

119TH CONGRESS  
2D SESSION

# S. 4540

To amend the Public Health Service Act to improve reproductive health care of individuals with disabilities.

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## IN THE SENATE OF THE UNITED STATES

MAY 14, 2026

Mrs. MURRAY (for herself, Ms. DUCKWORTH, Ms. ALSOBROOKS, Mr. BLUMENTHAL, Mr. BOOKER, Mr. FETTERMAN, Mrs. GILLIBRAND, Ms. HASSAN, Ms. HIRONO, Mr. MARKEY, Mr. MERKLEY, Mr. PADILLA, Mr. SANDERS, Mr. SCHIFF, Ms. SMITH, Ms. WARREN, Mr. WELCH, Mr. WHITEHOUSE, and Mr. WYDEN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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## A BILL

To amend the Public Health Service Act to improve reproductive health care of individuals with disabilities.

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 “Reproductive Health  
5 Care Accessibility Act”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

1           (1) In the United States, approximately 1 in 4  
2 adults have some type of disability, more than 1 in  
3 10 individuals with disabilities can become pregnant,  
4 and over 4,100,000 individuals are parents with dis-  
5 abilities.

6           (2) All people, including individuals with dis-  
7 abilities, have the right to decide if, when, and how  
8 to start and raise a family, as well as to have  
9 healthy pregnancies and postpartum periods.

10          (3) Titles II and III of the Americans with Dis-  
11 abilities Act of 1990 (42 U.S.C. 12131 et seq. and  
12 12181 et seq.), section 504 of the Rehabilitation Act  
13 of 1973 (29 U.S.C. 794), and section 1557 of the  
14 Patient Protection and Affordable Care Act (42  
15 U.S.C. 18116) provide individuals with disabilities  
16 with the right to equitably access and receive health  
17 care.

18          (4) Disabled individuals face unique barriers  
19 when accessing reproductive health care, including  
20 accessibility issues at health care facilities, lack of  
21 accessible medical diagnostic equipment, barriers to  
22 accessible travel, delay in receiving preventative serv-  
23 ices, and lack of health care providers with training  
24 and knowledge on the needs of individuals with dis-  
25 abilities receiving reproductive health care.

1           (5) Reproductive health care is critical to an in-  
2       dividual's long-term health. Disabled individuals  
3       have higher mortality rates from reproductive re-  
4       lated cancers often due to lack of access to reproduc-  
5       tive health care, higher rates of maternal mortality  
6       and morbidity, and often experience earlier onset  
7       menopause.

8           (6) The United States Access Board has estab-  
9       lished standards for accessible medical diagnostic  
10      equipment that were adopted by the Department of  
11      Health and Human Services and the Department of  
12      Justice in 2024. Awareness about the standards re-  
13      mains low among providers. Greater provider edu-  
14      cation, implementation, and enforcement of the  
15      standards is necessary to ensure equally effective re-  
16      productive and sexual health care for individuals  
17      with disabilities.

18          (7) Disabled individuals have an equal right to  
19      reproductive autonomy, but harmful stereotypes  
20      about individuals with disabilities create barriers to  
21      getting care that respects that autonomy.

22          (8) Laws that restrict access to reproductive  
23      health care, including abortion care,  
24      disproportionally harm individuals who already face

1 barriers to reproductive health care, which includes  
2 disabled individuals.

3 (9) Individuals with and without disabilities  
4 want children at the same frequency, but individuals  
5 with disabilities are less likely to receive contracep-  
6 tion counseling and timely prenatal care, experience  
7 a higher rate of sterilization, and are at a greater  
8 risk for adverse pregnancy outcomes.

9 (10) Diversity and inclusion in the health care  
10 workforce is a critical factor in the delivery of high-  
11 quality, culturally competent health care and im-  
12 proves patient outcomes. However, the rate of stu-  
13 dents and trainees with disabilities in medical and  
14 allied health education remains low compared to  
15 those without disabilities.

