

COMMITTEE ON ENERGY AND COMMERCE -- 111TH CONGRESS
ROLL CALL VOTE #

BILL: H.R. 3200, American's Affordable Health Choices Act of 2009

AMENDMENT: Sutton 17 - 001 [Christensen]

DISPOSITION: 36 yeas - 23 nays

REPRESENTATIVE	YEAS	NAYS	PRESENT	REPRESENTATIVE	YEAS	NAYS	PRESENT
Mr. Waxman	✓			Mr. Barton		✓	
Mr. Dingell	✓			Mr. Hall		✓	
Mr. Markey	✓			Mr. Upton		✓	
Mr. Boucher	✓			Mr. Stearns		✓	
Mr. Pallone	✓			Mr. Deal		✓	
Mr. Gordon	✓			Mr. Whitfield		✓	
Mr. Rush	✓			Mr. Shimkus		✓	
Ms. Eshoo	✓			Mr. Shadegg		✓	
Mr. Stupak	✓			Mr. Blunt		✓	
Mr. Engel	✓			Mr. Buyer		✓	
Mr. Green	✓			Mr. Radanovich		✓	
Ms. DeGette	✓			Mr. Pitts		✓	
Ms. Capps	✓			Ms. Bono Mack		✓	
Mr. Doyle	✓			Mr. Walden		✓	
Ms. Harman	✓			Mr. Terry		✓	
Ms. Schakowsky	✓			Mr. Rogers		✓	
Mr. Gonzalez	✓			Ms. Myrick		✓	
Mr. Inslee	✓			Mr. Sullivan		✓	
Ms. Baldwin	✓			Mr. Murphy (PA)		✓	
Mr. Ross	✓			Mr. Burgess		✓	
Mr. Weiner	✓			Ms. Blackburn		✓	
Mr. Matheson	✓			Mr. Gingrey		✓	
Mr. Butterfield	✓			Mr. Scalise		✓	
Mr. Melancon	✓						
Mr. Barrow	✓						
Mr. Hill	✓						
Ms. Matsui	✓						
Ms. Christensen	✓						
Ms. Castor	✓						
Mr. Sarbanes	✓						
Mr. Murphy (CT)	✓						
Mr. Space	✓						
Mr. McNerney	✓						
Ms. Sutton	✓						
Mr. Braley	✓						
Mr. Welch	✓						

Friday 8:00 am
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AMENDMENT

OFFERED BY MRS. CHRISTENSEN OF VIRGIN

ISLANDS AND MS. SUTTON OF OHIO

AINS-EC_001

After section 2301 insert the following new section:

1 **SEC. 2302. GRANTS TO PROMOTE POSITIVE HEALTH BEHAV-**
2 **IORS AND OUTCOMES.**

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:

6 **“SEC. 399V. GRANTS TO PROMOTE POSITIVE HEALTH BE-**
7 **HAVIORS AND OUTCOMES.**

8 **“(a) GRANTS AUTHORIZED.—**The Secretary, in col-
9 laboration with the Director of the Centers for Disease
10 Control and Prevention and other Federal officials deter-
11 mined appropriate by the Secretary, is authorized to
12 award grants to eligible entities to promote positive health
13 behaviors for populations in medically underserved com-
14 munities through the use of community health workers.

15 **“(b) USE OF FUNDS.—**Grants awarded under sub-
16 section (a) shall be used to support community health
17 workers—

1 “(1) to educate, guide, and provide outreach in
2 a community setting regarding health problems prev-
3 alent in medically underserved communities, espe-
4 cially racial and ethnic minority populations;

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5 “(2) to educate, guide, and provide experiential
6 learning opportunities that target behavioral risk
7 factors including—

8 “(A) poor nutrition;

9 “(B) physical inactivity;

10 “(C) being overweight or obese;

11 “(D) tobacco use;

12 “(E) alcohol and substance use;

13 “(F) injury and violence;

14 “(G) risky sexual behavior;

15 “(H) untreated mental health problems;

16 “(I) untreated dental and oral health prob-
17 lems; and

18 “(J) understanding informed consent;

19 “(3) to educate and provide guidance regarding
20 effective strategies to promote positive health behav-
21 iors within the family;

22 “(4) to educate and provide outreach regarding
23 enrollment in health insurance including the State
24 Children’s Health Insurance Program under title
25 XXI of the Social Security Act, Medicare under title

1 XVIII of such Act and Medicaid under title XIX of
2 such Act;

3 “(5) to educate and refer underserved popu-
4 lations to appropriate healthcare agencies and com-
5 munity-based programs and organizations in order
6 to increase access to quality healthcare services, in-
7 cluding preventive health services, and to eliminate
8 duplicative care; or

9 “(6) to educate, guide, and provide home visita-
10 tion services regarding maternal health and prenatal
11 care.

12 “(c) APPLICATION.—

13 “(1) IN GENERAL.—Each eligible entity that
14 desires to receive a grant under subsection (a) shall
15 submit an application to the Secretary, at such time,
16 in such manner, and accompanied by such informa-
17 tion as the Secretary may require.

18 “(2) CONTENTS.—Each application submitted
19 pursuant to paragraph (1) shall—

20 “(A) describe the activities for which as-
21 sistance is sought under this section;

22 “(B) contain an assurance that, with re-
23 spect to each community health worker pro-
24 gram receiving funds under the grant, such pro-
25 gram will provide training and supervision to

1 community health workers to enable such work-
2 ers to provide authorized program services;

3 “(C) contain an assurance that the appli-
4 cant will evaluate the effectiveness of commu-
5 nity health worker programs receiving funds
6 under the grant;

7 “(D) contain an assurance that each com-
8 munity health worker program receiving funds
9 under the grant will provide services in the cul-
10 tural context most appropriate for the individ-
11 uals served by the program;

12 “(E) contain a plan to document and dis-
13 seminate project descriptions and results to
14 other States and organizations as identified by
15 the Secretary; and

16 “(F) describe plans to enhance the capae-
17 ity of individuals to utilize health services and
18 health-related social services under Federal,
19 State, and local programs by—

20 “(i) assisting individuals in estab-
21 lishing eligibility under the programs and
22 in receiving the services or other benefits
23 of the programs; and

24 “(ii) providing other services as the
25 Secretary determines to be appropriate,

1 that may include transportation and trans-
2 lation services.

