

117TH CONGRESS
1ST SESSION

S. 610

To address behavioral health and well-being among health care professionals.

IN THE SENATE OF THE UNITED STATES

MARCH 4, 2021

Mr. KAINE (for himself, Mr. YOUNG, Mr. REED, Mr. CASSIDY, Mr. KING, Mrs. CAPITO, Ms. BALDWIN, Ms. COLLINS, Mr. WARNER, Ms. SMITH, Ms. ROSEN, Mrs. GILLIBRAND, Ms. SINEMA, Ms. STABENOW, Mr. TESTER, Mr. VAN HOLLEN, Mr. KELLY, and Mr. PETERS) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To address behavioral health and well-being among health care professionals.

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 “Dr. Lorna Breen
5 Health Care Provider Protection Act”.

1 **SEC. 2. BEHAVIORAL HEALTH AND WELL-BEING TRAINING**
2 **FOR HEALTH CARE PROFESSIONALS.**

3 Subpart 1 of part E of title VII of the Public Health
4 Service Act (42 U.S.C. 294n et seq.) is amended by adding
5 at the end the following:

6 **“SEC. 764. BEHAVIORAL HEALTH AND WELL-BEING TRAIN-**
7 **ING FOR HEALTH CARE PROFESSIONALS.**

8 “(a) GRANT PROGRAM.—The Secretary shall estab-
9 lish a program to award grants to health professions
10 schools, academic health centers, State or local govern-
11 ments, or other appropriate public or private nonprofit en-
12 tities for funding and participation in health professions
13 and nursing training activities for the training of health
14 care students, residents, or professionals in evidence-in-
15 formed strategies to reduce and prevent suicide, burnout,
16 behavioral health conditions, including mental health con-
17 ditions and substance use disorders, among health care
18 professionals, and in evidence-informed strategies to im-
19 prove health care professionals’ well-being and job satis-
20 faction.

21 “(b) ELIGIBILITY.—To be eligible for a grant under
22 subsection (a), an entity described in such subsection shall
23 submit to the Secretary an application at such time, in
24 such manner, and containing such information as the Sec-
25 retary may require.

1 “(c) REPORTING REQUIREMENT.—Each entity
 2 awarded a grant under this section shall periodically sub-
 3 mit to the Secretary a report evaluating the activities sup-
 4 ported by the grant.

5 “(d) BEST PRACTICES.—The Secretary may identify
 6 and disseminate evidence-informed best practices for re-
 7 ducing and preventing suicide and burnout among health
 8 care professionals, and training health care professionals
 9 in appropriate strategies and promoting their mental and
 10 behavioral health and job satisfaction. Such best practices
 11 shall include specific recommendations for reducing and
 12 preventing suicide, burnout, and other mental and behav-
 13 ioral health concerns among health care professionals dur-
 14 ing or in the aftermath of a pandemic, natural disaster,
 15 or other crisis.

16 “(e) AUTHORIZATION OF APPROPRIATIONS.—To
 17 carry out this section, there are authorized to be appro-
 18 priated such sums as may be necessary for each of fiscal
 19 years 2022 through 2026.”.

20 **SEC. 3. EDUCATION AND AWARENESS CAMPAIGN ENCOUR-**
 21 **AGING USE OF MENTAL AND BEHAVIORAL**
 22 **HEALTH SERVICES BY HEALTH CARE PRO-**
 23 **FESSIONALS.**

24 (a) IN GENERAL.—The Secretary of Health and
 25 Human Services (referred to in this section as the “Sec-

1 retary”), acting through the Director of the Centers for
2 Disease Control and Prevention, and in consultation with
3 the medical professional community, shall establish a na-
4 tional evidence-based education and awareness campaign
5 targeting health care professionals to encourage such pro-
6 fessionals to seek support and treatment for their own
7 mental and behavioral health concerns, help such profes-
8 sionals identify risk factors in themselves and others and
9 learn how best to respond to such risks, with the goal of
10 reducing or preventing suicide, burnout, and mental and
11 behavioral health conditions, and to address stigma associ-
12 ated with seeking mental and behavioral health support
13 and treatment.

14 (b) REPORTING.—Not later than 2 years after the
15 date of enactment of this Act, the Secretary shall provide
16 an update on the campaign’s progress, including a plan
17 for evaluation that includes quantitative and qualitative
18 metrics, and a media and dissemination plan, to the Com-
19 mittee on Health, Education, Labor, and Pensions of the
20 Senate and the Committee on Energy and Commerce of
21 the House of Representatives.

22 (c) AUTHORIZATION OF APPROPRIATIONS.—There
23 are authorized to be appropriated to carry out this section
24 \$10,000,000 for each of fiscal years 2022 through 2026.

1 **SEC. 4. GRANTS FOR HEALTH CARE PROVIDERS TO PRO-**
2 **MOTE MENTAL AND BEHAVIORAL HEALTH**
3 **AMONG THEIR HEALTH PROFESSIONAL**
4 **WORKFORCE.**

5 Subpart 1 of part E of title VII of the Public Health
6 Service Act (42 U.S.C. 294n et seq.), as amended by sec-
7 tion 2, is further amended by adding at the end the fol-
8 lowing:

9 **“SEC. 764A. GRANTS FOR HEALTH CARE PROVIDERS TO**
10 **PROMOTE MENTAL AND BEHAVIORAL**
11 **HEALTH AMONG THEIR HEALTH PROFES-**
12 **SIONAL WORKFORCE.**

13 “(a) IN GENERAL.—The Secretary shall award
14 grants to health care providers, including medical profes-
15 sional associations, to establish or expand evidence-in-
16 formed programs dedicated to promoting mental and be-
17 havioral health among their employees (including contrac-
18 tors) or members who are working on the front lines of
19 the SARS-CoV-2 pandemic.