16 **SEC. 3. PROGRAM FOR TRAINING THE WORKFORCE.**

17 Part D of title VII of the Public Health Service Act  
18 (42 U.S.C. 294 et seq.) is amended by adding at the end  
19 the following:

20 **“SEC. 760A. PROGRAM FOR TRAINING THE WORKFORCE**  
21 **CONCERNING REPRODUCTIVE HEALTH CARE**  
22 **FOR INDIVIDUALS WITH DISABILITIES.**

23 “(a) IN GENERAL.—The Secretary, acting through  
24 the Administrator of the Health Resources and Services  
25 Administration and in consultation with the Administrator

1 of the Administration for Community Living, shall award  
 2 grants, contracts, or cooperative agreements to eligible en-  
 3 tities to carry out training programs for health care pro-  
 4 fessionals and trainees on providing equitable sexual and  
 5 reproductive health care for individuals with disabilities.

6 “(b) ELIGIBILITY.—

7 “(1) IN GENERAL.—To be eligible to receive an  
 8 award under this section, an entity shall be a public  
 9 or private nonprofit entity with demonstrated exper-  
 10 tise in serving individuals with disabilities, which  
 11 may include—

12 “(A) a multidisciplinary health care pro-  
 13 vider who provides sexual and reproductive  
 14 health care, such as federally qualified health  
 15 centers and Title X clinics;

16 “(B) institutions of higher education, as  
 17 defined in section 101 of the Higher Education  
 18 Act of 1965, with expertise in sexual and repro-  
 19 ductive health care;

20 “(C) an entity primarily led by individuals  
 21 with disabilities;

22 “(D) an entity with expertise in reproduc-  
 23 tive rights and justice;

24 “(E) an Indian Tribe, Tribal organization,  
 25 or urban Indian organization; or

1           “(F) a consortium of entities described in  
2           any of subparagraphs (A) through (E).

3           “(2) APPLICATION.—To be eligible to receive an  
4           award under this section, an eligible entity shall sub-  
5           mit to the Secretary an application at such time, in  
6           such manner, and containing such information as  
7           the Secretary may require, that includes—

8           “(A) a description of the eligible entity’s or  
9           consortium of entities’ expertise in providing  
10          technical assistance and training, including evi-  
11          dence such as—

12           “(i) knowledge of the rights afforded  
13          to individuals with a disability under rel-  
14          evant Federal and State law;

15           “(ii) knowledge of accessibility stand-  
16          ards established by the United States Ac-  
17          cess Board;

18           “(iii) expertise in evidence-based or  
19          evidence-informed practices in providing  
20          trauma-informed sexual and reproductive  
21          health care, including preventive health  
22          care services and perinatal care, to individ-  
23          uals with disabilities and those facing com-  
24          pounded barriers to accessing care;

1 “(iv) experience working with health  
2 care providers, public or private nonprofit  
3 entities, or Federal, State, or local agencies  
4 focusing on sexual and reproductive health  
5 care services for individuals with disabili-  
6 ties;

7 “(v) experience working with individ-  
8 uals with disabilities and their families;

9 “(vi) expertise in providing, collecting,  
10 compiling, communicating, and dissemi-  
11 nating sexual and reproductive health care  
12 information in culturally and linguistically  
13 appropriate manner especially in easily ac-  
14 cessible formats; and

15 “(vii) experience improving coordina-  
16 tion of services, such as mental health,  
17 substance use disorder prevention, treat-  
18 ment, and recovery support services, social  
19 services, other health care services, and  
20 transportation services for individuals with  
21 disabilities;

22 “(B) a description of the activities to be  
23 funded under the award and the goals of such  
24 activities, including a description of—

1 “(i) the training or education program  
2 to be implemented that meets the require-  
3 ments of subsection (c);

4 “(ii) the process to be used to identify  
5 health care providers that will participate  
6 in the training program, including the  
7 process to increase diversity in the pool of  
8 participating providers;

9 “(iii) the process to be used to engage  
10 stakeholders in such training, including in-  
11 dividuals with disabilities; and

12 “(iv) the eligible entity’s evaluation  
13 plan to determine the scope and impact of  
14 the training program;

15 “(C) an assurance that the recipients of  
16 the training will receive ongoing and com-  
17 prehensive training or professional development  
18 on the sexual and reproductive health care  
19 needs of individuals with disabilities; and

20 “(D) any other assurances that the Sec-  
21 retary may require.

