

105TH CONGRESS
1ST SESSION

H. R. 1895

To amend the Public Health Service Act to revise and extend programs relating to the health of individuals who are from disadvantaged backgrounds, including individuals who are members of racial or ethnic minority groups.

IN THE HOUSE OF REPRESENTATIVES

JUNE 12, 1997

Mr. STOKES (for himself, Mr. WYNN, Ms. CHRISTIAN-GREEN, Mr. HASTINGS of Florida, Mr. CUMMINGS, Mr. RUSH, Ms. WATERS, Mrs. CLAYTON, Mr. PAYNE, Mr. FLAKE, Ms. KILPATRICK, Mrs. MEEK of Florida, Ms. BROWN of Florida, Mr. JACKSON of Illinois, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. TOWNS, Mr. CONYERS, Mr. DELLUMS, Mr. CLAY, Mr. CLYBURN, Mr. LEWIS of Georgia, Mr. HILLIARD, Mr. SCOTT, Mr. DAVIS of Illinois, Ms. JACKSON-LEE of Texas, Mr. THOMPSON, Mr. DIXON, Mr. FATTAH, Mr. FORD, Ms. NORTON, Ms. MILLENDER-McDONALD, Ms. MCKINNEY, Mr. OWENS, Mr. BISHOP, Mr. WATT of North Carolina, Mr. JEFFERSON, Mr. RANGEL, and Ms. CARSON) introduced the following bill; which was referred to the Committee on Commerce

A BILL

To amend the Public Health Service Act to revise and extend programs relating to the health of individuals who are from disadvantaged backgrounds, including individuals who are members of racial or ethnic minority groups.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Disadvantaged Minor-
3 ity Health Improvement Amendments Act of 1997”.

4 **SEC. 2. REVISION AND EXTENSION OF PROGRAM FOR OF-**
5 **FICE OF MINORITY HEALTH.**

6 (a) IN GENERAL.—Section 1707 of the Public Health
7 Service Act (42 U.S.C. 300u–6) is amended by striking
8 subsection (c) and all that follows and inserting the follow-
9 ing:

10 “(c) ADVISORY COMMITTEE.—

11 “(1) IN GENERAL.—The Secretary shall estab-
12 lish an advisory committee to be known as the Advi-
13 sory Committee on Minority Health (in this sub-
14 section referred to as the ‘Committee’). The Deputy
15 Assistant Secretary shall consult with the Committee
16 in carrying out this section.

17 “(2) DUTIES.—The Committee shall provide
18 advice to the Deputy Assistant Secretary carrying
19 out this section, including advice on the development
20 of goals and specific program activities under para-
21 graphs (1) and (2) of subsection (b) for each racial
22 and ethnic minority group.

23 “(3) CHAIR.—The Deputy Assistant Secretary
24 shall serve as the chair of the Committee.

25 “(4) COMPOSITION.—

1 “(A) The Committee shall be composed of
2 not fewer than 12 voting members appointed in
3 accordance with subparagraph (B), and nonvot-
4 ing, ex officio members designated in subpara-
5 graph (C).

6 “(B)(i) The voting members of the Com-
7 mittee shall be appointed from among individ-
8 uals who are not officers or employees of the
9 Federal Government and who have expertise re-
10 garding issues of minority health. The racial
11 and ethnic minority groups shall be equally rep-
12 resented among such members.

13 “(ii) Except as provided in clause (iii), the
14 voting members of the Committee shall be ap-
15 pointed by the Secretary.

16 “(iii) One voting member of the Committee
17 shall be appointed from among the voting mem-
18 bers of the Advisory Committee on Research on
19 Minority Health established under section
20 404(e). The appointment under the preceding
21 sentence shall be made by the Chair of the Ad-
22 visory Committee under such section, in con-
23 sultation with the other members of such Advi-
24 sory Committee.

1 “(C) The nonvoting, ex officio members of
2 the Committee shall be the Deputy Assistant
3 Secretary and the directors of each of the mi-
4 nority health offices, and such additional offi-
5 cials of the Department of Health and Human
6 Services as the Secretary determines to be ap-
7 propriate.

8 “(5) TERMS.—Each member of the Committee
9 shall serve for a term of 4 years, except that the
10 Secretary shall initially appoint a portion of the
11 members to terms of 1 year, 2 years, and 3 years.

