

114TH CONGRESS
1ST SESSION

H. R. 4153

To amend the Public Health Service Act to establish a pilot program to test the impact of early intervention on the prevention, management, and course of eating disorders.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 2, 2015

Mrs. ELLMERS of North Carolina (for herself, Ms. CLARKE of New York, Ms. CASTOR of Florida, Ms. ROS-LEHTINEN, and Mrs. LOWEY) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to establish a pilot program to test the impact of early intervention on the prevention, management, and course of eating disorders.

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 “Educating to Prevent
5 Eating Disorders Act of 2015”.

1 **SEC. 2. PILOT PROGRAM TO TEST IMPACT OF EARLY**
2 **INTERVENTION ON EATING DISORDERS.**

3 Part P of title III of the Public Health Service Act
4 (42 U.S.C. 280g et seq.) is amended by adding at the end
5 the following new section:

6 **“SEC. 399V-6. PILOT PROGRAM TO TEST IMPACT OF EARLY**
7 **INTERVENTION ON EATING DISORDERS.**

8 “(a) IN GENERAL.—The Secretary, through the Di-
9 rector of the Agency for Healthcare Research and Quality,
10 may establish a pilot program, for a period of three con-
11 secutive school years, to test the impact of providing stu-
12 dents in eligible schools with interventions to prevent,
13 identify, intervene, and manage eating disorders.

14 “(b) GRANTS.—

15 “(1) IN GENERAL.—Under such pilot program,
16 the Secretary shall award grants to eligible schools.
17 Each such grant shall be for the period of the pilot
18 program.

19 “(2) USES.—Each eligible school receiving a
20 grant under the pilot program shall use such grant
21 to—

22 “(A) develop best practices, in accordance,
23 as appropriate, with input from research ex-
24 perts in the eating disorders field, for eligible
25 health care providers to assess and recognize

1 students with eating disorders and to respond
2 appropriately;

3 “(B) hire an eligible health care provider
4 to—

5 “(i) in accordance with the best prac-
6 tices developed pursuant to subparagraph
7 (A), assess and recognize whether students
8 in grades 6 through 8 attending such
9 school have eating disorders and respond
10 appropriately to individuals with eating
11 disorders among students attending such
12 school, including by providing counsel and
13 by referral;

14 “(ii) provide educational information
15 and seminars, developed in partnership
16 with research experts in the field of eating
17 disorders, to teachers at such school and
18 parents of students attending such school
19 to assist such teachers and parents in rec-
20 ognizing the symptoms of eating disorders
21 and understanding how to seek help and
22 intervention; and

23 “(iii) otherwise serve as a full-time
24 health care provider for such school.

1 “(c) ELIGIBLE SCHOOL.—For purposes of this sec-
2 tion, the term ‘eligible school’ means a public or private
3 school that—

4 “(1) serves students in grades 6 through 8;

5 “(2) submits to the Secretary, through the Di-
6 rector of the Agency for Healthcare Research and
7 Quality, an application to participate in the pilot
8 program, containing such information as specified by
9 the Secretary, through the Director;

10 “(3) is assessed as having a need for a school
11 nurse trained in assessing students to recognize and
12 respond to eating disorders; and

13 “(4) is selected by the Secretary, through the
14 Director of the Agency for Healthcare Research and
15 Quality, in a manner such that schools are selected
16 in each of the regions served by a regional office of
17 the Department of Health and Human Services.

18 “(d) ELIGIBLE HEALTH CARE PROVIDER.—For pur-
19 poses of this section, the term ‘eligible health care pro-
20 vider’ means a health care provider, including a guidance
21 counselor, who received a degree or training within a field
22 of health, including mental health or counseling.

23 “(e) REPORTS.—

24 “(1) IN GENERAL.—Not later than 6 months
25 after the last day of the pilot program, each eligible

1 school participating in the pilot program shall sub-
2 mit to the Secretary of Health and Human Services
3 a report evaluating the process and the outcomes of
4 the pilot program, with respect to such school, dur-
5 ing the period of the program. Each such report,
6 with respect to an eligible school, shall include at
7 least the following:

8 “(A) The number of students assessed
9 under the pilot program at such school, pre-
10 sented by age, sex, and ethnicity.

11 “(B) The number of students identified
12 under the pilot program at such school during
13 such program as potentially in need of referral
14 and counseling, the number of such students
15 that participated in counseling and follow-up re-
16 ferrals, and the number of such students who
17 showed improvement based on follow up assess-
18 ments.

19 “(C) The number of educational seminars
20 described in subsection (b)(2)(B) provided
21 under the pilot program at such school, pre-
22 sented by categories of parents and teachers.

23 “(D) The number of parents and teachers
24 that indicated they needed more information or

1 assistance in responding to a potential problem
2 relating to eating disorders.

3 “(E) An evaluation of best practices which
4 worked best for the student population of the
5 eligible school.

6 “(2) POSTING ON AHRQ WEBSITE.—Not later
7 than 12 months after the last day of the pilot pro-
8 gram, the Secretary shall post on the public Internet
9 website of the Agency for Healthcare Research and
10 Quality aggregate information on the pilot program
11 described in subparagraphs (A) through (D) of para-
12 graph (1) based on the information submitted under
13 such paragraph.

14 “(f) NO ADDITIONAL AUTHORIZATION OF APPRO-
15 PRIATIONS.—Amounts otherwise made available to the
16 Centers for Disease Control and Prevention for purposes
17 of surveillance activities shall be made available to carry
18 out this section. No amounts other than those made avail-
19 able pursuant to the previous sentence are authorized for
20 appropriation to carry out this section.”.

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