22 “(3) SUBAWARDS.—An eligible entity or eligible  
23 consortium receiving an award under this section  
24 may, for contracting purposes, make subawards to  
25 individuals or entities with expertise in sexual and



1 reproductive health care and serving individuals with  
2 disabilities.

3 “(c) USE OF FUNDS.—An entity or entities shall use  
4 amounts received under this section to carry out a training  
5 program for health care professionals providing sexual and  
6 reproductive health care that provides training con-  
7 cerning—

8 “(1) comprehensive disability clinical care cur-  
9 ricula to inform health care professionals providing  
10 sexual and reproductive health care on how to pro-  
11 vide effective, interprofessional team-based health  
12 care;

13 “(2) comprehensive clinical care curricula on  
14 how disability-based and intersectional discrimina-  
15 tion shapes sexual and reproductive health care ac-  
16 cess and quality for disabled individuals, including  
17 historical and ongoing practices;

18 “(3) culturally and linguistically competent care  
19 for individuals with disabilities;

20 “(4) delivering sexual and reproductive health  
21 care for individuals with disabilities in a manner  
22 that emphasizes the independence, self-determina-  
23 tion, and choices of individuals with disabilities with  
24 respect to their sexual and reproductive health

1 through comprehensive disability clinical care cur-  
2 ricula;

3 “(5) the rights afforded to individuals with dis-  
4 abilities under relevant Federal and State law; and

5 “(6) methods and evidence-based or evidence-in-  
6 formed practices for providing sexual and reproduc-  
7 tive health care, including preventive health care  
8 services, to individuals with disabilities.

9 “(d) EVALUATION AND REPORT.—

10 “(1) IN GENERAL.—An entity or entities that  
11 receives an award under this section shall, at the  
12 end of the award period, carry out an evaluation of  
13 outcomes achieved through the program in training  
14 health care professionals providing sexual and repro-  
15 ductive health care, consistent with the purposes of  
16 this section.

17 “(2) REPORT.—Not later than 180 days after  
18 the end of the award period, an entity that receives  
19 an award under this section shall submit to the Sec-  
20 retary a report on the results of the evaluation con-  
21 ducted under paragraph (1).

22 “(3) SECRETARY.—The Secretary shall annu-  
23 ally compile the reports submitted under paragraph  
24 (2) and submit such compilation to the Committee  
25 on Health, Education, Labor, and Pensions of the

1 Senate and the Committee on Energy and Com-  
2 merce of the House of Representatives. Such com-  
3 pilations shall be posted on the internet website of  
4 the Department of Health and Human Services in  
5 an accessible format.

6 “(e) DEFINITIONS.—In this section:

7 “(1) DISABILITY.—The terms ‘disability’ and  
8 ‘disabilities’ have the meaning given such terms for  
9 purposes of the Americans with Disabilities Act of  
10 1990.

11 “(2) INDIAN TRIBE; TRIBAL ORGANIZATION.—  
12 The terms ‘Indian Tribe’ and ‘Tribal organization’  
13 have the meaning given such terms in section 4 of  
14 the Indian Self-Determination and Education Assist-  
15 ance Act.

16 “(3) URBAN INDIAN ORGANIZATION.—The term  
17 ‘Urban Indian organization’ has the meaning given  
18 such term in section 4 of the Indian Health Care  
19 Improvement Act.

20 “(f) AUTHORIZATION OF APPROPRIATIONS.—There  
21 is authorized to be appropriated to carry out this section,  
22 \$10,000,000 for each of fiscal years 2027 through 2031.  
23 Funds provided to carry out this section shall supplement  
24 not supplant funds otherwise made available to carry out  
25 this title.”.