12 “(6) VACANCIES.—If a vacancy occurs on the
13 Committee, a new member shall be appointed by the
14 Secretary within 90 days from the date that the va-
15 cancy occurs, and serve for the remainder of the
16 term for which the predecessor of such member was
17 appointed. The vacancy shall not affect the power of
18 the remaining members to execute the duties of the
19 Committee.

20 “(7) COMPENSATION.—Members of the Com-
21 mittee who are officers or employees of the United
22 States shall serve without compensation. Members of
23 the Committee who are not officers or employees of
24 the United States shall receive compensation, for
25 each day (including travel time) they are engaged in

1 the performance of the functions of the Committee.
2 Such compensation may not be in an amount in ex-
3 cess of the daily equivalent of the annual maximum
4 rate of basic pay payable under the General Sched-
5 ule (under title 5, United States Code) for positions
6 above GS-15.

7 “(d) CERTAIN REQUIREMENTS REGARDING DU-
8 TIES.—

9 “(1) BILINGUAL ASSISTANCE REGARDING
10 HEALTH CARE.—In carrying out subsection (b)(7),
11 the Secretary shall give special consideration to the
12 unique linguistic needs of health care providers serv-
13 ing Asians, and American Samoans and other Pa-
14 cific Islanders, including such needs regarding par-
15 ticular subpopulations of such groups.

16 “(2) EQUITABLE ALLOCATION REGARDING AC-
17 TIVITIES.—

18 “(A) In making awards of grants, coopera-
19 tive agreements, or contracts under this section
20 or section 330(i), 338A, 338B, 404, or 724, or
21 part B of title VII, the Secretary, acting as ap-
22 propriate through the Deputy Assistant Sec-
23 retary or the Administrator of the Health Re-
24 sources and Services Administration, shall en-
25 sure that such awards are equitably allocated

1 with respect to the various racial and minority
2 populations.

3 “(B) With respect to grants, cooperative
4 agreements, and contracts that are available
5 under the sections specified in subparagraph
6 (A), the Secretary shall—

7 “(i) carry out activities to inform enti-
8 ties, as appropriate, that the entities may
9 be eligible for awards of such assistance;

10 “(ii) provide technical assistance to
11 such entities in the process of preparing
12 and submitting applications for the awards
13 in accordance with the policies of the Sec-
14 retary regarding such application; and

15 “(iii) inform populations, as appro-
16 priate, that members of the populations
17 may be eligible to receive services or other-
18 wise participate in the activities carried out
19 with such awards.

20 “(3) CULTURAL COMPETENCY OF SERVICES.—

21 The Secretary shall ensure that information and
22 services provided pursuant to subsection (b) are pro-
23 vided in the language, educational, and cultural con-
24 text that is most appropriate for the individuals for
25 whom the information and services are intended.

1 “(e) GRANTS AND CONTRACTS REGARDING DU-
2 TIES.—

3 “(1) IN GENERAL.—In carrying out subsection
4 (b), the Deputy Assistant Secretary may make
5 awards of grants, cooperative agreements, and con-
6 tracts to public and nonprofit private entities.

7 “(2) PROCESS FOR MAKING AWARDS.—The
8 Deputy Assistant Secretary shall ensure that grant
9 awards under paragraph (1) are made only on a
10 competitive basis, and that a grant is awarded for
11 a proposal only if the proposal has been rec-
12 ommended for such an award through a process of
13 peer review.

14 “(3) EVALUATION AND DISSEMINATION.—The
15 Deputy Assistant Secretary, directly or through con-
16 tracts with public and private entities, shall provide
17 for evaluations of projects carried out with awards
18 made under paragraph (1) during the preceding 2
19 fiscal years. The report shall be included in the re-
20 port required under subsection (f) for the fiscal year
21 involved.

22 “(f) REPORTS.—

23 “(1) BIENNIAL REPORT.—Not later than Feb-
24 ruary 1 of fiscal year 1999 and of each second year
25 thereafter, the Deputy Assistant Secretary shall sub-

1 mit to the Committee on Commerce of the House of
2 Representatives, and to the Committee on Labor
3 and Human Resources of the Senate, a report de-
4 scribing the activities carried out under this section
5 during the preceding 2 fiscal years and evaluating
6 the extent to which such activities have been effec-
7 tive in improving the health of racial and ethnic mi-
8 nority groups. Each such report shall include the re-
9 ports submitted to the Deputy Assistant Secretary
10 under paragraph (2).

