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113TH CONGRESS
2D SESSION

# H. R. 5223

To amend the Public Health Service Act to authorize grants to States for the purpose of assisting the States in operating an RDOCS program in order to provide for the increased availability of primary health care services in health professional shortage areas.

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IN THE HOUSE OF REPRESENTATIVES

JULY 28, 2014

Mr. MCDERMOTT 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 authorize grants to States for the purpose of assisting the States in operating an RDOCS program in order to provide for the increased availability of primary health care services in health professional shortage areas.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the ''Restoring the Doctors of Our Country through Scholarships Act of 2014'' or the ''RDOCS Act of 2014''.

**SEC. 2. FINDINGS.**

The Congress finds the following:

(1) Due to an aging population, the retirement of a generation of physicians, and 30,000,000 newly insured under the Patient Protection and Affordable Care Act (Public Law 110–148), the United States is expected to experience an acute physician workforce shortage in the coming decades, particularly in primary care. If unaddressed, this shortage will compromise the health of the population as well as the ability of the United States to remain competitive in the world.

(2) By 2020, the shortage of primary care doctors is expected to reach 45,000.

(3) The shortage will disproportionately impact rural communities and underserved urban communities.

(4) The Reserve Officers' Training Corps (ROTC) model of education and training is a respected and effective way of meeting the Nation's need for educated and trained officers in the United States Armed Forces, and can be applied to solving the Nation's primary care shortage.

(5) There are 10 applicants for each National Health Service Corps scholarship awarded, indicating the unmet demand for medical scholarships.

**SEC. 3. GRANTS TO STATES FOR RESTORING THE DOCTORS OF OUR COUNTRY THROUGH SCHOLARSHIPS (RDOCS) PROGRAMS.**

Subpart III of part D of title III of the Public Health Service Act (42 U.S.C. 254l et seq.) is amended by adding at the end the following:

**"SEC. 338N. GRANTS TO STATES FOR SCHOLARSHIP PROGRAMS.**

''(a) GRANTS TO STATES.—

''(1) IN GENERAL.—The Secretary, acting through the Administrator of the Health Resources and Services Administration, shall make grants to States for the purpose of assisting the States in operating a program described in paragraph (2) (referred to in this section as an 'RDOCS program') in order to provide for the increased availability of primary health care services in health professional shortage areas.

''(2) APPLICATIONS.—To seek a grant under this section, a State shall submit an application in such form, in such manner, and containing such agreements, assurances, and information as the Secretary determines to be necessary to carry out this section.

''(3) TOTAL NUMBER OF NEW RDOCS SCHOLARS EACH YEAR.—Subject to the availability of appro-

priations, the Secretary shall ensure that a total of at least 4,000 new RDOCS scholars are awarded scholarships under this section each academic year.

''(b) SCHOLARSHIP PROGRAM DESCRIBED.—An RDOCS program is a program of entering into contracts between the State involved and an RDOCS scholar under which—

''(1) the State involved agrees—

''(A) to pay all tuition and costs for the RDOCS scholar's undergraduate medical education, to the participating undergraduate medical program, for a period of study not exceeding 48 consecutive months; and

''(B) to pay, during such period, a cost-of-living stipend, in an amount to be determined by the Secretary, to the RDOCS scholar; and

''(2) the RDOCS scholar agrees—

''(A) to be admitted into and maintain enrollment in a participating undergraduate medical program in the RDOCS scholar's State of residence (or if such State of residence operates no such program, in a participating undergraduate medical program in a State within an associated region);

''(B) when enrolled in such program, to maintain a minimum level (to be determined by the Secretary) of academic standing;

''(C) to complete an accredited residency training program in a primary care specialty;

''(D) to become licensed to practice medicine in the applicant's State of residence;

''(E) to receive and maintain board certification in a primary care speciality; and

''(F) to complete a 5-year post-graduate period of service in a health professional shortage area.

''(c) PRIORITY IN AWARDING SCHOLARSHIPS.—In selecting RDOCS scholars and awarding scholarship contracts described in subsection (b), the State involved shall give preference to applicants who are enrolled in—

''(1) an accelerated track family-medicine program; or

''(2) a program that includes clinical training in rural or underserved urban communities.

''(d) DIRECT ADMINISTRATION BY STATE AGENCY.—The RDOCS program of any State receiving a grant under this section shall be administered directly by a State agency.

''(e) REQUIREMENT OF MATCHING FUNDS.—

''(1) IN GENERAL.—Any State receiving a grant under this section shall, with respect to the costs of making payments on behalf of individuals under scholarship contracts described in subsection (b), make available (directly or through donations from public or private entities) non-Federal contributions in cash toward such costs in an amount equal to not less than $1 for each $9 of Federal funds provided through the grant.

''(2) DETERMINATION OF AMOUNT OF NON-FEDERAL CONTRIBUTION.—In determining the amount of non-Federal contributions in cash that a State has provided pursuant to paragraph (1)—

''(A) any amounts provided to the State by the Federal Government shall not be included; and

''(B) any amounts expended by the State as administrative funds to operate its RDOCS program may, at the State's discretion, be included.

''(f) COORDINATION WITH FEDERAL PROGRAM.—

''(1) ASSIGNMENTS FOR HEALTH PROFESSIONAL SHORTAGE AREAS UNDER FEDERAL PROGRAM.—Any State receiving a grant under this section shall, in carrying out its RDOCS program, as-

sign RDOCS officers participating in the program only to public and nonprofit private entities located in and providing health services in health professional shortage areas.

