities of the
2 Office;

3 (2) shall establish programs and activities to
4 study and monitor border health service delivery in
5 general, the coordination of Federal and State and
6 Federal and local border health activities, the health
7 education available for border residents, existing
8 outreach for residents and the success of such out-
9 reach, health service activities, particularly preven-
10 tion, and early intervention activities, and any other
11 activity that the Secretary determines is appropriate
12 to improve the health of United States-Mexico Bor-
13 der Area residents, including the health of Native
14 American tribes located within the primary Area;

15 (3) shall review Federal public health programs
16 and identify opportunities for collaboration with
17 other Federal, State, and local efforts to address
18 border health issues;

19 (4) shall coordinate activities with the United
20 States-Mexico Border Health Commission and State
21 offices;

22 (5) shall award grants to States, local govern-
23 ments, nonprofit organizations, or other eligible enti-
24 ties as determined by the Secretary, in the United

1 States-Mexico border area to address priorities and
2 recommendations established by—

3 (A) the United States-Mexico Border
4 Health Commission on a binational basis, in-
5 cluding the Healthy Border 2010 Program Ob-
6 jectives; and

7 (B) the Director, to improve the health of
8 border region residents;

9 (6) shall award grants to programs that seek to
10 improve the health care of Area residents, with pri-
11 ority given to applicants such as the Health Re-
12 sources and Services Administration and other appli-
13 cants that seek to provide telemedicine and tele-
14 health services; and

15 (7) shall collaborate with appropriate counter-
16 parts in Mexico to coordinate actions and programs
17 to improve health for residents of the United States-
18 Mexico border area.

19 (d) REPORT.—Not later than 1 year after the date
20 of enactment of this section, the Secretary shall prepare
21 and submit to the appropriate committees of Congress a
22 report describing Federal health programs' limitations in
23 addressing United States-Mexico Border Area health con-
24 cerns and recommending solutions to better address such
25 concerns.

1 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
2 authorized to be appropriated to carry out this section,
3 such sums as may be necessary.

4 **SEC. 5. UNITED STATES-MEXICO BORDER AREA ENVIRON-**
5 **MENTAL HEALTH PROGRAM.**

6 (a) IN GENERAL.—The Secretary shall award grants
7 to eligible entities as determined by the Secretary to estab-
8 lish environmental health hazard programs for the United
9 States-Mexico Border Area.

10 (b) PRIORITY.—In awarding grants under this sec-
11 tion, the Secretary shall give priority to eligible entities
12 that propose to establish and carry out programs that ad-
13 dress environmental health hazards in the United States-
14 Mexico Border Area for pregnant women and children.

15 (c) DUTIES.—An eligible entity that receives a grant
16 under this section, shall use funds received through such
17 grant to—

18 (1) establish an environmental health program
19 that addresses health hazards along the United
20 States-Mexico Border Area;

21 (2) identify and eliminate environmental health
22 hazards;

23 (3) coordinate its program with any environ-
24 mental health programs, if applicable, administered
25 by the Environmental Protection Agency, the Na-

1 tional Institute of Environmental Health Sciences,
2 the International Consortium for the Environment
3 (ICE), other relevant Federal, State, and local agen-
4 cies, and nongovernmental organizations;

5 (4) recruit and train health professionals and
6 environmental health specialists to identify and ad-
7 dress environmental health hazards in the United
8 States-Mexico Border Area; or

9 (5) support State and local public health, food
10 safety, and building inspection agencies to reduce
11 environmental health hazards, including hazards ex-
12 isting in or around private residences in the United
13 States-Mexico Border Area.

14 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
15 authorized to be appropriated to carry out this section,
16 such sums as may be necessary.

