

119TH CONGRESS  
2D SESSION

# H. R. 10349

To amend the Public Health Service Act to direct the Secretary of Health and Human Services to establish a Public Safety Mental Health Fellowship Program, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 10, 2026

Mr. TRAN (for himself, Mr. RUTHERFORD, Mr. DAVIS of North Carolina, and Mr. LAWLER) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend the Public Health Service Act to direct the Secretary of Health and Human Services to establish a Public Safety Mental Health Fellowship Program, 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 “Emergency Responders  
5       Mental Health Training Act” or the “EMT Act”.

1 **SEC. 2. PUBLIC SAFETY MENTAL HEALTH FELLOWSHIPS.**

2 (a) ESTABLISHMENT OF PROGRAM.—Part D of title  
3 V of the Public Health Service Act (42 U.S.C. 290dd) is  
4 amended by adding at the end the following:

5 **“SEC. 554. PUBLIC SAFETY MENTAL HEALTH FELLOWSHIPS.**

6 “(a) ESTABLISHMENT OF PROGRAM.—The Secretary  
7 shall establish a pilot program, to be known as the Public  
8 Safety Mental Health Fellowship Program (in this section  
9 referred to as the ‘program’), under which the Secretary  
10 shall award fellowships, which may include stipends, for  
11 the purposes of—

12 “(1) increasing the knowledge of mental health  
13 and substance use disorders treatment practitioners  
14 on issues related to prevention, treatment, and re-  
15 covery support for individuals who are emergency re-  
16 sponse providers and who have a mental health or  
17 substance use disorder;

18 “(2) improving the quality of mental health and  
19 substance use disorders prevention and treatment  
20 services delivered to emergency response providers;  
21 and

22 “(3) increasing the number of culturally com-  
23 petent mental health and substance use disorders  
24 treatment professionals who teach, administer serv-  
25 ices, conduct research, and provide direct mental

1 health or substance use disorders services to emer-  
2 gency response providers.

3 “(b) TRAINING COVERED.—The fellowships awarded  
4 under subsection (a) shall be for postbaccalaureate train-  
5 ing (including for master’s and doctoral degrees) for men-  
6 tal health and substance use disorders treatment profes-  
7 sionals, including in the fields of psychiatry, nursing, so-  
8 cial work, psychology, marriage and family therapy, men-  
9 tal health counseling, and substance use disorder and ad-  
10 diction counseling.

11 “(c) DEFINITION.—In this section:

12 “(1) CULTURALLY COMPETENT MENTAL  
13 HEALTH AND SUBSTANCE USE DISORDERS TREAT-  
14 MENT PROFESSIONAL.—The term ‘culturally com-  
15 petent mental health and substance use disorders  
16 treatment professional’ means an individual—

17 “(A) with familiarity with, and under-  
18 standing of, the duties and unique stressors of  
19 emergency response providers, which may in-  
20 clude experience working as a emergency re-  
21 sponse provider;

22 “(B) who has completed a trauma-in-  
23 formed and culturally competent training cur-  
24 riculum, as the Secretary determines appro-  
25 priate; and

1           “(C) who has distinct knowledge of, and is  
2           trained on the unique aspects of, confidentiality  
3           and testimonial privilege.

4           “(2) EMERGENCY RESPONSE PROVIDER.—The  
5           term ‘emergency response provider’ includes the per-  
6           sonnel of Federal, State, and local governmental and  
7           nongovernmental entities who provide emergency  
8           public safety, fire, law enforcement, emergency re-  
9           sponse, or emergency medical (including hospital  
10          emergency) services, and related personnel.

11          “(d) AUTHORIZATION OF APPROPRIATIONS.—To  
12          carry out this section, there is authorized to be appro-  
13          priated \$10,000,000 for each of fiscal years 2028 through  
14          2033.”.

15          (b) DEADLINE.—Not later than 1 year after the date  
16          of enactment of this Act, the Secretary of Health and  
17          Human Services shall establish the Public Safety Mental  
18          Health Fellowship Program under section 554(a) of the  
19          Public Health Service Act (as added by subsection (a) of  
20          this section) (in this section referred to as the “pro-  
21          gram”).

22          (c) REPORTS TO CONGRESS.—

23                  (1) IN GENERAL.—

24                          (A) INITIAL REPORT.—Not later than 2  
25                  years after the date of establishment of the pro-

1           gram, the Secretary shall submit to Congress a  
2           report that—

3                   (i) analyzes the efficiency of the pro-  
4                   gram; and

5                   (ii) assesses the impact of the pro-  
6                   gram on patient outcomes and system  
7                   costs.

8           (B) FINAL REPORT.—Not later than 5  
9           years after the date of establishment of the pro-  
10          gram, the Secretary shall submit to Congress  
11          an updated version of the report to be sub-  
12          mitted under subparagraph (A).

13          (2) ELEMENTS.—The reports to be submitted  
14          under paragraph (1) shall each contain a description  
15          of—

16                   (A) the details of the program;

17                   (B) the implementation of the program;

18                   (C) the medical issues being addressed by  
19          fellowships awarded under the program;

20                   (D) the strategies developed under the pro-  
21          gram in providing mental health and substance  
22          use disorders prevention and treatment services;

23                   (E) any successes of and problems associ-  
24          ated with the program;

1           (F) the impact of fellowships awarded  
2           under the program on the health (including be-  
3           havioral health) of emergency response pro-  
4           viders; and

5           (G) recommendations regarding reauthor-  
6           izing, reforming, or terminating the program.

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