1 **SEC. 4. PROGRAM FOR EXPANDING THE REPRODUCTIVE**  
 2 **HEALTH CARE PROVIDER WORKFORCE.**

3 Part B of title VII of the Public Health Service Act  
 4 (42 U.S.C. 293 et seq.) is amended by adding at the end  
 5 the following:

6 **“SEC. 742. PROGRAM FOR EXPANDING THE REPRODUCTIVE**  
 7 **HEALTH CARE PROVIDER WORKFORCE.**

8 “(a) PURPOSE.—It is the purpose of this section—

9 “(1) to establish and sustain a competitive  
 10 health professions applicant pool of individuals with  
 11 disabilities by increasing the total number of individ-  
 12 uals with disabilities who pursue a career in sexual  
 13 and reproductive health care, including abortion care  
 14 and maternal health care; and

15 “(2) to develop a culturally and linguistically  
 16 competent health care workforce providing sexual  
 17 and reproductive health care that will serve unserved  
 18 and underserved populations, including individuals  
 19 with disabilities.

20 “(b) AWARDS.—To assist individuals with disabilities  
 21 in undertaking education to enter into the sexual and re-  
 22 productive health care workforce, the Secretary may  
 23 award grants, contracts, or cooperative agreements to  
 24 public or private nonprofit health or educational entities,  
 25 including schools of medicine, schools of osteopathic medi-  
 26 cine, schools of nursing, and other institutions of higher

1 education, that offer programs, including graduate pro-  
2 grams, in obstetrics and gynecology, comprehensive sexual  
3 and reproductive health care, or programs for the training  
4 of health care providers to enable such entities to carry  
5 out the activities described in subsection (d).

6 “(c) APPLICATION.—To be eligible to receive an  
7 award under subsection (b), an entity described in such  
8 subsection shall submit to the Secretary an application at  
9 such time, in such manner, and containing such informa-  
10 tion as the Secretary may require.

11 “(d) USE OF FUNDS.—An entity shall use amounts  
12 received under an award under subsection (b) to—

13 “(1) conduct or support activities to develop a  
14 competitive applicant pool, through partnership with  
15 public or private nonprofit institutions of higher  
16 education, local educational agencies, health care  
17 providers, such as sexual and reproductive health  
18 care providers and primary care providers, or other  
19 community-based entities, and establish an edu-  
20 cation pipeline for individuals with disabilities enter-  
21 ing the sexual and reproductive health care work-  
22 force;

23 “(2) establish, strengthen, or expand programs  
24 to support the academic performance of individuals

1 with disabilities participating in activities funded  
2 under this section, including mentorship programs;

3 “(3) identify, recruit, enroll, and retain individ-  
4 uals with disabilities in education and training re-  
5 lated to sexual and reproductive health care;

6 “(4) improve the capacity of the entity involved  
7 to train, recruit, and retain faculty with disabilities  
8 including the payment of such stipends and fellow-  
9 ships as the Secretary may determine appropriate;

10 “(5) carry out activities to improve the informa-  
11 tion resources, clinical education, curricula, and  
12 competencies of the graduates of the entity involved,  
13 as it relates to individuals with disabilities;

14 “(6) facilitate faculty and student research on  
15 health issues affecting individuals with disabilities,  
16 including research on issues relating to the delivery  
17 of sexual and reproductive health care to individuals  
18 with disabilities;

19 “(7) carry out programs, or offer experiences,  
20 to train students in providing sexual and reproduc-  
21 tive health services to individuals with disabilities at  
22 community-based health facilities that provide sexual  
23 and reproductive health services;

24 “(8) provide stipends to individuals with disabil-  
25 ities participating in activities funded under this sec-

1       tion as the Secretary determines appropriate, in  
2       amounts as the Secretary determines appropriate,  
3       with an assurance that such stipends shall not result  
4       in loss of an individual's Federal or State benefits;  
5       or

6               “(9) carry out any other activities that the Sec-  
7       retary may require.

8       “(e) PREFERENCE.—In awarding grants, contracts,  
9       or cooperative agreements under this section, the Sec-  
10      retary shall give preference to applications that have been  
11      approved for programs that involve a comprehensive ap-  
12      proach through multiple entities described in subsection  
13      (b) to establish, enhance, and expand educational pro-  
14      grams that will result in the development of a competitive  
15      applicant pool of individuals with disabilities who desire  
16      to pursue careers in sexual and reproductive health care  
17      services.