17 **SEC. 6. COMMUNITY HEALTH CENTERS.**

18 Part D of the Public Health Service Act (42 U.S.C.
19 254b et seq.) is amended by adding at the end the fol-
20 lowing:

21 **“SEC. 330I. UNITED STATES-MEXICO BORDER AREA**
22 **GRANTS.**

23 “(a) IN GENERAL.—The Secretary shall award
24 grants to eligible entities as determined by the Secretary

1 to establish community health centers in medically under-
2 served areas of the United States-Mexico Border Area.

3 “(b) DEFINITIONS.—The term “United States-Mex-
4 ico Border Area” means the area located in the United
5 States within 100 kilometers of the border between the
6 United States and Mexico.

7 “(c) DUTIES.—An eligible entity that receives a grant
8 under this section shall establish and fund community
9 health centers in medically underserved areas of the
10 United States-Mexico Border Area, and as designated by
11 the Secretary.

12 “(d) APPLICATION.—An eligible entity desiring a
13 grant under this section shall submit an application at
14 such time, in such manner, and containing such informa-
15 tion as the Secretary may reasonably require.

16 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
17 is authorized to be appropriated to carry out this section,
18 such sums as may be necessary.”.

19 **SEC. 7. NATIONAL HEALTH SERVICE CORPS.**

20 Subpart II of the Public Health Service Act (42
21 U.S.C. 254d et seq.) is amended by adding at the end the
22 following:

1 **“SEC. 339. UNITED STATES-MEXICO BORDER HEALTH SERV-**
2 **ICE CORPS.**

3 “(a) IN GENERAL.—The Secretary shall establish a
4 loan repayment program and recruit National Health
5 Service Corps members to provide health services for
6 United States-Mexico Border Area residents in exchange
7 for participation in such program.

8 “(b) PREFERENCE.—In selecting Corps members to
9 participate, the Secretary shall give preference to pediatri-
10 cians and pediatric specialists who are fluent in English
11 and Spanish, and to applicants who agree to serve along
12 the United States-Mexico Border Health Area for at least
13 2 years.

14 “(c) PROGRAM.—

15 “(1) IN GENERAL.—The Secretary shall estab-
16 lish a loan repayment program described in sub-
17 section (a).

18 “(2) CONTRACT.—Under such program, the
19 Secretary shall enter into written agreements with
20 individuals selected by the Secretary to provide the
21 health services described in subsection (a) in ex-
22 change for the Secretary providing payment for the
23 individual for the principal, interest, and related ex-
24 penses on government and commercial loans received
25 by the individual regarding the graduate or under-
26 graduate education of the individual (or both).

1 “(3) PAYMENT FOR YEARS SERVED.—For every
2 2 years of service that an individual contracts to
3 serve under this section the Secretary may pay for
4 1 year of educational expenses, including tuition, liv-
5 ing expenses, and any other such reasonable edu-
6 cational expenses.

7 “(d) UNITED STATES-MEXICO BORDER AREA.—The
8 term “United States-Mexico Border Area” means the area
9 located in the United States within 100 kilometers of the
10 border between the United States and Mexico.

11 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
12 is authorized to be appropriated to carry out this section,
13 such sums as may be necessary.”.

14 **SEC. 8. PROMOTOR(A) GRANT PROGRAMS.**

15 (a) PROGRAM AUTHORIZED.—The Secretary shall
16 award grants to eligible entities to establish promotor(a)
17 programs to recruit, train, and retain bilingual lay health
18 advisers to provide culturally appropriate health education
19 and other services for medically underserved populations
20 in the United States-Mexico Border Area.

21 (b) DEFINITION.—The term “eligible entity” means
22 a school of public health, an academic health sciences cen-
23 ter, a Federally qualified health center, a public health
24 agency, a border health office, or a border health edu-
25 cation training center or any other entity determined by

1 the Secretary that is located in or that serves the United
2 States-Mexico Border Area.

3 (c) DUTIES.—An eligible entity that receives a grant
4 under this section shall, in addition to the duties described
5 in subsection (a), develop bilingual promotor(a) and other
6 border-specific health training programs.

