

119TH CONGRESS
2D SESSION

H. R. 8629

To strengthen recruitment, training, and retention of the health center workforce to improve access to care and health outcomes in rural and underserved communities, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 30, 2026

Mr. RUIZ (for himself and Mr. BILIRAKIS) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To strengthen recruitment, training, and retention of the health center workforce to improve access to care and health outcomes in rural and underserved communities, 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 “Developing the Com-
5 munity Health Workforce Act of 2026”.

1 **SEC. 2. IMPROVING RECRUITMENT AND RETENTION OF**
2 **FEDERAL QUALIFIED HEALTH CENTER**
3 **STAFF.**

4 (a) PRIORITY TO FQHCs AND RURAL HEALTH CLIN-
5 ics.—Section 333(a) of the Public Health Service Act (42
6 U.S.C. 254f(a)) is amended by adding at the end the fol-
7 lowing:

8 “(4) In approving applications for assignment of
9 members of the Corps, the Secretary shall, notwith-
10 standing paragraph (3), give priority to applications with
11 respect to health professional shortage areas that are Fed-
12 erally qualified health centers and rural health clinics, as
13 defined in section 1861(aa) of the Social Security Act.”.

14 (b) LOAN REPAYMENT PROGRAM.—

15 (1) IN GENERAL.—The Secretary of Health and
16 Human Services shall award grants to Federally
17 qualified health centers (as defined in section
18 1861(aa) of the Social Security Act (42 U.S.C.
19 1395x(aa))) for the purpose of addressing health
20 professional workforce shortages by making loan re-
21 payments on behalf of health care professionals serv-
22 ing at such centers.

23 (2) APPLICATIONS.—To seek a grant under
24 paragraph (1), a Federally qualified health center
25 shall submit an application to the Secretary of
26 Health and Human Services at such time, in such

1 manner, and containing such information as the Sec-
2 retary may require. At a minimum, such an applica-
3 tion shall include—

4 (A) a description of the center's capacity
5 to address specific regional workforce shortages,
6 supported by data;

7 (B) a plan for making loan repayments as
8 described in paragraph (1); and

9 (C) a description of the center's use of an
10 interdisciplinary approach to care (such as
11 through the use of teams to provide care that
12 include physicians, nurses, social workers, com-
13 munity health workers, pharmacists, and other
14 health care professionals).

15 **SEC. 3. COMMUNITY HEALTH CENTER WORKFORCE PIPE-**
16 **LINE PROGRAM.**

17 (a) GRANTS TO RECRUIT, TRAIN, AND RETAIN A
18 COMMUNITY-BASED HEALTH CENTER WORKFORCE.—

19 (1) IN GENERAL.—Section 330 of the Public
20 Health Service Act (42 U.S.C. 254b) is amended—

21 (A) by redesignating subsection (r) as sub-
22 section (u); and

23 (B) by inserting after subsection (q) the
24 following new subsection:

1 “(r) RECRUITING, TRAINING, AND RETAINING A
2 COMMUNITY-BASED WORKFORCE.—The Secretary may
3 award grants to health centers for the purpose of assisting
4 such centers in—

5 “(1) recruiting and hiring staff with the skills
6 and experience necessary to effectively serve health
7 center patient populations in rural and underserved
8 areas; and

9 “(2) supporting career advancement and work-
10 force development opportunities for such staff.”.

11 (b) FQHCs DEEMED ELIGIBLE TO REGISTER AS
12 APPRENTICESHIP PROGRAM.—Not later than 180 days
13 after the date of the enactment of this Act, the Secretary
14 of Labor shall revise the regulations under part 29 of title
15 29, Code of Federal Regulations, as in effect on the date
16 of the enactment of this Act, so that Federally qualified
17 health centers (as defined in section 1861(aa) of the Social
18 Security Act (42 U.S.C. 1395x(aa))) are eligible to reg-
19 ister as apprenticeship programs under such part.

20 (c) HEALTH CENTERS CAREER OPPORTUNITIES.—
21 Section 330 of the Public Health Service Act (42 U.S.C.
22 254b) is further amended by inserting after subsection (r),
23 as inserted by subsection (a) of this section, the following:

24 “(s) HEALTH CENTERS CAREER OPPORTUNITIES.—

1 “(1) IN GENERAL.—The Secretary may award
2 grants to institutions of higher education, including
3 community colleges and minority-serving institu-
4 tions, to establish partnerships with one or more
5 health centers funded under this section for training
6 students in health professions.

7 “(2) USE OF FUNDS.—

8 “(A) COSTS.—An institution of higher
9 education receiving a grant under this sub-
10 section may use the grant to pay the costs of
11 training, including the salary of the clinicians
12 or other educators who provide the training.

13 “(B) TRAINING SUPPORTED.—The train-
14 ing supported pursuant to a grant under this
15 subsection may include formal training and
16 mentorships.

17 “(C) TYPES OF TRAINING.—The types of
18 training supported pursuant to a grant under
19 this subsection may include clinical, information
20 technology, operations, finance, or other train-
21 ing for students of health professions, as deter-
22 mined by the institution of higher education re-
23 ceiving the grant in partnership with the health
24 center involved.

25 “(3) DEFINITIONS.—In this subsection:

1 “(A) The term ‘institution of higher edu-
 2 cation’ means an institution of higher education
 3 described in subsection (a) or (b) of section 101
 4 of the Higher Education Act of 1965.

5 “(B) The term ‘minority-serving institu-
 6 tion’ means an institution of higher education
 7 described in section 371(a) of the Higher Edu-
 8 cation Act of 1965.”.