18       “(f) CONSIDERATION FOR AWARDS.—In awarding  
19      grants, contracts, or cooperative agreements under this  
20      section, the Secretary shall—

21               “(1) consider current enrollment trends and the  
22      needs of certain populations, including individuals  
23      with disabilities; and

1           “(2) align and coordinate with other training  
2           programs administered by the Health Resources and  
3           Services Administration.

4           “(g) EFFECT ON OTHER PROGRAMS.—Assistance or  
5           stipends provided to an individual under this section shall  
6           not be considered when applying asset or resource limita-  
7           tion provisions related to the eligibility of such individual  
8           for any benefit, assistance, or service provided under any  
9           Federal or State program.

10          “(h) REPORT.—Not later than 180 days after the end  
11          of the award period, the Secretary shall submit to the  
12          Committee on Health, Education, Labor, and Pensions of  
13          the Senate and the Committee on Energy and Commerce  
14          of the House of Representatives, a report concerning the  
15          activities carried out under this section to increase the rep-  
16          resentation of individuals with disabilities in the sexual  
17          and reproductive health profession and related training  
18          programs.

19          “(i) AUTHORIZATION OF APPROPRIATIONS.—There is  
20          authorized to be appropriated to carry out this section,  
21          \$15,000,000 for each of fiscal years 2027 through 2031.  
22          Funds provided to carry out this section shall supplement  
23          not supplant funds otherwise made available to carry out  
24          this title.”.



1 **SEC. 5. EXPANDING THE REPRODUCTIVE HEALTH CARE**  
2 **NURSING WORKFORCE.**

3 Section 821 of the Public Health Service Act (42  
4 U.S.C. 296m) is amended by adding at the end the fol-  
5 lowing:

6 “(d) **EXPANDING THE REPRODUCTIVE HEALTH**  
7 **CARE NURSING WORKFORCE.**—

8 “(1) **AWARDS.**—To assist individuals with dis-  
9 abilities in undertaking education to enter into the  
10 reproductive nursing workforce, the Secretary may  
11 award grants, contracts, or cooperative agreements  
12 under subsection (a)(1) to eligible entities to enable  
13 such entities to carry out the activities described in  
14 paragraph (3).

15 “(2) **APPLICATION.**—To be eligible to receive an  
16 award under paragraph (1), an entity described in  
17 such paragraph shall submit to the Secretary an ap-  
18 plication at such time, in such manner, and con-  
19 taining such information as the Secretary may re-  
20 quire.

21 “(3) **USE OF FUNDS.**—An entity shall use  
22 amounts received under an award under paragraph  
23 (1) to—

24 “(A) conduct activities to develop a com-  
25 petitive applicant pool, through partnership  
26 with public or private nonprofit institutions of

1 higher education, local educational agencies,  
2 nurse-managed health clinics, health care pro-  
3 viders, such as sexual and reproductive health  
4 care providers and nurses, or other community-  
5 based entities, and establish an education pipe-  
6 line for individuals with disabilities entering the  
7 sexual and reproductive health care nursing  
8 workforce;

9 “(B) establish, strengthen, or expand pro-  
10 grams to support the academic performance of  
11 individuals with disabilities participating in ac-  
12 tivities funded under this subsection, including  
13 mentorship programs;

14 “(C) identify, recruit, enroll, and retain in-  
15 dividuals with disabilities in education and  
16 training related to sexual and reproductive  
17 health care;

18 “(D) improve the capacity of the entity in-  
19 volved to train, recruit, and retain faculty with  
20 disabilities, including the payment of such sti-  
21 pends and fellowships as the Secretary may de-  
22 termine appropriate;

23 “(E) carry out activities to improve the in-  
24 formation resources, clinical education, cur-  
25 ricula, and competencies of the graduates of the

1 entity involved, as it relates to individuals with  
2 disabilities;

3 “(F) facilitate faculty and student research  
4 to include evidence-based practice and quality  
5 improvement projects focused on health issues  
6 affecting individuals with disabilities, including  
7 research on issues relating to the delivery of  
8 sexual and reproductive health care to individ-  
9 uals with disabilities;

10 “(G) carry out programs, or offer experi-  
11 ences, to train students in providing sexual and  
12 reproductive health services to individuals with  
13 disabilities at community-based health care fa-  
14 cilities that provide sexual and reproductive  
15 health services;

16 “(H) provide stipends to individuals with  
17 disabilities participating in activities funded  
18 under this subsection as the Secretary deter-  
19 mines appropriate, in amounts as the Secretary  
20 determines appropriate, with an assurance that  
21 such stipends shall not result in the loss of an  
22 individual’s Federal or State benefits; or

23 “(I) carry out any other activities that the  
24 Secretary may require.

