

115TH CONGRESS
1ST SESSION

H. R. 3059

To provide funding for Federally Qualified Health Centers, the National Health Service Corps, Teaching Health Centers, and the Nurse Practitioner Residency Training program.

IN THE HOUSE OF REPRESENTATIVES

JUNE 26, 2017

Mr. CLYBURN (for himself, Mrs. WATSON COLEMAN, Mr. THOMPSON of Mississippi, Mr. HASTINGS, Mr. GRIJALVA, Mr. EVANS, Ms. LEE, Mr. SERRANO, Ms. VELÁZQUEZ, Ms. SCHAKOWSKY, Ms. HANABUSA, Mr. BISHOP of Georgia, Ms. MOORE, Mr. CLAY, Ms. NORTON, Ms. CLARKE of New York, Mr. CUMMINGS, Ms. WILSON of Florida, Mr. KHANNA, Mr. SABLAN, Mr. RICHMOND, Ms. KELLY of Illinois, and Ms. ADAMS) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To provide funding for Federally Qualified Health Centers, the National Health Service Corps, Teaching Health Centers, and the Nurse Practitioner Residency Training program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Community Health
3 Center and Primary Care Workforce Expansion Act of
4 2017”.

5 **SEC. 2. COMMUNITY HEALTH CENTER PROGRAM.**

6 (a) IN GENERAL.—Section 10503(b)(1) of the Pa-
7 tient Protection and Affordable Care Act (42 U.S.C.
8 254b–2(b)(1)) is amended—

9 (1) in subparagraph (D), by striking “and” at
10 the end;

11 (2) in subparagraph (E), by striking “and” at
12 the end; and

13 (3) by adding at the end the following:

14 “(F) \$5,110,000,000 for fiscal year 2018;

15 “(G) \$5,410,000,000 for fiscal year 2019;

16 “(H) \$5,790,000,000 for fiscal year 2020;

17 “(I) \$6,620,000,000 for fiscal year 2021;

18 “(J) \$7,510,000,000 for fiscal year 2022;

19 “(K) \$8,460,000,000 for fiscal year 2023;

20 “(L) \$9,490,000,000 for fiscal year 2024;

21 “(M) \$10,590,000,000 for fiscal year
22 2025;

23 “(N) \$11,780,000,000 for fiscal year
24 2026;

25 “(O) \$12,500,000,000 for fiscal year 2027;

26 and

1 “(P) for fiscal year 2028, and each subse-
2 quent fiscal year, the amount appropriated for
3 the preceding fiscal year adjusted by the prod-
4 uct of—

5 “(i) one plus the average percentage
6 increase in costs incurred per patient
7 served; and

8 “(ii) one plus the average percentage
9 increase in the total number of patients
10 served; and”.

11 (b) CAPITAL PROJECTS.—In addition to amounts
12 otherwise appropriated under section 10503(b) of the Pa-
13 tient Protection and Affordable Care Act (42 U.S.C.
14 254b–2(b)), there is authorized to be appropriated, and
15 there is appropriated, for the community health centers
16 program under section 330 of the Public Health Service
17 Act (42 U.S.C. 254b) for capital projects,
18 \$18,600,000,000 for fiscal year 2017.

19 (c) LIMITATION.—Amounts otherwise appropriated
20 for community health centers may not be reduced as a
21 result of the appropriations made under this section.

22 (d) AVAILABILITY OF FUNDS.—Amounts appro-
23 priated under this section shall remain available until ex-
24 pended.

1 **SEC. 3. NATIONAL HEALTH SERVICE CORPS.**

2 (a) IN GENERAL.—Section 10503(b)(2) of the Pa-
3 tient Protection and Affordable Care Act (42 U.S.C.
4 254b–2(b)(2)) is amended—

5 (1) in subparagraph (D), by striking “and” at
6 the end;

7 (2) in subparagraph (E), by striking the period;
8 and

9 (3) by adding at the end the following:

10 “(F) \$850,000,000 for fiscal year 2018;

11 “(G) \$893,000,000 for fiscal year 2019;

12 “(H) \$938,000,000 for fiscal year 2020;

13 “(I) \$985,000,000 for fiscal year 2021;

14 “(J) \$1,030,000,000 for fiscal year 2022;

15 “(K) \$1,090,000,000 for fiscal year 2023;

16 “(L) \$1,100,000,000 for fiscal year 2024;

17 “(M) \$1,200,000,000 for fiscal year 2025;