7 (d) APPLICATION.—An eligible entity desiring a
8 grant under this section, shall submit an application to
9 the Secretary at such time, in such manner, and con-
10 taining such information as the Secretary may reasonably
11 require.

12 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
13 authorized to be appropriated to carry out this section,
14 such sums as may be necessary.

15 **SEC. 9. GRANTS FOR DISTANCE LEARNING.**

16 (a) PROGRAM AUTHORIZED.—The Secretary shall
17 award grants to United States-Mexico Border Area State
18 and local health agencies, community health centers, and
19 other appropriate organizations to fully participate in the
20 provider education distance learning/information dissemi-
21 nation network of the Health Services and Resources Ad-
22 ministration.

23 (b) AUTHORIZATION OF APPROPRIATIONS.—There is
24 authorized to be appropriated to carry out this section,
25 such sums as may be necessary.

1 **SEC. 10. PREVENTION AND TREATMENT OF HIV/AIDS.**

2 (a) PROGRAM AUTHORIZED.—The Secretary shall
3 carry out a study to review agency activities regarding re-
4 ducing the spread of HIV/Aids affecting the residents in
5 the United States-Mexico Border Area.

6 (b) COORDINATIONS.—In carrying out such study,
7 the Secretary shall coordinate activities with the appro-
8 priate Federal and State agencies and with appropriate
9 agencies in Mexico to develop early intervention and treat-
10 ment efforts to curb the spread of HIV/AIDS.

11 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
12 authorized to be appropriated to carry out this section,
13 such sums as may be necessary.

14 **SEC. 11. PREVENTION AND TREATMENT OF TUBERCULOSIS.**

15 (a) PROGRAM AUTHORIZED.—The Secretary shall
16 carry out a study to review agency activities regarding re-
17 ducing the spread of tuberculosis, particularly multi-drug
18 resistant tuberculosis, affecting the residents in the
19 United States-Mexico Border Area.

20 (b) COORDINATION.—In carrying out such study, the
21 Secretary shall coordinate activities with the Immigration
22 and Naturalization Service and other appropriate Federal
23 and State agencies and with appropriate agencies in Mex-
24 ico to develop diagnosis, detection, and early intervention
25 and treatment efforts to curb the spread of tuberculosis,
26 particularly multi-drug resistant tuberculosis.

1 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
2 authorized to be appropriated to carry out this section,
3 such sums as may be necessary.

4 **SEC. 12. CHILDREN'S HEALTH INSURANCE PROGRAM.**

5 The Secretary shall establish a targeted campaign of
6 public education and awareness in the United States-Mex-
7 ico Border Area that is culturally relevant to the residents
8 of that Area.

9 **SEC. 13. INTERVENTION AND TREATMENT GRANTS.**

10 (a) PROGRAM AUTHORIZED.—The Secretary shall
11 award grants to eligible entities as determined by the Sec-
12 retary to carry out intervention and treatment programs
13 for diabetes.

14 (b) USE OF FUNDS.—An entity that receives a grant
15 under this section shall use funds received through such
16 grant to—

17 (1) develop intervention programs oriented to-
18 wards increasing access to diabetes health care;

19 (2) increase venues and opportunities for phys-
20 ical activity and exercise in the border area;

21 (3) address obesity as a risk factor for diabetes,
22 especially in juvenile populations;

23 (4) improve health choices in school nutrition;
24 and

1 tivities, studies, and trends regarding United States-Mex-
2 ico Border Area health issues, including, the resources
3 available from the Databank.

4 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
5 authorized to be appropriated to carry out this section,
6 such sums as may be necessary.

7 **SEC. 15. CENTER FOR DISEASE CONTROL PREVENTION.**

8 (a) PROGRAM AUTHORIZED.—There is established
9 within the Centers for Disease Control and Prevention a
10 Border Health Surveillance Network (referred to in this
11 section as the “Network”).