11 “(2) REPORTS OF CERTAIN AGENCIES.—Each
12 fiscal year, the heads of the agencies of the Depart-
13 ment of Health and Human Services shall submit to
14 the Deputy Assistant Secretary a report summariz-
15 ing the minority health activities of each of the re-
16 spective agencies. The report for a fiscal year shall
17 be submitted not later than the date specified by the
18 Deputy Assistant Secretary.

19 “(g) DEFINITION.—For purposes of this section:

20 “(1) The term ‘racial and ethnic minority
21 group’ means American Indians (including Alaska
22 Natives, Eskimos, and Aleuts); Asian Americans and
23 Pacific Islanders; Blacks; and Hispanics.

24 “(2) The term ‘Hispanic’ means individuals
25 whose origin is Mexican, Puerto Rican, Cuban,

1 Central or South American, or any other Spanish-
 2 speaking country.

3 “(h) FUNDING.—For the purpose of carrying out this
 4 section, there are authorized to be appropriated such sums
 5 as may be necessary for each of the fiscal years 1998
 6 through 2002.”.

7 (b) MISCELLANEOUS AMENDMENT.—Section 1707 of
 8 the Public Health Service Act (42 U.S.C. 300u–6) is
 9 amended in the heading for the section by striking “ES-
 10 TABLISHMENT OF”.

11 **SEC. 3. REVISION AND EXTENSION OF PROGRAM FOR OF-**
 12 **FICE OF RESEARCH ON MINORITY HEALTH.**

13 Section 404 of the Public Health Service Act (42
 14 U.S.C. 283b) is amended by striking subsection (b) and
 15 adding after subsection (a) the following subsections:

16 “(b) DUTIES.—

17 “(1) INTERAGENCY COORDINATION REGARDING
 18 MINORITY HEALTH CONDITIONS.—With respect to
 19 minority health conditions, the Director of the Office
 20 shall plan, coordinate, and evaluate research and
 21 other activities conducted or supported by the agen-
 22 cies of the National Institutes of Health, and shall
 23 assist in the administration of section 492B with re-
 24 spect to the inclusion of members of minority groups
 25 as subjects in clinical research. In carrying out the

1 preceding sentence, the Director of the Office shall
2 evaluate the activities of each of such agencies and
3 shall provide for the periodic reevaluation of such ac-
4 tivities.

5 “(2) CONSULTATIONS.—The Director of the Of-
6 fice shall carry out this section (including developing
7 and revising the plan required in subsection (c)) in
8 consultation with the heads of the agencies of the
9 National Institutes of Health, with the advisory
10 councils of the agencies, and with the advisory coun-
11 cil established under subsection (e).

12 “(3) COORDINATION.—The Director of the Of-
13 fice shall act as the primary Federal official with re-
14 sponsibility for overseeing all research on minority
15 health conditions that is conducted or supported by
16 the National Institutes of Health, and—

17 “(A) shall serve to represent minority
18 health programs of the National Institutes of
19 Health at all relevant Executive branch task
20 forces and committees; and

21 “(B) shall maintain communications with
22 all relevant Public Health Service agencies, and
23 with various other departments of the Federal
24 Government, to ensure the timely transmission
25 between the agencies of information concerning

1 advances in research on minority health condi-
2 tions and the clinical treatment of such condi-
3 tions, and to ensure dissemination of such in-
4 formation to affected communities and health
5 care providers.

6 “(c) COMPREHENSIVE PLAN FOR EXPENDITURE OF
7 APPROPRIATIONS.—

8 “(1) IN GENERAL.—Subject to the provisions of
9 this subsection and other applicable law, the Direc-
10 tor of the Office, in carrying out subsection (b),
11 shall—

12 “(A) establish a comprehensive plan for
13 the conduct and support by the National Insti-
14 tutes of Health of activities with respect to mi-
15 nority health conditions, including research on
16 such conditions and the training of individuals
17 to conduct such research (which plan shall be
18 first established under this subparagraph not
19 later than 12 months after the date of the en-
20 actment of the Disadvantaged Minority Health
21 Improvement Amendments Act of 1997);

22 “(B) ensure that the Plan establishes pri-
23 orities among the activities with respect to mi-
24 nority health that such agencies are authorized
25 to carry out;

1 “(C) ensure that the Plan establishes ob-
2 jectives regarding such activities, describes the
3 means for achieving the objectives, and des-
4 ignates the date by which the objectives are ex-
5 pected to be achieved;

6 “(D) ensure that all amounts appropriated
7 for such activities are expended in accordance
8 with the Plan;

9 “(E) review the Plan not less than annu-
10 ally, and revise the Plan as appropriate; and

11 “(F) ensure that the Plan serves as a
12 broad, binding statement of policies regarding
13 such activities of the agencies, but does not re-
14 move the responsibility of the heads of the
15 agencies for the approval of specific programs
16 or projects, or for other details of the daily ad-
17 ministration of such activities, in accordance
18 with the Plan.