18 “(N) \$1,300,000,000 for fiscal year 2026;

19 “(O) \$1,500,000,000 for fiscal year 2027;

20 and

21 “(P) for fiscal year 2028, and each subse-
22 quent fiscal year, the amount appropriated for
23 the preceding fiscal year adjusted by the prod-
24 uct of—

1 “(i) one plus the average percentage
2 increase in the costs of health professions
3 education during the prior fiscal year; and
4 “(ii) one plus the average percentage
5 change in the number of individuals resid-
6 ing in health professions shortage areas
7 designated under section 333 of the Public
8 Health Service Act during the prior fiscal
9 year, relative to the number of individuals
10 residing in such areas during the previous
11 fiscal year.”.

12 (b) LIMITATION.—Amounts otherwise appropriated
13 for National Health Service Corps may not be reduced as
14 a result of the appropriations made under this section.

15 (c) AVAILABILITY OF FUNDS.—Amounts appro-
16 priated under this section shall remain available until ex-
17 pended.

18 **SEC. 4. TEACHING HEALTH CENTERS.**

19 (a) IN GENERAL.—Section 340H(g) of the Public
20 Health Service Act (42 U.S.C. 256h(g)) is amended—

21 (1) by striking “2015 and” and inserting
22 “2015,”; and

23 (2) by striking the period and inserting “,
24 \$176,000,000 for fiscal years 2018 and 2019,
25 \$184,000,000 for fiscal year 2020, \$194,000,000 for

1 fiscal year 2021, \$203,000,000 for fiscal year 2022,
 2 \$214,000,000 for fiscal year 2023, \$224,000,000 for
 3 fiscal year 2024, \$235,000,000 for fiscal year 2025,
 4 \$247,000,000 for fiscal year 2026, \$260,000,000 for
 5 fiscal year 2027, and for fiscal year 2028, and each
 6 subsequent fiscal year, the amount appropriated for
 7 the preceding fiscal year adjusted by the greater of
 8 the annual percentage increase in the medical care
 9 component of the consumer price index for all urban
 10 consumers (U.S. city average) as rounded up in an
 11 appropriate manner, or the percentage increase for
 12 the fiscal year involved under section 2(a)(11).”.

13 (b) LIMITATION.—Amounts otherwise appropriated
 14 for Teaching Health Centers may not be reduced as a re-
 15 sult of the appropriations made under this section.

16 (c) AVAILABILITY OF FUNDS.—Amounts appro-
 17 priated under this section shall remain available until ex-
 18 pended.

19 **SEC. 5. NURSE PRACTITIONER RESIDENCY TRAINING PRO-**
 20 **GRAMS.**

21 (a) IN GENERAL.—Section 5316 of the Patient Pro-
 22 tection and Affordable Care Act is amended by striking
 23 subsection (i) and inserting the following:

24 “(i) APPROPRIATIONS.—In addition to amounts oth-
 25 erwise appropriated, there is authorized to be appro-

1 priated, and there is appropriated to carry out this sec-
 2 tion—

3 “(1) \$35,000,000 for fiscal year 2018;

4 “(2) \$40,000,000 for fiscal year 2019;

5 “(3) \$45,000,000 for fiscal year 2020;

6 “(4) \$50,000,000 for fiscal year 2021;

7 “(5) \$55,000,000 for fiscal year 2022;

8 “(6) \$60,000,000 for fiscal year 2023;

9 “(7) \$65,000,000 for fiscal year 2024;

10 “(8) \$70,000,000 for fiscal year 2025;

11 “(9) \$75,000,000 for fiscal year 2026;

12 “(10) \$80,000,000 for fiscal year 2027; and

13 “(11) for fiscal year 2028, and each subsequent
 14 fiscal year, the amount appropriated for the pre-
 15 ceding fiscal year adjusted by the greater of the an-
 16 nual percentage increase in the medical care compo-
 17 nent of the consumer price index for all urban con-
 18 sumers (U.S. city average) as rounded up in an ap-
 19 propriate manner, or the percentage increase for the
 20 fiscal year involved under section 10503(b)(1)(P) of
 21 the Patient Protection and Affordable Care Act.”.

22 (b) LIMITATION.—Amounts otherwise appropriated
 23 for Nurse Practitioner Residency Training Programs may
 24 not be reduced as a result of the appropriations made
 25 under this section.

1 (c) AVAILABILITY OF FUNDS.—Amounts appro-
2 priated under this section shall remain available until ex-
3 pended.

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