12 (b) DUTIES.—The Network shall—

13 (1) carry out activities to develop and electroni-
14 cally link the health surveillance, assessment, and re-
15 sponse capabilities of the Centers for Disease Con-
16 trol and Prevention and all border State and local
17 health agencies; and

18 (2) award grants to State and local public
19 health agencies, medical schools, schools of public
20 health, Border Health Education Training Centers,
21 or other entities as determined by the Secretary lo-
22 cated in or serving the United States-Mexico Border
23 Area for the development of border health epidemi-
24 ology training programs and to build upon the exist-
25 ing Health Alert Network, the Information Network

1 for Public Health Officials, the Border Infectious
2 Disease Surveillance (“BIDS”) Project, and a Non-
3 communicable Disease Surveillance System.

4 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
5 authorized to be appropriated to carry out this section,
6 such sums as may be necessary.

7 **SEC. 16. BORDER AREA BREAST AND CERVICAL CANCER**
8 **SCREENING.**

9 Section 1501 of the Public Health Service Act (42
10 U.S.C. 300k) is amended by adding at the end the fol-
11 lowing:

12 “(e) SPECIAL CONSIDERATION FOR BORDER AREA
13 RESIDENTS.—In making grants under subsection (a), the
14 Secretary shall set-aside certain funds described in give
15 special consideration to any State that proposes to in-
16 crease the number of United States-Mexico Border Area
17 residents who are screened for breast and cervical can-
18 cer.”.

19 **SEC. 17. GRANTS FOR BORDER AREA HEALTH TESTING.**

20 (a) IN GENERAL.—The Director of the Centers for
21 Disease Control and Prevention shall award grants to
22 United States-Mexico Border Area State and local health
23 agencies to upgrade public health laboratories and conduct
24 rapid tests for disease organisms and toxic chemicals.

1 (b) COORDINATION.—A State or local health agency
2 that receives a grant under this section shall, to the extent
3 possible, coordinate its activities carried out with funds re-
4 ceived under this section with activities carried out under
5 programs administered by the National Laboratory Train-
6 ing Network.

7 (c) APPLICATION.—A State or local health agency de-
8 siring a grant under this section shall submit an applica-
9 tion to the Director at such time, in such manner, and
10 containing such information as the Director may reason-
11 ably require.

12 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
13 authorized to be appropriated to carry out this section,
14 such sums as may be necessary.

15 **SEC. 18. HEALTH PROMOTION ACTIVITIES.**

16 (a) IN GENERAL.—The Secretary shall establish new,
17 comprehensive guidelines for community- and family-ori-
18 ented prevention and health promotion activities focused
19 on Guidelines under The Healthy Border 2010 Guidelines.
20 The Director shall disseminate these guidelines in both
21 English and Spanish to all United States-Mexico Border
22 Area health professionals, utilizing all available tools, in-
23 cluding the CDC Prevention Guidelines Database.

1 (b) AUTHORIZATION OF APPROPRIATIONS.—There is
2 authorized to be appropriated to carry out this section,
3 such sums as may be necessary.

4 **SEC. 19. GENERAL ACCOUNTING OFFICE.**

5 (a) PROGRAM AUTHORIZED.—The General Account-
6 ing Office shall conduct a comprehensive study of Federal
7 and Federal and State border health programs.

8 (b) CONTENT.—The study described in subsection (a)
9 shall review border health care programs to determine the
10 manner in which such programs may be improved. Such
11 study shall also review any problematic limitations of
12 medicare and medicaid programs in serving United States-
13 Mexico Border Area residents.

14 (c) REPORT.—Not later than 1 year after the date
15 of enactment of this section, the General Accounting Of-
16 fice shall prepare and submit to Congress a report describ-
17 ing the findings of the study described in subsection (a)
18 and recommending certain courses of action to improve
19 such border health care programs, with particular empha-
20 sis on recommendations for improving Federal and State
21 and Federal and local coordinations. Such report shall also
22 make recommendations for changes with regard to medi-
23 care and medicaid payment laws and policies for telemedi-
24 cine and telehealth activities.

