

116TH CONGRESS
2D SESSION

S. 4410

To amend the Public Health Service Act to provide for racial and ethnic approaches to community health.

IN THE SENATE OF THE UNITED STATES

AUGUST 4, 2020

Mr. SCOTT of South Carolina (for himself and Mr. CARDIN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Public Health Service Act to provide for racial and ethnic approaches to community health.

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 “REACH Act”.

5 **SEC. 2. RACIAL AND ETHNIC APPROACHES TO COMMUNITY**
6 **HEALTH.**

7 Title XVII of the Public Health Service Act (42
8 U.S.C. 300u et seq.) is amended by adding at the end
9 the following:

1 **“SEC. 1712. RACIAL AND ETHNIC APPROACHES TO COMMU-**
2 **NITY HEALTH.**

3 “(a) IN GENERAL.—The Secretary, in consultation
4 with the Deputy Assistant Secretary for Minority Health,
5 shall award grants, contracts, or cooperative agreements
6 to eligible entities for the conduct of evidence-based and
7 evidence-informed projects to improve health, prevent and
8 manage chronic health conditions, and reduce health dis-
9 parities among racial and ethnic minority populations.

10 “(b) ELIGIBLE ENTITIES.—To be eligible to receive
11 an award under this section, an entity shall—

12 “(1) submit to the Secretary an application at
13 such time, in such manner, and containing such in-
14 formation as the Secretary shall require;

15 “(2) demonstrate a history of successfully work-
16 ing with an established community-based coalition to
17 address health disparities among racial and ethnic
18 minority populations;

19 “(3) conduct or identify a community health
20 needs assessment to inform locally tailored activities
21 conducted under subsection (a); and

22 “(4) demonstrate the capacity to effectively and
23 immediately implement evidence-based and evidence-
24 informed strategies to address health disparities
25 among racial and ethnic minority populations.

1 “(c) USE OF FUNDS.—An entity shall use funds re-
2 ceived under subsection (a), in coordination with State,
3 local, and Tribal health departments, community-based or-
4 ganizations, and other entities with experience addressing
5 racial and ethnic health disparities, to—

6 “(1) increase the workforce of health care and
7 public health professionals from underrepresented
8 populations;

9 “(2) support the implementation, evaluation,
10 and dissemination of locally tailored strategies to
11 prevent and manage chronic health conditions, in-
12 cluding by reducing tobacco use, improving nutrition
13 and physical activity, and addressing social and
14 other determinants of health; and

15 “(3) enhance capacity, as appropriate, to pre-
16 vent and respond to infectious disease outbreaks
17 through outreach, education, and other relevant ac-
18 tivities.

19 “(d) REPORT.—Not later than September 30, 2024,
20 and every five years thereafter, the Secretary shall submit
21 to the Committee on Health, Education, Labor, and Pen-
22 sions of the Senate, and the Committee on Energy and
23 Commerce of the House of Representatives, a report that
24 includes information on activities funded under this sec-
25 tion. Such report shall include a description of—

1 “(1) efforts to increase the workforce of health
2 care and public health professionals from underrep-
3 resented populations;

4 “(2) the prevalence of chronic health conditions
5 among populations served under this section, includ-
6 ing a description of reductions in chronic health con-
7 ditions among such populations; and

8 “(3) activities conducted to enhance capacity to
9 prevent and respond to infectious disease outbreaks
10 among racial and ethnic minority populations.

11 “(e) AUTHORIZATION OF APPROPRIATIONS.—To
12 carry out this section, there are authorized to be appro-
13 priated \$70,000,000 for each of fiscal years 2021 through
14 2025.”.

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