19 “(2) CERTAIN COMPONENTS OF PLAN.—With
20 respect to activities of the agencies of the National
21 Institutes of Health that relate to minority health
22 conditions, the Director of the Office shall ensure
23 that the Plan—

24 “(A) provides for basic research;

25 “(B) provides for applied research;

1 “(C) provides for research that is con-
2 ducted by the agencies;

3 “(D) provides for research that is sup-
4 ported by the agencies;

5 “(E) provides for proposals developed pur-
6 suant to solicitations by the agencies and for
7 proposals developed independently of such so-
8 licitations; and

9 “(F) provides for behavioral research and
10 social sciences research.

11 “(d) EQUITY REGARDING VARIOUS GROUPS.—The
12 Director of the Office shall ensure that activities under
13 subsection (b) equitably address all racial and ethnic mi-
14 nority groups.

15 “(e) ADVISORY COMMITTEE.—

16 “(1) ESTABLISHMENT.—In carrying out sub-
17 section (b), the Secretary shall establish an advisory
18 committee to be known as the Advisory Committee
19 on Research on Minority Health (in this subsection
20 referred to as the ‘Advisory Committee’).

21 “(2) COMPOSITION.—

22 “(A) VOTING AND NONVOTING MEM-
23 BERS.—The Advisory Committee shall be com-
24 posed of voting members appointed in accord-
25 ance with subparagraph (B) and the ex officio

1 nonvoting members described in subparagraph
2 (C).

3 “(B) VOTING MEMBERS.—

4 “(i) IN GENERAL.—The Advisory
5 Committee shall include not fewer than 12
6 voting members who are not officers or
7 employees of the Federal Government.
8 Such members shall be appointed from
9 among physicians, practitioners, scientists,
10 consumers and other health professionals,
11 whose clinical practices, research speciali-
12 zation, or professional expertise includes a
13 significant focus on research on minority
14 health or on the barriers that minorities
15 must overcome to participate in clinical
16 trials. The racial and ethnic minority
17 groups shall be equally representative of
18 the minority groups served by the Office.

19 “(ii) APPOINTING OFFICIAL.—Except
20 as provided in clause (iii), the voting mem-
21 bers of the Advisory Committee shall be
22 appointed by the Director of the Office.

23 “(iii) ADDITIONAL APPOINTMENT.—
24 One voting member of the Advisory Com-
25 mittee shall be appointed from among the

1 voting members of the Advisory Committee
2 on Minority Health established under sec-
3 tion 1707(c). The appointment under the
4 preceding sentence shall be made by the
5 Chair of the Advisory Committee under
6 such section, in consultation with the other
7 members of such Advisory Committee.

8 “(C) EX OFFICIO NONVOTING MEMBERS.—

9 The Deputy Assistant Secretary for Minority
10 Health, the Director of the Office, and the di-
11 rectors of each of the national research insti-
12 tutes shall serve as ex officio nonvoting mem-
13 bers of the Advisory Committee (except that
14 any of such directors may designate an official
15 of the institute involved to serve as such mem-
16 ber of the Committee in lieu of the director).

17 “(3) CHAIR.—The Director of the Office shall
18 serve as the chair of the Advisory Committee.

19 “(4) DUTIES.—The Advisory Committee
20 shall—

21 “(A) advise the Director of the Office on
22 appropriate research and training activities to
23 be undertaken by the national research insti-
24 tutes with respect to—

1 “(i) research and training on minority
2 health;

3 “(ii) research and training on racial
4 and ethnic differences in clinical drug
5 trials, including responses to pharma-
6 cological drugs;

7 “(iii) research and training on racial
8 and ethnic differences in disease etiology,
9 course, and treatment; and

10 “(iv) research and training on minor-
11 ity health conditions which require a multi-
12 disciplinary approach;

13 “(B) report to the Director of the Office
14 on such research and training;

15 “(C) provide recommendations to such Di-
16 rector regarding activities of the Office (includ-
17 ing recommendations on priorities in carrying
18 out research described in subparagraph (A));
19 and

20 “(D) assist in monitoring compliance with
21 section 492B regarding the inclusion of minori-
22 ties in clinical research.

