

103<sup>D</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. RES. 493

Expressing the sense of the House of Representatives with respect to health care reform and essential community providers.

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## IN THE HOUSE OF REPRESENTATIVES

JULY 27, 1994

Mr. MENENDEZ (for himself, Ms. VELÁZQUEZ, Mr. SERRANO, Mr. DE LUGO, Mr. PASTOR, Mr. DIAZ-BALART, Mr. PAYNE of New Jersey, Ms. ROS-LEHTINEN, Mr. BECERRA, Mr. GUTIERREZ, Mr. DE LA GARZA, Mr. TEJEDA, Mr. RICHARDSON, Mr. McDERMOTT, Mr. WASHINGTON, Mr. ROMERO-BARCELÓ, Mr. OWENS, Mr. CLYBURN, Mr. FILNER, Mr. SCOTT, Mr. FOGLIETTA, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. OLVER, Mr. LEHMAN, Mrs. MINK, Mr. FROST, and Mr. KLEIN) submitted the following resolution; which was referred jointly to the Committees on Energy and Commerce and Ways and Means

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## RESOLUTION

Expressing the sense of the House of Representatives with respect to health care reform and essential community providers.

1       *Resolved*, That it is the sense of the House of Rep-  
2 representatives that—

3           (1) one of the principal purposes of health care  
4 reform should be to ensure that medically under-  
5 served populations are provided with adequate access  
6 to health services, and that such services are pro-

1 vided to the populations in the language and cultural  
2 context that is most appropriate for the particular  
3 populations to which the services are provided;

4 (2) such purpose can be effectively carried out  
5 through—

6 (A) physicians, other health professionals,  
7 or health care institutions that provide health  
8 services in health professional shortage areas or  
9 to medically underserved populations;

10 (B) entities that provide health services  
11 under grants under sections 329 or 330 of the  
12 Public Health Service Act (relating to migrant  
13 health centers and community health centers),  
14 or through Native Hawaiian Health Centers;

15 (C) entities that provide health services  
16 under grants under section 340 or 340A of  
17 such Act (relating to health services for home-  
18 less individuals and residents of public hous-  
19 ing);

20 (D) entities that provide health services  
21 under grants under section 1001 or title XXVI  
22 of such Act (relating to family planning services  
23 and services regarding the human  
24 immunodeficiency virus);

1 (E) entities that provide health services  
2 under title V of the Social Security Act (relat-  
3 ing to maternal and child health);

4 (F) entities that provide health services  
5 through rural health clinics or federally quali-  
6 fied health centers;

7 (G) entities that provide health services in  
8 urban areas through programs under title V of  
9 the Indian Health Care Improvement Act, and  
10 entities providing outpatient health services  
11 through programs under the Indian Self-Deter-  
12 mination Act;

13 (H) State or local public health agencies;  
14 and

15 (I) clinics that provide health services to  
16 needy populations without charge or for dis-  
17 counted charges according to the ability to pay  
18 for services; and

19 (3) any system of health care reform that is im-  
20 plemented should recognize that the health care pro-  
21 viders and entities specified in paragraph (2) are es-  
22 sential providers, and accordingly legislation provid-  
23 ing for health care reform should require that—

24 (A) each health plan enter into provider  
25 agreements with any such essential providers

1           that are operating in the service area of the  
2           plan; and

3                 (B) the essential providers provide health  
4           services in the language and cultural context  
5           that is most appropriate for the populations to  
6           which the services are provided.