1 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
2 authorized to be appropriated to carry out this section,
3 such sums as may be necessary.

4 **SEC. 20. AGENCY FOR HEALTH CARE RESEARCH AND QUAL-**
5 **ITY.**

6 (a) IN GENERAL.—The Agency for Health Care Re-
7 search and Quality shall conduct a comprehensive study
8 of border health needs, trends, and areas of needed im-
9 provement and shall utilize border academic institutes to
10 carry out such study and share the results of such study
11 with such institutes.

12 (b) CONTENT.—The study described in subsection (a)
13 shall study the health needs of United States-Mexico Bor-
14 der Area residents and—

- 15 (1) residents' access to health care services;
- 16 (2) communicable disease control in the Area;
- 17 (3) environmental problems in the Area that
18 contribute to health care problems;
- 19 (4) health research being done on residents'
20 health care needs;
- 21 (5) make recommendations regarding environ-
22 mental improvements that may be made to improve
23 health conditions of Area residents; and

1 (6) make recommendations regarding long
2 range plans to improve the quality and availability
3 of health care of Area residents.

4 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
5 authorized to be appropriated to carry out this section,
6 such sums as may be necessary.

7 **SEC. 21. GRANTS TO INCREASE RESOURCES FOR COMMU-**
8 **NITY WATER FLUORIDATION.**

9 (a) IN GENERAL.—The Secretary, acting through the
10 Director of the Division of Oral Health of the Centers for
11 Disease Control and Prevention, may make grants to
12 Southwestern border States or localities for the purpose
13 of increasing the resources available for community water
14 fluoridation.

15 (b) USE OF FUNDS.—A State or locality shall use
16 amounts provided under a grant under subsection (a)—

17 (1) to purchase fluoridation equipment;

18 (2) to train fluoridation engineers; or

19 (3) to develop educational materials on the ad-
20 vantages of fluoridation.

21 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
22 authorized to be appropriated to carry out this section,
23 such sums as may be necessary.

1 **SEC. 22. COMMUNITY WATER FLUORIDATION.**

2 (a) IN GENERAL.—The Secretary, acting through the
3 Director of the U.S. Mexico Border Health Commission
4 and the Director of the Centers for Disease Control and
5 Prevention, shall establish a demonstration project that is
6 designed to assist rural water systems in Texas, New Mex-
7 ico, Arizona and California in successfully implementing
8 the Centers for Disease Control and Prevention water
9 fluoridation guidelines entitled “Engineering and Admin-
10 istrative Recommendations for Water Fluoridation” (re-
11 ferred to in this section as the “EARWF”).

12 (b) REQUIREMENTS.—

13 (1) COLLABORATION.—The Director of the
14 U.S. Mexico Border Health Commission shall col-
15 laborate with the Director of the Centers for Disease
16 Control and Prevention in developing the project
17 under subsection (a). Through such collaboration the
18 Directors shall ensure that technical assistance and
19 training are provided to sites located in each of the
20 4 States referred to in subsection (a). The Director
21 of the U.S. Mexico Border Health Commission shall
22 provide coordination and administrative support to
23 tribes under this section.

24 (2) GENERAL USE OF FUNDS.—Amounts made
25 available under this section shall be used to assist
26 small water systems in improving the effectiveness of

1 water fluoridation and to meet the recommendations
2 of the EARWF.

3 (3) FLUORIDATION SPECIALISTS.—

4 (A) IN GENERAL.—In carrying out this
5 section, the Secretary shall provide for the es-
6 tablishment of fluoridation specialist engineer-
7 ing positions in each of the Dental Clinical and
8 Preventive Support Centers through which tech-
9 nical assistance and training will be provided to
10 tribal water operators.

11 (B) CDC.—The Director of the Centers
12 for Disease Control and Prevention shall ap-
13 point individuals to serve as the fluoridation
14 specialists.