1           “(4) PREFERENCE.—In awarding grants, con-  
 2           tracts, or cooperative agreements under this sub-  
 3           section, the Secretary shall give preference to appli-  
 4           cations that have been approved for programs that  
 5           involve a comprehensive approach through multiple  
 6           entities described in paragraph (1) to establish, en-  
 7           hance, and expand educational programs that will  
 8           result in the development of a competitive applicant  
 9           pool of individuals with disabilities who desire to  
 10          pursue careers in sexual and reproductive health  
 11          care services.

12          “(5) CONSIDERATION FOR AWARDS.—In award-  
 13          ing grants, contracts, or cooperative agreements  
 14          under this subsection, the Secretary shall—

15               “(A) consider current enrollment trends  
 16               and the needs of certain populations, including  
 17               individuals with disabilities; and

18               “(B) align and coordinate with other train-  
 19               ing programs administered by the Health Re-  
 20               sources and Services Administration.

21          “(6) EFFECT ON OTHER PROGRAMS.—Assist-  
 22          ance or stipends provided to an individual under this  
 23          subsection shall not be considered when applying  
 24          asset or resource limitation provisions related to the  
 25          eligibility of such individual for any benefit, assist-

1       ance, or service provided under any Federal or State  
2       program.

3           “(7) REPORT.—Not later than 180 days after  
4       the end of the award period, the Secretary shall sub-  
5       mit to the Committee on Health, Education, Labor,  
6       and Pensions of the Senate and the Committee on  
7       Energy and Commerce of the House of Representa-  
8       tives, a report concerning the activities carried out  
9       under this subsection to increase the representation  
10      of individuals with disabilities in the sexual and re-  
11      productive health profession and related training  
12      programs.

13          “(8) AUTHORIZATION OF APPROPRIATIONS.—  
14      There is authorized to be appropriated to carry out  
15      this subsection, \$15,000,000 for each of fiscal years  
16      2027 through 2031. Funds provided to carry out  
17      this subsection shall supplement not supplant funds  
18      otherwise made available to carry out this title.”.

19 **SEC. 6. PROGRAM FOR REPRODUCTIVE HEALTH EDU-**  
20 **CATION.**

21      (a) IN GENERAL.—The Secretary of Health and  
22      Human Services (referred to in this section as the “Sec-  
23      retary”), acting through the Administrator of the Health  
24      Resources and Services Administration and in consulta-  
25      tion with the Administrator of the Administration for

1 Community Living, shall award grants, contracts, or coop-  
2 erative agreements to eligible entities to provide funding  
3 for education programs focused on sexual and reproduc-  
4 tive health needs for individuals with disabilities.

5 (b) ELIGIBILITY.—

6 (1) IN GENERAL.—To be eligible to receive an  
7 award under this section an entity shall be a public  
8 or private nonprofit entity with a demonstrated ex-  
9 pertise in serving individuals with disabilities, which  
10 may include—

11 (A) a multidisciplinary health care provider  
12 who provides sexual and reproductive health  
13 care services, such as a federally qualified  
14 health center or a Title X clinic;

15 (B) institutions of higher education, as de-  
16 fined in section 101 of the Higher Education  
17 Act of 1965, with expertise in sexual and repro-  
18 ductive health care;

19 (C) an entity primarily led by individuals  
20 with disabilities;

21 (D) an entity with expertise in reproduc-  
22 tive rights and justice;

23 (E) an Indian Tribe, Tribal organization,  
24 or Urban Indian organization; and

1 (F) a consortium of entities described in  
2 any of subparagraphs (A) through (E).