3 “(d) PRIORITY.—In awarding grants under sub-
4 section (a), the Secretary shall give priority to applicants
5 that—

6 “(1) propose to target geographic areas—

7 “(A) with a high percentage of residents
8 who are eligible for health insurance but are
9 uninsured or underinsured;

10 “(B) with a high percentage of residents
11 who suffer from chronic diseases including pul-
12 monary conditions, hypertension, heart disease,
13 mental disorders, diabetes, and asthma; and

14 “(C) with a high infant mortality rate;

15 “(2) have experience in providing health or
16 health-related social services to individuals who are
17 underserved with respect to such services; and

18 “(3) have documented community activity and
19 experience with community health workers.

20 “(e) COLLABORATION WITH ACADEMIC INSTITU-
21 TIONS.—The Secretary shall encourage community health
22 worker programs receiving funds under this section to col-
23 laborate with academic institutions, especially those that
24 graduate a disproportionate number of health and health
25 care students from under-represented racial and ethnic

1 minority backgrounds. Nothing in this section shall be
2 construed to require such collaboration.

3 “(f) EVIDENCE-BASED INTERVENTIONS.—The Sec-
4 retary shall encourage community health worker programs
5 receiving funding under this section to implement an out-
6 come-based payment system that rewards community
7 health workers for connecting underserved populations
8 with the most appropriate services at the most appropriate
9 time. Nothing in this section shall be construed to require
10 such payment.

11 “(g) QUALITY ASSURANCE AND COST EFFECTIVE-
12 NESS.—The Secretary shall establish guidelines for assur-
13 ing the quality of the training and supervision of commu-
14 nity health workers under the programs funded under this
15 section and for assuring the cost-effectiveness of such pro-
16 grams.

17 “(h) MONITORING.—The Secretary shall monitor
18 community health worker programs identified in approved
19 applications under this section and shall determine wheth-
20 er such programs are in compliance with the guidelines
21 established under subsection (g).

22 “(i) TECHNICAL ASSISTANCE.—The Secretary may
23 provide technical assistance to community health worker
24 programs identified in approved applications under this

1 section with respect to planning, developing, and operating
2 programs under the grant.

3 “(j) REPORT TO CONGRESS.—

4 “(1) IN GENERAL.—Not later than 4 years
5 after the date on which the Secretary first awards
6 grants under subsection (a), the Secretary shall sub-
7 mit to Congress a report regarding the grant
8 project.

9 “(2) CONTENTS.—The report required under
10 paragraph (1) shall include the following:

11 “(A) A description of the programs for
12 which grant funds were used.

13 “(B) The number of individuals served
14 under such programs.

15 “(C) An evaluation of—

16 “(i) the effectiveness of such pro-
17 grams;

18 “(ii) the cost of such programs; and

19 “(iii) the impact of the programs on
20 the health outcomes of the community resi-
21 dents.

22 “(D) Recommendations for sustaining the
23 community health worker programs developed
24 or assisted under this section.

1 “(E) Recommendations regarding training
2 to enhance career opportunities for community
3 health workers.

4 “(k) DEFINITIONS.—In this section:

5 “(1) COMMUNITY HEALTH WORKER.—The term
6 ‘community health worker’ means an individual who
7 promotes health or nutrition within the community
8 in which the individual resides—

9 “(A) by serving as a liaison between com-
10 munities and healthcare agencies;

11 “(B) by providing guidance and social as-
12 sistance to community residents;

13 “(C) by enhancing community residents’
14 ability to effectively communicate with
15 healthcare providers;

16 “(D) by providing culturally and linguis-
17 tically appropriate health or nutrition edu-
18 cation;

19 “(E) by advocating for individual and com-
20 munity health, including oral and mental, or
21 nutrition needs; and

22 “(F) by providing referral and follow-up
23 services or otherwise coordinating care.

24 “(2) COMMUNITY SETTING.—The term ‘commu-
25 nity setting’ means a home or a community organi-

1 zation located in the neighborhood in which a partic-
2 ipant resides.

3 “(3) MEDICALLY UNDERSERVED COMMUNITY.—
4 The term ‘medically underserved community’ means
5 a community identified by a State, United States
6 territory or possession, or federally recognized In-
7 dian tribe—

8 “(A) that has a substantial number of im-
9 dividuals who are members of a medically un-
10 derserved population, as defined by section
11 330(b)(3); and

12 “(B) a significant portion of which is a
13 health professional shortage area as designated
14 under section 332.

15 “(4) SUPPORT.—The term ‘support’ means the
16 provision of training, supervision, and materials
17 needed to effectively deliver the services described in
18 subsection (b), reimbursement for services, and
19 other benefits.

20 “(5) ELIGIBLE ENTITY.—The term ‘eligible en-
21 tity’ means a public or nonprofit private entity (in-
22 cluding a State or public subdivision of a State, a
23 public health department, or a federally qualified
24 health center), or a consortium of any of such enti-

1 ties, located in the United States or territory there-
2 of.

3 “(I) AUTHORIZATION OF APPROPRIATIONS.—There
4 are authorized to be appropriated to carry out this section
5 \$30,000,000 for each of fiscal years 2010, 2011, 2012,
6 2013, and 2014.”