9 (d) BEHAVIORAL HEALTH SPECIALISTS.—Section
 10 330 of the Public Health Service Act (42 U.S.C. 254b)
 11 is further amended by inserting after subsection (s), as
 12 inserted by subsection (c) of this section, the following:

13 “(t) BEHAVIORAL HEALTH SPECIALISTS.—

14 “(1) IN GENERAL.—The Secretary may award
 15 grants to health centers to establish, operate, or ex-
 16 pand training programs for behavioral health spe-
 17 cialists.

18 “(2) USE OF FUNDS.—The training programs
 19 for behavioral health specialists supported pursuant
 20 to a grant under this subsection may include—

21 “(A) stipends for personnel to operate the
 22 training programs;

23 “(B) apprenticeship programs; and

24 “(C) other recruitment and retention ac-
 25 tivities for behavioral health specialists.”.

1 **SEC. 4. EXPANDING HOSPITAL AND FQHC PARTNERSHIPS**
2 **FOR GRADUATE MEDICAL EDUCATION.**

3 (a) PAYMENTS TO TEACHING HEALTH CENTERS.—

4 (1) IN GENERAL.—Section 340H of the Public
5 Health Service Act (42 U.S.C. 256h) is amended—

6 (A) in subsection (a)(1), by inserting “, or
7 that have in effect a covered agreement with a
8 sponsoring institution so listed,” after “relevant
9 accrediting body”; and

10 (B) in subsection (j), by adding at the end
11 the following new paragraph:

12 “(5) COVERED AGREEMENT.—The term ‘cov-
13 ered agreement’ means a written contract, memo-
14 randum of understanding, or other written agree-
15 ment entered into for not less than 2 years for the
16 purpose of conducting an approved graduate medical
17 residency training program.”.

18 (2) EFFECTIVE DATE.—The amendment made
19 by paragraph (1) shall apply with respect to ex-
20 penses incurred on or after October 1, 2025.

21 (b) MEDICARE GME CAP.—Section 1886(h) of the
22 Social Security Act (42 U.S.C. 1395ww(h)) is amended—

23 (1) in subsection (4)(F), by striking “and (10)”
24 and inserting “(10), and (11)”; and

25 (2) by adding at the end the following new
26 paragraph:

1 “(11) TRAINING PROGRAMS AT FEDERALLY
2 QUALIFIED HEALTH CENTERS.—

3 “(A) IN GENERAL.—For cost reporting pe-
4 riods beginning on or after October 1, 2025, in
5 the case of a hospital that has an approved
6 medical residency training program where a sig-
7 nificant portion of such program occurs at a
8 Federally qualified health center (as determined
9 by the Secretary), the Secretary shall increase
10 the otherwise applicable resident limit for such
11 hospital by 3 full-time equivalent residency posi-
12 tions.

13 “(B) DEFINITIONS.—In this paragraph:

14 “(i) OTHERWISE APPLICABLE RESI-
15 DENT LIMIT.—The term ‘otherwise appli-
16 cable resident limit’ means, with respect to
17 a hospital, the limit otherwise applicable
18 under subparagraphs (F)(i) and (H) of
19 paragraph (4) on the resident level for the
20 hospital determined without regard to this
21 paragraph but taking into account para-
22 graphs (7)(A), (7)(B), (8)(A), (8)(B),
23 (9)(A), and (10)(A).

1 “(ii) RESIDENT LEVEL.—The term
 2 ‘resident level’ has the meaning given such
 3 term in paragraph (7)(C)(i).”.

4 **SEC. 5. EXPANDING FQHC SERVICES.**

5 (a) BEHAVIORAL HEALTH PROFESSIONAL AND CASE
 6 MANAGER SERVICES.—

7 (1) MEDICARE.—Section 1861(aa) of the Social
 8 Security Act (42 U.S.C. 1395x(aa)) is amended—

9 (A) in paragraph (1)—

10 (i) in subparagraph (B), by inserting
 11 “such services furnished on or after Octo-
 12 ber 1, 2025, by a behavioral health con-
 13 sultant, peer support specialist, or other
 14 behavioral health professional (as such
 15 terms are defined by the Secretary),” be-
 16 fore “and such services”;

17 (ii) in subparagraph (C), by striking
 18 “and” at the end;

19 (iii) in subparagraph (D), by striking
 20 the comma at the end and inserting “,
 21 and”; and

22 (iv) by inserting after subparagraph
 23 (D) the following new subparagraph:

1 “(E) case management services furnished on or
2 after October 1, 2025, by a case manager (as de-
3 fined by the Secretary),”; and

4 (B) in paragraph (3)(A), by striking “(D)”
5 and inserting “(E)”.

6 (2) MEDICAID.—Section 1905(l)(2)(A) of the
7 Social Security Act (42 U.S.C. 1396d(l)(2)(A)) is
8 amended by inserting “and (E)” before “of section”.
9 (b) GUIDANCE ON STATE MEDICAID PAYMENTS TO
10 FQHCs.—Section 1902(bb) of the Social Security Act (42
11 U.S.C. 1396a(bb)) is amended by adding at the end the
12 following new paragraph:

13 “(7) STUDY AND GUIDANCE ON PAYMENT AD-
14 JUSTMENTS.—Not later than October 1, 2025, and
15 not less frequently than annually thereafter, the Sec-
16 retary shall—

17 “(A) conduct a study on any differences in
18 the methods by which State plans adjust the
19 payment amount under paragraph (3) for serv-
20 ices furnished during a fiscal year; and

21 “(B) based on the results of the study con-
22 ducted under subparagraph (A), issue guidance
23 to State plans on best practices for adjusting

1 the payment amount under paragraph (3) for
2 services furnished during a fiscal year.”.

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