111TH CONGRESS 2D SESSION

H. R. 6110

To amend the Public Health Service Act to reauthorize telehealth and telemedicine grant programs.

IN THE HOUSE OF REPRESENTATIVES

September 14, 2010

Mr. Butterfield introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to reauthorize telehealth and telemedicine grant programs.

- 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 "Telehealth Improve-
- 5 ment and Expansion Act of 2010".
- 6 SEC. 2. REAUTHORIZATION OF TELEHEALTH AND TELE-
- 7 **MEDICINE GRANT PROGRAMS.**
- 8 (a) Telehealth Network and Telehealth Re-
- 9 SOURCE CENTERS GRANT PROGRAMS.—Section 330I (42
- 10 U.S.C. 254c–14) is amended—

1	(1) in subsection (a), by amending paragraph
2	(3) to read as follows:
3	"(3) Frontier community.—The term 'fron-
4	tier community' shall have such meaning as devel-
5	oped by the Secretary, in consultation with the Sec-
6	retary of Agriculture, not later than one year after
7	the date of the enactment of the Telehealth Improve-
8	ment and Expansion Act of 2010.";
9	(2) in subsection (b), by striking ", under sec-
10	tion 301,";
11	(3) in subsection (c)(2), by striking "under sec-
12	tion 301" and inserting "under this section";
13	(4) in subsection (f)(1)(B)(iii)—
14	(A) in subclause (IV), by striking "Local
15	health departments" and inserting "State, local,
16	or tribal health departments";
17	(B) in subclause (VII), by inserting ", in-
18	cluding skilled nursing facilities" before the pe-
19	riod at the end;
20	(C) in subclause (IX), by inserting ", in-
21	cluding community mental health centers or
22	county mental health and public mental health
23	facilities" before the period at the end; and
24	(D) by adding at the end the following:
25	"(XIII) Renal dialysis facilities.";

1	(5) by amending subsection (i) to read as fol-
2	lows:
3	"(i) Preferences.—
4	"(1) Telehealth Networks.—In awarding
5	grants under subsection (d)(1) for projects involving
6	telehealth networks, the Secretary shall give pref-
7	erence to eligible entities meeting at least one of the
8	following:
9	"(A) Network.—The eligible entity is a
10	health care provider in, or proposing to form, a
11	health care network that furnishes services in a
12	medically underserved area or a health profes-
13	sional shortage area.
14	"(B) Broad Geographic Coverage.—
15	The eligible entity demonstrates broad geo-
16	graphic coverage in the rural or medically un-
17	derserved areas of the State or States in which
18	the entity is located.
19	"(C) Linkages.—The eligible entity dem-
20	onstrates its ability to use the grant to establish
21	or develop plans for telehealth systems that will
22	link rural hospitals and rural health care pro-
23	viders to other hospitals, health care providers,

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and patients.

1	"(D) Efficiency.—The eligible entity
2	demonstrates its ability to use the grant to pro-
3	mote greater efficiency in the use of health care
4	resources.
5	"(E) Viability.—The eligible entity dem-
6	onstrates the long-term viability of projects
7	through—
8	"(i) availability of non-Federal fund-
9	ing sources; and
10	"(ii) institutional and community sup-
11	port for the telehealth network.
12	"(F) Services.—The eligible entity pro-
13	vides a plan for coordinating system use by eli-
14	gible entities and prioritizes use of grant funds
15	for health care services over nonclinical uses.
16	"(2) Telehealth resource centers.—In
17	awarding grants under subsection (d)(2) for projects
18	involving telehealth resource centers, the Secretary
19	shall give preference to eligible entities meeting at
20	least one of the following:
21	"(A) Provision of a broad range of
22	SERVICES.—The eligible entity has a record of
23	success in the provision of a broad range of
24	telehealth services to medically underserved
25	areas or populations.

1	"(B) Provision of Telehealth Tech-
2	NICAL ASSISTANCE.—The eligible entity has a
3	record of success in the provision of technical
4	assistance to providers serving medically under-
5	served areas or populations in the establishment
6	and implementation of telehealth services.
7	"(C) COLLABORATION AND SHARING OF
8	EXPERTISE.—The eligible entity has a dem-
9	onstrated record of collaborating and sharing
10	expertise with providers of telehealth services at
11	the national, regional, State, and local levels.";
12	(6) in subsection (j)(2)(B), by striking "such
13	projects for fiscal year 2001" and all that follows
14	through the period and inserting "such projects for
15	fiscal year 2010.";
16	(7) in subsection $(k)(1)$ —
17	(A) in subparagraph (E)(i), by striking
18	"transmission of medical data" and inserting
19	"transmission and electronic archival of medical
20	data''; and
21	(B) by amending subparagraph (F) to read
22	as follows:
23	"(F) developing projects to use telehealth
24	technology to—

1	"(i) facilitate collaboration between
2	health care providers;
3	"(ii) promote telenursing services; or
4	"(iii) promote patient understanding
5	and adherence to national guidelines for
6	chronic disease and self-management of
7	such conditions;";
8	(8) in subsection (n), by inserting "and mini-
9	mize duplication" before the period at the end;
10	(9) in subsection (q), by striking "Not later
11	than September 30, 2005" and inserting "Not later
12	than 1 year after the date of the enactment of the
13	Telehealth Improvement and Expansion Act of
14	2010, and annually thereafter";
15	(10) by striking subsection (r);
16	(11) by redesignating subsection (s) as sub-
17	section (r); and
18	(12) in subsection (r) (as so redesignated)—
19	(A) in paragraph (1)—
20	(i) by striking "and" before "such
21	sums"; and
22	(ii) by inserting ", \$10,000,000 for
23	each of the fiscal years 2012 through
24	2016" before the semicolon; and
25	(B) in paragraph (2)—

1	(i) by striking "and" before "such
2	sums"; and
3	(ii) by inserting ", \$10,000,000 for
4	each of the fiscal years 2012 through
5	2016" before the period.
6	(b) Telemedicine; Incentive Grants Regarding
7	COORDINATION AMONG STATES.—Subsection (b) of sec-
8	tion 330L (42 U.S.C. $254c-18$) is amended by inserting
9	", $$10,000,000$ for each of the fiscal years 2012 through
0	2016" before the period at the end

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