AUTHENTICATED
U.S. GOVERNMENT
INFORMATION
GPO

I

112TH CONGRESS
2D SESSION

H. R. 5888

To establish a demonstration program to facilitate physician reentry into clinical practice to provide required primary health services.

IN THE HOUSE OF REPRESENTATIVES

JUNE 1, 2012

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

---

A BILL

To establish a demonstration program to facilitate physician reentry into clinical practice to provide required primary health services.

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 ''Physician Reentry Demonstration Program Act''.

SEC. 2. FINDINGS.

Congress finds as follows:

(1) According to the American Academy of Family Physicians, the shortage of primary care physicians will reach 40,000 in the next 10 years, as

medical schools send about half of the needed number of graduates into primary care medicine.

(2) According to the Association of American Medical Colleges, the overall shortage of physicians in the United States is expected to grow to nearly 160,000 by 2025.

(3) Medical schools in the United States train only approximately 20,000 new physicians every year.

(4) The Department of Health and Human Services estimates that the United States needs at least 16,000 more primary care physicians.

(5) According to a survey of 1,600 pediatricians over the age of 50 conducted by the Association of American Medical Colleges and the American Academy of Pediatrics, 22 percent of female pediatricians took extended leave (6 months or more) from medicine, compared to only 6.5 percent of male pediatricians. Seventy-one percent of the female pediatricians who took extended leave did so to care for a child or family member.

SEC. 3. REENTRY PROGRAM FOR PHYSICIANS.

(a) ACTIVITIES OF THE SECRETARY.—

(1) ESTABLISHMENT OF DEMONSTRATION PROGRAM.—The Secretary of Health and Human Serv-

ices (referred to in this section as the ''Secretary'') shall establish a demonstration program to assist the development of innovative programs that facilitate physician reentry into clinical practice to provide required primary health services (as defined in section 330(b)(1)(A) of the Public Health Service Act (42 U.S.C. 254b(b)(1)(A)). The Secretary shall award one grant, on a competitive basis, to an eligible entity in each of the 10 regions served by a regional office of the Department of Health and Human Services.

(2) ADMINISTRATIVE ACTIVITIES.—The Secretary shall use not more than 15 percent of the funds appropriated to carry out this section to work with key stakeholders to—

(A) conduct a national needs assessment with regard to the supply of physicians who provide required primary health services, using, to the extent feasible, information collected for use in other similar completed or forthcoming studies, such as studies conducted by the Agency for Healthcare Research and Quality and the Health Resources and Services Administration;

(B) develop a database that contains a directory of programs that help physicians reenter clinical practice;

(C) disseminate evidence-based assessments and evaluation tools to measure the basic core competencies of physicians reentering clinical practice that are consistent with the guidelines published by the Federation of State Medical Boards for such physicians; and

(D) assist State regulatory authorities and hospital credentialing committees to structure requirements for physicians to return to clinical practice in a manner that ensures patient safety while addressing the burdens on such reentering physicians.

(b) ELIGIBLE ENTITIES.—Entities eligible to receive a grant under this section are the following:

(1) A State.

(2) A hospital.

(3) An academic medical center.

(4) A medical school.

(5) A health center (as defined in section 330(a) of the Public Health Service Act (42 U.S.C. 254b(a))).

(6) A non-profit organization with a demonstrated history or expertise in providing physician education and with the ability to offer programs specifically targeted at reentering physicians.

(c) APPLICATION.—In order to receive a grant under this section, an eligible entity shall submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

(d) USES OF FUNDS.—An eligible entity that receives funds under this section shall use such funds to assist reentering physicians who meet the requirements of subsection (e) through any of the following:

(1) Training reentering physicians to reenter clinical practice.

(2) Paying credentialing fees and other fees that are necessary for reentering physicians to reenter clinical practice.

(3) Paying the salaries of reentering physicians.

(4) Providing loan repayment assistance and other financial assistance, including scholarships and grants for education and training, to reentering physicians.

(e) REQUIREMENTS OF PARTICIPANTS.—

(1) SERVICE LOCATIONS.—To be eligible to receive benefits under subsection (d), a reentering phy-

sician who participates in a demonstration program shall provide required primary health services at—

(A) a health center (as defined in section 330(a) of the Public Health Service Act (42 U.S.C. 254b(a)));

(B) a Veterans Administration Medical Center if the Secretary of Veterans Affairs certifies that there is a shortage of physicians at such medical center; or

(C) a school-based health center (as defined in section 2110(c)(9) of the Social Security Act (42 U.S.C. 1397jj(c)(9))).

(2) LENGTH OF SERVICE.—To be eligible to receive benefits under subsection (d), a reentering physician shall work at a location described in paragraph (1) for not less than 2 years.

(f) LIABILITY PROTECTIONS.—A civil action brought against a reentering physician who participates in a demonstration program under this section and works at a location described in subsection (e)(1) for damage for personal injury, including death, resulting from performance of medical, surgical, dental, or related functions by a reentering physician acting within the scope of such reentering physician's participation in a demonstration program, shall be subject to section 224 of the Public Health Service

Act (42 U.S.C. 233) in the same manner as a civil action described in subsection (a) of that section.

(g) ANNUAL REVIEW AND REPORT.—For any year during which the demonstration program under this section is carried out, the Secretary shall conduct a review and comprehensive evaluation of such program and shall prepare and submit to Congress a report assessing such program, including an assessment of the performance of the reentering physicians who participate in such program.

(h) REENTERING PHYSICIAN DEFINED.—In this section, the term ''reentering physician'' means a physician, as defined by section 1861(r)(1) of the Social Security Act (42 U.S.C. 1395x(r)), who previously engaged in clinical practice, and who returns to clinical practice in the discipline in which such person was trained or certified following an extended period (2 years or more) of clinical inactivity after such person voluntarily chose to stop practicing.

(i) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section such sums as may be necessary for fiscal year 2014.

○