15 (4) IMPLEMENTATION.—The project established
16 under this section shall be planned, implemented
17 and evaluated over the 5-year period beginning on
18 the date on which funds are appropriated under this
19 section and shall be designed to serve as a model for
20 improving the effectiveness of water fluoridation sys-
21 tems of small rural communities.

22 (c) EVALUATION.—In conducting the ongoing evalua-
23 tion as provided for in subsection (b)(4), the Secretary
24 shall ensure that such evaluation includes—

1 (1) the measurement of changes in water fluoridation compliance levels resulting from assistance
2 provided under this section;
3

4 (2) the identification of the administrative, technical and operational challenges that are unique
5 to the fluoridation of small water systems;
6

7 (3) the development of a practical model that may be easily utilized by other tribal, State, county
8 or local governments in improving the quality of water fluoridation with emphasis on small water systems;
9 and
10

11 (4) the measurement of any increased percentage of Southwestern border residents who receive
12 the benefits of optimally fluoridated water.
13

14 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
15 authorized to be appropriated to carry out this section,
16 such sums as may be necessary.
17

18 **SEC. 23. COMMUNITY-BASED DENTAL SEALANT PROGRAM.**

19 (a) IN GENERAL.—The Secretary, acting through the
20 Director of the Maternal and Child Health Bureau of the
21 Health Resources and Services Administration, may
22 award grants to eligible entities determined by the Secretary to provide for the development of innovative programs
23 utilizing mobile van units to carry out dental seal-
24

1 ant activities to improve the access of children to sealants
2 as well as for prevention and primary care.

3 (b) USE OF FUNDS.—An entity shall use amounts re-
4 ceived under a grant under subsection (a) to provide funds
5 to eligible community-based entities to make available a
6 mobile van unit to provide children in second or sixth
7 grade with access to dental care and dental sealant serv-
8 ices. Such services may be provided by dental hygienists
9 so long as a formalized plan for the referral of a child
10 for treatment of dental problems is established.

11 (c) ELIGIBILITY.—To be eligible to receive funds
12 under this section an entity shall—

13 (1) prepare and submit to the Secretary an ap-
14 plication at such time, in such manner and con-
15 taining such information as the Secretary may re-
16 quire; and

17 (2) be a community-based entity that is deter-
18 mined by the Secretary to provide an appropriate
19 entry point for children into the dental care system
20 and be located within 100 kilometers of the United
21 States Mexico Border.

22 (d) COORDINATION WITH OTHER PROGRAMS.—An
23 entity that receives funds from a State under this section
24 shall serve as an enrollment site for purposes of enabling
25 individuals to enroll in the State plan under title XIX of

1 the Social Security Act (42 U.S.C. 1396 et seq.) or in
2 the State Children’s Health Insurance Program under
3 title XXI of such Act (42 U.S.C. 1397aa et seq.).

4 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
5 authorized to be appropriated to carry out this section,
6 such sums as may be necessary.

7 **SEC. 24. UNITED STATES HISPANIC NUTRITION EDUCATION**
8 **AND RESEARCH CENTER.**

9 (a) ESTABLISHMENT.—The Secretary shall establish
10 a United States Hispanic Nutrition Education and Re-
11 search Center (referred to in this section as the “Center”)
12 at a regional academic health center.

13 (b) PURPOSE.—The general purpose of the Center
14 shall be to undertake nutrition research and nutrition edu-
15 cation activities that sustain and promote the health of
16 United States Hispanics, particularly those United States
17 Hispanics in the United States-Mexico Border Area. The
18 Center shall serve as a national clearinghouse for research,
19 and for data collection and information dissemination on
20 nutrition in the United States Hispanic population. In ad-
21 dition, the Center shall serve as an educational resource
22 on United States Hispanic nutrition for students, univer-
23 sities, and academic and research institutions throughout
24 the United States.

1 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
2 authorized to be appropriated to carry out this section,
3 such sums as may be necessary.

○