23 “(5) BIENNIAL REPORT.—

24 “(A) PREPARATION.—The Advisory Com-
25 mittee shall prepare a biennial report describing

1 the activities of the Committee, including find-
2 ings made by the Committee regarding—

3 “(i) compliance with section 492B;

4 “(ii) the extent of expenditures made
5 for research and training on minority
6 health by the agencies of the National In-
7 stitutes of Health; and

8 “(iii) the level of funding needed for
9 such research and training.

10 “(B) SUBMISSION.—The report required in
11 subparagraph (A) shall be submitted to the Di-
12 rector of NIH for inclusion in the report re-
13 quired in section 403.

14 “(f) REPRESENTATIVES OF MINORITIES AMONG RE-
15 SEARCHERS.—The Secretary, acting through the Assist-
16 ant Secretary for Personnel Administration and in collabo-
17 ration with the Director of the Office, shall determine the
18 extent to which minorities are represented among senior
19 physicians and scientists of the national research insti-
20 tutes and among physicians and scientists conducting re-
21 search with funds provided by such institutes, and as ap-
22 propriate, carry out activities to increase the extent of
23 such representation.

24 “(g) REQUIREMENT REGARDING GRANTS AND CON-
25 TRACTS.—Any award of a grant, cooperative agreement,

1 or contract that the Director of the Office is authorized
2 to make shall be made only on a competitive basis.

3 “(h) MINORITY HEALTH INITIATIVE.—With respect
4 to the program that was being conducted through the Of-
5 fice as of May 1997 and was known as the Minority
6 Health Initiative, the Director of NIH, in collaboration
7 with the Director of the Office, shall—

8 “(1) provide for the continuation of the pro-
9 gram;

10 “(2) provide for expanding the scope of the pro-
11 gram by establishing timetables with benchmarks
12 pertaining to the dual goals of research and train-
13 ing; and

14 “(3) prepare biennial reports on the program
15 and submit the reports to the Director of NIH for
16 inclusion in the biennial reports required in section
17 403.

18 “(i) DEFINITIONS.—For purposes of this part:

19 “(1) The term ‘minority health conditions’, with
20 respect to individuals who are members of racial and
21 ethnic minority groups, means all diseases, dis-
22 orders, and conditions (including with respect to
23 mental health)—

24 “(A) unique to, more serious, or more
25 prevalent in such individuals;

1 “(B) for which the factors of medical risk
2 or types of medical intervention are different
3 for such individuals, or for which it is unknown
4 whether such factors or types are different for
5 such individuals; or

6 “(C) with respect to which there has been
7 insufficient research involving such individuals
8 as subjects or insufficient data on such individ-
9 uals.

10 “(2) The term ‘research on minority health’
11 means research on minority health conditions, in-
12 cluding research on preventing such conditions.

13 “(3) The term ‘racial and ethnic minority
14 group’ has the meaning given such term in section
15 1707(g).

16 “(j) FUNDING.—

17 “(1) IN GENERAL.—For the purpose of carry-
18 ing out this section, there are authorized to be ap-
19 propriated such sums as may be necessary for each
20 of the fiscal years 1998 through 2002.

21 “(2) MINORITY HEALTH INITIATIVE.—For the
22 purpose of carrying out subsection (h), there are au-
23 thorized to be appropriated such sums as may be
24 necessary for each of the fiscal years 1998 through
25 2002. Such authorization is in addition to the au-

1 thorization of appropriations established in para-
2 graph (1) with respect to such purpose.”.

3 **SEC. 4. OTHER PROGRAMS REGARDING MINORITY HEALTH.**

4 (a) COLLECTION OF HEALTH DATA.—Section 306(n)
5 of the Public Health Service Act (42 U.S.C. 242k(n)) is
6 amended—

7 (1) in paragraph (1), by striking “1998” and
8 inserting “2002”; and

9 (2) in paragraph (2), in the first sentence—

10 (A) by striking “and” after “1993,”; and

11 (B) by striking “for each of the fiscal
12 years 1994 through 1998” and inserting the
13 following: “for fiscal year 1997, and such sums
14 as may be necessary for each of the fiscal years
15 1998 through 2002”.