20 “(b) USE OF GRANT FUNDS.—A health care provider
21 awarded a grant under subsection (a) shall use amounts
22 under the grant to implement a new program or protocol
23 or expand an existing program or protocol to promote
24 mental and behavioral health among employees (including
25 contractors) or members who have previously treated or
26 otherwise served, or are currently treating or otherwise

1 serving, patients diagnosed with COVID–19, which may
2 include any of the following:

3 “(1) Educating employees, including contrac-
4 tors, or membership about risk factors for and signs
5 of self-harm and suicide and mental and behavioral
6 health conditions in accordance with evidence-based
7 practices and standards.

8 “(2) Establishing new or enhancing existing
9 evidence-based programs or protocols for preventing
10 mental and behavioral health conditions, suicide, or
11 self-harm.

12 “(3) Establishing new or enhancing existing
13 peer-support programs among employees (including
14 contractors) or members.

15 “(4) Mental and behavioral health treatment,
16 follow up services and care, or referral for such serv-
17 ices identified as appropriate as a result of the
18 screenings or prevention programs and protocol de-
19 scribed in paragraphs (1) and (2).

20 “(c) GRANT TERMS.—A grant awarded under sub-
21 section (a)—

22 “(1) shall be for a period of 3 years; and

23 “(2) may be renewed subject to the require-
24 ments of this section.

1 “(d) APPLICATION SUBMISSION.—A health care pro-
 2 vider seeking a grant under subsection (a) shall submit
 3 an application to the Secretary at such time, in such man-
 4 ner, and accompanied by such information as the Sec-
 5 retary may require.

6 “(e) PRIORITY.—Priority shall be given to applica-
 7 tions from health care providers located in current or
 8 former COVID–19 hotspots, as determined by the Sec-
 9 retary or health care providers which have diagnosed or
 10 treated a higher share of COVID–19 patients, as deter-
 11 mined by the Secretary.

12 “(f) REPORTING.—A health care provider awarded a
 13 grant under subsection (a) shall periodically submit to the
 14 Secretary a report evaluating the activities supported by
 15 the grant.

16 “(g) AUTHORIZATION OF APPROPRIATIONS.—To
 17 carry out this section, there is authorized to be appro-
 18 priated \$50,000,000 for the period of fiscal years 2022
 19 through 2024.”.

20 **SEC. 5. COMPREHENSIVE STUDY ON HEALTH CARE PRO-**
 21 **FESSIONAL MENTAL AND BEHAVIORAL**
 22 **HEALTH AND BURNOUT.**

23 Subpart 1 of part E of title VII of the Public Health
 24 Service Act (42 U.S.C. 294n et seq.), as amended by sec-

tion 4, is further amended by adding at the end the following:

**“SEC. 764B. COMPREHENSIVE STUDY ON HEALTH CARE
PROFESSIONAL MENTAL AND BEHAVIORAL
HEALTH AND BURNOUT.**

“(a) IN GENERAL.—The Secretary, in consultation with stakeholders, shall conduct a review and submit recommendations to Congress on policies to improve health care professional mental health and prevent burnout.

“(b) CONSIDERATIONS.—The study under subsection (a) shall focus on identifying—

“(1) the factors that contribute to mental and behavioral health conditions and burnout among health care professionals;

“(2) the barriers to seeking and accessing mental and behavioral health treatment for health care professionals, including stigma and concerns about licensing and credentialing;

“(3) the implications of poor mental and behavioral health and burnout among health care professionals for the health care system, the health care workforce, and patient outcomes;

“(4) the impact of the SARS-CoV-2 pandemic on the mental and behavioral health of health care

1 professionals and related preparedness strategies for
2 future health emergencies;

3 “(5) the factors that promote mental and be-
4 havioral health and resiliency among health care
5 professionals, including programs or protocols that
6 strengthen mental and behavioral health or prevent
7 burnout among health care professionals; and

8 “(6) the efficacy of health professional training
9 programs that promote resiliency and improve men-
10 tal health.

11 “(c) RECOMMENDATIONS.—The study required under
12 subsection (a) shall include recommendations related to—

13 “(1) improving mental and behavioral health
14 and preventing burnout among health care profes-
15 sionals;

16 “(2) removing barriers to mental and behavioral
17 health care for health care professionals; and

18 “(3) strategies to promote resiliency among
19 health care professionals and other employees and
20 contractors in health care settings.

21 “(d) COMPLETION.—The Secretary shall ensure that
22 the study under subsection (a) is completed and submitted
23 to Congress and made publicly available not later than 3
24 years after the date of enactment of this section.

1 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
2 are authorized to be appropriated to carry out this section
3 \$3,000,000 for the period of fiscal years 2022 through
4 2024.”.

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