

117TH CONGRESS H.R. 7617

To provide for a national public health education campaign, grant program, and task force for recommended preventive health care services during the COVID-19 pandemic and future pandemics, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 28, 2022

Ms. Blunt Rochester (for herself, Mr. Fitzpatrick, and Ms. Wasserman Schultz) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To provide for a national public health education campaign, grant program, and task force for recommended preventive health care services during the COVID-19 pandemic and future pandemics, 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 "Preventive Care
- 5 Awareness Act of 2022".

SEC. 2. PUBLIC HEALTH CAMPAIGN REGARDING PREVENT-

2 ATIVE HEALTH. 3 The Secretary of Health and Human Services (referred to in this Act as the "Secretary", in consultation 4 5 with the Director of the Centers for Disease Control and Prevention, the Surgeon General of the Public Health 7 Service, and the Administrator of the Centers for Medi-8 care & Medicaid Services, shall carry out a coordinated, 9 focused national public health education effort to enhance access by individuals and providers to evidence-based and 10 11 evidence-informed health information about preventive health care, with particular consideration for decreasing disparities in utilization of recommended preventive health 13 care services by individuals in rural and underserved communities who have delayed or forgone receiving rec-15 ommended clinical preventive health care services during 17 the COVID-19 pandemic. 18 SEC. 3. COVID-19 PREVENTIVE HEALTH CARE GRANT PRO-19 GRAM. 20 (a) Use of Allotments.—Section 1904 of the Public Health Service Act (42 U.S.C. 300w-3) is amended— 22 (1) in subsection (a)(1)— 23 (A) by redesignating subparagraphs (E) 24 through (G) as subparagraphs (F) through (H), 25 respectively;

1 (B) in subparagraph (G), as redesignated, 2 by striking "(A) through (E)" and inserting 3 "(A) through (F)": 4 (C) in subparagraph (H), as redesignated, by striking "(A) through (F)" and inserting 5 "(A) through (G)"; and 6 7 (D) by inserting after subparagraph (D) 8 the following: 9 "(E) Activities to increase patient uptake of 10 recommended clinical preventive health care services 11 during the COVID-19 pandemic, with particular consideration for decreasing disparities in utilization 12 13 of such preventive health care services by reaching 14 individuals in geographically diverse rural and un-15 derserved communities who have delayed or forgone receiving recommended clinical preventive health 16 17 care services during the COVID-19 pandemic."; and 18 (2) in subsection (b), in the matter following 19 paragraph (5), by striking "subsection (a)(1)(E)" and inserting "subsection (a)(1)(F)". 20 21 (b) ALLOTTED AMOUNT.—Subsection (a) of section 22 1904 of the Public Health Service Act (42 U.S.C. 300w-23 3) is amended by adding at the end the following: "(4) Of the total amount paid to the States under 24 section 1903 for each of fiscal years 2023 and 2024, the

- 1 Secretary shall ensure that the States, in the aggregate,
- 2 use at least \$50,000,000 for activities under paragraph
- 3 (1)(E).".
- 4 (c) Authorization of Appropriations.—Section
- 5 1920(a) of the Public Health Service Act (42 U.S.C.
- 6 300x-9(a)) is amended by adding at the end the following:
- 7 "In addition to the amounts authorized to be appropriated
- 8 by the preceding sentence, for the purpose of carrying out
- 9 paragraphs (1)(E) and (4) of section 1904, there is au-
- 10 thorized to be appropriated \$50,000,000 for each of fiscal
- 11 years 2023 and 2024.".
- 12 SEC. 4. TASK FORCE ON PREVENTIVE HEALTH CARE DUR-
- 13 ING PUBLIC HEALTH EMERGENCIES.
- 14 (a) Task Force on Preventive Health Care in
- 15 Response to the COVID-19 Public Health Emer-
- 16 GENCY.—
- 17 (1) Establishment.—The Secretary shall con-
- vene a task force to develop Federal recommenda-
- 19 tions regarding preventive health care during the
- 20 COVID-19 pandemic and future pandemics.
- 21 (2) Duties.—The task force established under
- paragraph (1) shall develop and publicly post, in a
- 23 manner than is accessible for those with disabilities
- or limited English proficiency, Federal recommenda-
- 25 tions to promote preventive health care visits and

1	improve health outcomes during and after the
2	COVID-19 pandemic and during future pandemics,
3	with particular consideration for outcomes of rural
4	or underserved communities. Such recommendations
5	shall—
6	(A) address, with particular attention to
7	ensuring equitable services, reducing disparities
8	in health outcomes, and promoting culturally
9	and linguistically appropriate care—
10	(i) measures to facilitate preventive
11	health care;
12	(ii) strategies to increase access to
13	care for individuals at high risk or with
14	elevated risk factors;
15	(iii) how to identify, prevent, and
16	treat mental health and substance use dis-
17	orders which may have arisen or increased
18	during the COVID-19 pandemic;
19	(iv) strategies to address provision of
20	preventive health care services, maintain
21	the delivery of common health services and
22	preventive health care services, and in-
23	crease the ability to accommodate patient
24	care preferences while maintaining safety
25	and quality; and

1	(v) such other matters as the task
2	force determines appropriate;
3	(B) identify barriers to the implementation
4	of the recommendations;
5	(C) take into consideration existing State
6	programs and other programs that have dem-
7	onstrated effectiveness in promoting preventive
8	health care during the COVID-19 pandemic,
9	for purposes of future public health emer-
10	gencies; and
11	(D) identify—
12	(i) policies specific to COVID-19 that,
13	as the public health emergency declared
14	with respect to COVID-19 under section
15	319 of the Public Health Service Act (42
16	U.S.C. 247d) abates, can be safely discon-
17	tinued when appropriate or necessary; and
18	(ii) policies implemented during such
19	public health emergency that should be
20	continued.
21	(3) Membership.—The task force established
22	under paragraph (1) shall be comprised of the fol-
23	lowing:
24	(A) One representative of each of the fol-
25	lowing:

1	(i) The Director of the Centers for
2	Disease Control and Prevention.
3	(ii) The Administrator of the Health
4	Resources and Services Administration.
5	(iii) The Assistant Secretary for Men-
6	tal Health and Substance Use.
7	(iv) The Administrator of the Centers
8	for Medicare & Medicaid Services.
9	(v) The Director of the Agency for
10	Healthcare Research and Quality.
11	(vi) The Director of the Indian Health
12	Service.
13	(vii) The Deputy Assistant Secretary
14	for Minority Health.
15	(viii) The Director of the Office on
16	Women's Health.
17	(ix) The Assistant Secretary for Pre-
18	paredness and Response.
19	(B) Such other members as the Secretary
20	determines appropriate.

 \bigcirc