3 (2) APPLICATION.—To be eligible to receive a  
4 grant, contract, or cooperative agreement under this  
5 section, an eligible entity or consortium of entities  
6 shall submit to the Secretary an application at such  
7 time, in such manner, and containing such informa-  
8 tion as the Secretary may require, that includes a  
9 description of the eligible entity’s or entities’ exper-  
10 tise in providing education programs including evi-  
11 dence that such entity has—

12 (A) knowledge of best practices in pro-  
13 viding sexual and reproductive health care, in-  
14 cluding preventive health care services, to indi-  
15 viduals with disabilities;

16 (B) experience working with individuals  
17 with disabilities and their families; and

18 (C) demonstrated expertise of developing  
19 materials in culturally and linguistically acces-  
20 sible formats including plain language.

21 (3) SUBAWARDS.—An eligible entity or eligible  
22 consortium receiving an award under this section  
23 may, for contracting purposes, make subawards to  
24 individuals or entities with expertise in sexual and

1 reproductive health care and serving individuals with  
2 disabilities.

3 (c) USE OF FUNDS.—An entity shall use amounts re-  
4 ceived under subsection (a) to—

5 (1) carry out evidence-based or evidence-in-  
6 formed sexual and reproductive health education  
7 programs for individuals with disabilities, including  
8 youth, in culturally and linguistically accessible for-  
9 mats;

10 (2) develop sexual and reproductive health edu-  
11 cation programs in culturally and linguistically ac-  
12 cessible formats to be used in carrying out para-  
13 graph (1);

14 (3) provide education to individuals with dis-  
15 abilities, including youth, concerning abortion care  
16 options and their sexual, reproductive, and perinatal  
17 health care needs;

18 (4) provide education to individuals with dis-  
19 abilities, including youth, concerning their rights  
20 under relevant Federal and State law;

21 (5) provide access to disability affirmative and  
22 supportive clinical resources that are accessible to  
23 individuals with disabilities;

24 (6) build the entity's capacity and enhance their  
25 leadership of the entity within the community to



1 promote community engagement in, and advance-  
2 ment of, evidence-based or evidence-informed sexual  
3 and reproductive health care education in easily ac-  
4 cessible formats; and

5 (7) support dissemination of newly developed  
6 sexual and reproductive health care education pro-  
7 grams as described in paragraph (2) throughout the  
8 State, territorial, and Tribal communities.

9 (d) EVALUATION AND REPORT.—

10 (1) IN GENERAL.—An entity that receives an  
11 award under this section shall, at the end of the  
12 award period, carry out an evaluation of success of  
13 the entity in achieving the goals of the program for  
14 which the award was made.

15 (2) REPORT.—Not later than 180 days after  
16 the end of the award period, an entity that receives  
17 an award under this section shall submit to the Sec-  
18 retary a report on the results of the evaluation con-  
19 ducted under paragraph (1).

20 (3) SECRETARY.—The Secretary shall annually  
21 compile the reports submitted under paragraph (2)  
22 and submit such compilation to the Committee on  
23 Health, Education, Labor, and Pensions of the Sen-  
24 ate and the Committee on Energy and Commerce of  
25 the House of Representatives. Such compilations

1 shall be posted on the website of the Department of  
 2 Health and Human Services in an accessible format.

3 (e) DEFINITIONS.—In this section:

4 (1) DISABILITY.—The terms “disability” and  
 5 “disabilities” have the meaning given such terms for  
 6 purposes of the Americans with Disabilities Act of  
 7 1990 (42 U.S.C. 12101 et seq.).

8 (2) INDIAN TRIBE; TRIBAL ORGANIZATION.—  
 9 The terms “Indian Tribe” and “Tribal organiza-  
 10 tion” have the meaning given such terms in section  
 11 4 of the Indian Self-Determination and Education  
 12 Assistance Act (25 U.S.C. 5304).

13 (3) URBAN INDIAN ORGANIZATION.—The term  
 14 “Urban Indian organization” has the meaning given  
 15 such term in section 4 of the Indian Health Care  
 16 Improvement Act (25 U.S.C. 1603).