''(2) REMEDIES FOR BREACH OF CONTRACTS.—The Secretary may not make a grant under subsection (a) unless the State involved agrees that the scholarship contracts provided by the State pursuant to subsection (b) will provide remedies for any breach of the contracts by the RDOCS scholars and RDOCS officers involved.

''(3) LIMITATION REGARDING CONTRACT INDUCEMENTS.—Any State receiving a grant under this section shall ensure that contracts between the State and RDOCS scholars under this section do not include any terms more favorable to the RDOCS scholars than the most favorable terms which the Secretary is authorized to provide in contracts under the National Health Service Corps Scholarship Program under section 338A, including terms regarding the availability of remedies for any breach of the contracts by the health professionals involved.

''(g) RESTRICTIONS ON USE OF FUNDS.—Any State receiving a grant under this section shall not expend the grant funds for any purpose other than making payments

on behalf of or to RDOCS scholars under contracts entered into pursuant to this section.

''(h) REPORTS BY STATES.—Any State receiving a grant under this section shall submit to the Secretary—

''(1) a report on the State's RDOCS program not later than January 10 of each fiscal year immediately following any fiscal year for which the State has received such a grant; and

''(2) such other reports regarding the State's RDOCS program, as are determined to be appropriate by the Secretary.

''(i) REPORTS BY SECRETARY.—The Secretary shall report annually to the relevant committees on the physician workforce in the United States, and shall include in each such report—

''(1) data on the physician shortage, if any, disaggregated by State and region; and

''(2) a gap analysis of the primary care practitioners needed in each State and region, and 5- and 10-year estimates of the funding needed to close the gap through the RDOCS program.

''(j) NONCOMPLIANCE.—

''(1) IN GENERAL.—The Secretary may not make payments under this section to a State for any fiscal year subsequent to the first fiscal year of such

payments unless the Secretary determines that, for the immediately preceding fiscal year, the State has complied with each of the agreements made by the State under this section.

''(2) REDUCTION IN GRANT RELATIVE TO NUMBER OF BREACHED CONTRACTS.—

''(A) DETERMINATION OF NUMBER OF BREACHED CONTRACTS.—Before making a grant under this section to a State for a fiscal year, the Secretary shall determine the number of contracts provided pursuant to the State's RDOCS program with respect to which there has been an initial breach by the RDOCS scholars or officers involved during the fiscal year preceding the fiscal year for which the State is applying to receive the grant.

''(B) REDUCTION OF GRANTS.—Subject to paragraph (3), in the case of a State with 1 or more initial breaches for purposes of subparagraph (A), the Secretary shall reduce the amount of a grant under this section to the State for the fiscal year involved by an amount equal to the sum of—

''(i) the expenditures of Federal funds made regarding the contracts involved; and

''(ii) an amount representing interest on the amount of such expenditures, determined with respect to each contract on the basis of the maximum legal rate prevailing for loans made during the time amounts were paid under the contract, as determined by the Treasurer of the United States.

''(3) WAIVER REGARDING REDUCTION IN GRANT.—The Secretary may waive the requirement of paragraph (2)(B) with respect to the initial breach of a contract if the Secretary determines that such breach by the RDOCS scholar or officer involved was attributable solely to the professional having a serious illness.

''(k) DEFINITIONS.—For the purposes of this section:

''(1) ACCELERATED TRACK FAMILY-MEDICINE PROGRAM.—The term 'accelerated track family-medicine program' refers to an appropriately accredited, integrated course of study in which a candidate can complete undergraduate medical education and graduate medical education in 6 years.

''(2) ASSOCIATED REGION.—The term 'associated region' refers to—

"(A) the area encompassing the boundaries of Washington, Wyoming, Alaska, Montana, and Idaho;

"(B) the area encompassing the boundaries of Maine, New Hampshire, Massachusetts, Rhode Island, Connecticut, and Vermont;

"(C) the area encompassing the boundaries of Delaware and Pennsylvania; or

"(D) the area encompassing the boundaries of Maryland, the District of Columbia, and Virginia.

"(3) BOARD CERTIFICATION.—The term 'board certification' means a certification to practice medicine in a specialty, by an appropriate medical specialty board.

"(4) HEALTH PROFESSIONAL SHORTAGE AREA.—The term 'health professional shortage area' means a health professional shortage area designated under section 332.

"(5) PARTICIPATING UNDERGRADUATE MEDICAL PROGRAM.—The term 'participating undergraduate medical program' means an allopathic or osteopathic undergraduate medical program operated by a State.

''(6) PRIMARY CARE SPECIALTY.—The term 'primary care specialty' means pediatrics, geriatric, gerontology, family medicine, or general internal medicine.

''(7) RDOCS OFFICER.—The term 'RDOCS officer' means an RDOCS program participant who has completed undergraduate medical training, but has not yet fulfilled the remaining requirements of his or her scholarship contract under subsection (b).

''(8) RDOCS SCHOLAR.—The term 'RDOCS scholar' means an individual participating in an RDOCS program pursuant to a scholarship contract under subsection (b), who has not yet completed undergraduate medical education.

''(9) RELEVANT COMMITTEES.—The term 'relevant committees' means the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.

''(10) STATE.—The term 'State' means each of the 50 States and the District of Columbia.''.

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