16 (b) GRANTS TO STATES FOR LOAN REPAYMENT PRO-
17 GRAMS.—Section 338L(l)(1) of the Public Health Service
18 Act (42 U.S.C. 254t(l)(1)) is amended—

19 (1) by striking “is authorized” and inserting
20 “are authorized”; and

21 (2) by inserting before the period the following:
22 “, and such sums as may be necessary for each of
23 the fiscal years 1998 through 2002”.

1 (c) STUDENT LOAN FUNDS.—Section 724(f)(1) of
2 the Public Health Service Act (42 U.S.C. 292t(f)(1)) is
3 amended—

4 (1) by striking “is authorized” and inserting
5 “are authorized”; and

6 (2) by inserting before the period the following:
7 “, and such sums as may be necessary for each of
8 the fiscal years 1998 through 2002”.

9 (d) STUDENTS OF EXCEPTIONAL FINANCIAL
10 NEED.—Section 736(c) of the Public Health Service Act
11 (42 U.S.C. 293(c)) is amended—

12 (1) by striking “is authorized” and inserting
13 “are authorized”; and

14 (2) by inserting before the period the following:
15 “, and such sums as may be necessary for each of
16 the fiscal years 1998 through 2002”.

17 (e) SCHOLARSHIPS GENERALLY; OTHER PUR-
18 POSES.—Section 737(h)(1) of the Public Health Service
19 Act (42 U.S.C. 293a(h)(1)) is amended by inserting before
20 the period the following: “and for each of the fiscal years
21 1998 through 2002”.

22 (f) LOAN REPAYMENTS AND FELLOWSHIPS REGARD-
23 ING FACULTY POSITIONS.—Section 738(c) of the Public
24 Health Service Act (42 U.S.C. 293b(c)) is amended—

1 (1) by striking “is authorized” and inserting
2 “are authorized”; and

3 (2) by inserting before the period the following:
4 “, and such sums as may be necessary for each of
5 the fiscal years 1998 through 2002”.

6 (g) CENTERS OF EXCELLENCE.—Section 739(i)(1) of
7 the Public Health Service Act (42 U.S.C. 293c(i)(1)) is
8 amended by inserting before the period the following: “and
9 for each of the fiscal years 1998 through 2002”.

10 (h) EDUCATIONAL ASSISTANCE REGARDING UNDER-
11 GRADUATES.—Section 740(d)(1) of the Public Health
12 Service Act (42 U.S.C. 293d(d)(1)) is amended—

13 (1) by striking “is authorized” and inserting
14 “are authorized”; and

15 (2) by inserting before the period the following:
16 “, and such sums as may be necessary for each of
17 the fiscal years 1998 through 2002”.

18 (i) RESEARCH ON CERTAIN HEALTH PROFESSIONS
19 ISSUES.—Section 781(e) of the Public Health Service Act
20 (42 U.S.C. 295(e)) is amended—

21 (1) by striking “is authorized” and inserting
22 “are authorized”; and

23 (2) by inserting before the period the following:
24 “, and such sums as may be necessary for each of
25 the fiscal years 1998 through 2002”.

1 (j) TECHNICAL CORRECTION.—Section 487E(a)(3)
 2 of the Public Health Service Act (42 U.S.C. 288–5(a)(3))
 3 is amended by striking “Except” and all that follows and
 4 inserting the following: “With respect to the National
 5 Health Service Corps Loan Repayment Program estab-
 6 lished in subpart III of part D of title III, the provisions
 7 of such subpart shall, except as inconsistent with this sec-
 8 tion, apply to the program established in paragraph (1)
 9 of this subsection in the same manner and to the same
 10 extent as such provisions apply to the National Health
 11 Service Corps Loan Repayment Program established in
 12 such subpart.”.

13 **SEC. 5. NATIONAL CONFERENCE ON DISADVANTAGED AND**
 14 **MINORITY HEALTH.**

15 The President, in collaboration with the Secretary of
 16 Health and Human Services, shall during fiscal year 1998
 17 hold a conference on matters relating to the health of indi-
 18 viduals from disadvantaged backgrounds, including racial
 19 and ethnic minorities. Of the amounts appropriated under
 20 the Public Health Service Act for fiscal year 1998, such
 21 Secretary shall, for purposes of holding the conference,
 22 make available such sums as may be necessary.

○