17 (f) AUTHORIZATION OF APPROPRIATIONS.—There is  
 18 authorized to be appropriated to carry out this section,  
 19 \$10,000,000 for each of fiscal years 2027 through 2031.

20 **SEC. 7. NATIONAL TECHNICAL ASSISTANCE CENTER.**

21 (a) ESTABLISHMENT.—The Secretary of Health and  
 22 Human Services, acting through the Administration for  
 23 Community Living, shall directly, or through a grant, con-  
 24 tract, or cooperative agreement, establish a National Tech-  
 25 nical Assistance Center to—

1           (1) provide recommendations and best practices  
2           to States, territories, Indian Tribes, Tribal organiza-  
3           tions, and Urban Indian organizations concerning  
4           improving coordination of services including mental  
5           health and substance use disorder services, social  
6           services, health care, and transportation to increase  
7           access to quality, integrated systems of accessible,  
8           comprehensive disability clinical care, and services  
9           for individuals with disabilities;

10          (2) provide technical assistance to health care  
11          providers on culturally and linguistically accessible  
12          and appropriate sexual and reproductive health care,  
13          including before, during, and after pregnancy and  
14          perinatal care and family planning services;

15          (3) develop resources and provide technical as-  
16          sistance to assist covered entities in complying with  
17          applicable Federal laws and regulations; and

18          (4) develop resources for individuals with dis-  
19          abilities facing barriers to accessible care, including  
20          related to accessible medical diagnostic equipment  
21          and the Barrier-Free Health Care Initiative.

22          (b) DEFINITIONS.—In this section:

23               (1) DISABILITY.—The terms “disability” and  
24               “disabilities” have the meaning given such terms for

1 purposes of the Americans with Disabilities Act of  
2 1990 (42 U.S.C. 12101 et seq.).

3 (2) INDIAN TRIBE; TRIBAL ORGANIZATION.—  
4 The terms “Indian Tribe” and “Tribal organiza-  
5 tion” have the meaning given such terms in section  
6 4 of the Indian Self-Determination and Education  
7 Assistance Act (25 U.S.C. 5304).

8 (3) URBAN INDIAN ORGANIZATION.—The term  
9 “Urban Indian organization” has the meaning given  
10 such term in section 4 of the Indian Health Care  
11 Improvement Act (25 U.S.C. 1603).

12 (c) AUTHORIZATION OF APPROPRIATIONS.—There is  
13 authorized to be appropriated to carry out this section,  
14 \$10,000,000 for each of fiscal years 2027 through 2031.

15 **SEC. 8. RESEARCH STUDY.**

16 (a) IN GENERAL.—The Secretary of Health and  
17 Human Services, in consultation with the Administrator  
18 of the Administration for Community Living, shall carry  
19 out a study to—

20 (1) identify the types of programs and services  
21 that have demonstrated effectiveness in providing  
22 sexual and reproductive health care services for indi-  
23 viduals with disabilities;

24 (2) analyze the effectiveness of Federal, State,  
25 Tribal, and local partnerships to coordinate efforts

1 to ensure an integrated system of accessible, com-  
2 prehensive sexual and reproductive health care for  
3 individuals with disabilities; and

4 (3) identify necessary memoranda of under-  
5 standing or interagency agreements that are needed  
6 to foster data and public health research focusing on  
7 sexual and reproductive health care barriers for indi-  
8 viduals with disabilities.

9 (b) REPORT.—Not later than 3 years after the date  
10 of enactment of this Act, the Secretary of Health and  
11 Human Services shall submit to the Committee on Health,  
12 Education, Labor, and Pensions of the Senate and the  
13 Committee on Energy and Commerce and the Committee  
14 on Education and Workforce of the House of Representa-  
15 tives, a report on the results of the study conducted under  
16 subsection (a).

17 (c) DEFINITION.—In this section the terms “dis-  
18 ability” and “disabilities” have the meanings given such  
19 terms for purposes of the Americans with Disabilities Act  
20 of 1990 (42 U.S.C. 12101 et seq.).

21 (d) AUTHORIZATION OF APPROPRIATIONS.—There is  
22 authorized to be appropriated to carry out this section,  
23 \$15,000,000 for fiscal year 2027.

