

115TH CONGRESS  
1ST SESSION

**S.** \_\_\_\_\_

To provide funding for Federally Qualified Health Centers, the National Health Service Corps, Teaching Health Centers, and the Nurse Practitioner Residency Training program.

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IN THE SENATE OF THE UNITED STATES

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\_\_\_\_\_ introduced the following bill; which was read twice  
and referred to the Committee on \_\_\_\_\_

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## **A BILL**

To provide funding for Federally Qualified Health Centers, the National Health Service Corps, Teaching Health Centers, and the Nurse Practitioner Residency Training program.

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 “Community Health  
5 Center and Primary Care Workforce Expansion Act of  
6 2017”.

1 **SEC. 2. COMMUNITY HEALTH CENTER PROGRAM.**

2 (a) IN GENERAL.—Section 10503(b)(1) of the Pa-  
3 tient Protection and Affordable Care Act (42 U.S.C. 254b-  
4 2(b)(1)) is amended—

5 (1) in subparagraph (D), by striking “and” at  
6 the end;

7 (2) in subparagraph (E), by striking the period;  
8 and

9 (3) by adding at the end the following:

10 “(F) \$5,110,000,000 for fiscal year 2018;

11 “(G) \$5,410,000,000 for fiscal year 2019;

12 “(H) \$5,790,000,000 for fiscal year 2020;

13 “(I) \$6,620,000,000 for fiscal year 2021;

14 “(J) \$7,510,000,000 for fiscal year 2022;

15 “(K) \$8,460,000,000 for fiscal year 2023;

16 “(L) \$9,490,000,000 for fiscal year 2024;

17 “(M) \$10,590,000,000 for fiscal year  
18 2025;

19 “(N) \$11,780,000,000 for fiscal year  
20 2026;

21 “(O) \$12,500,000,000 for fiscal year 2027;

22 and

23 “(P) for fiscal year 2028, and each subse-  
24 quent fiscal year, the amount appropriated for  
25 the preceding fiscal year adjusted by the prod-  
26 uct of—

1                   “(i) one plus the average percentage  
2                   increase in costs incurred per patient  
3                   served; and

4                   “(ii) one plus the average percentage  
5                   increase in the total number of patients  
6                   served.”.

7           (b) **CAPITAL PROJECTS.**—In addition to amounts  
8 otherwise appropriated under section 10503(b) of the Pa-  
9 tient Protection and Affordable Care Act (42 U.S.C. 254b-  
10 2(b)(1)), there is authorized to be appropriated, and there  
11 is appropriated, for the community health centers program  
12 under section 330 of the Public Health Service Act (42  
13 U.S.C. 254b) for capital projects, \$18,600,000,000 for fis-  
14 cal year 2017.

15           (c) **LIMITATION.**—Amounts otherwise appropriated  
16 for community health centers may not be reduced as a  
17 result of the appropriations made under this section.

18           (d) **AVAILABILITY OF FUNDS.**—Amounts appro-  
19 priated under this section shall remain available until ex-  
20 pended.

21 **SEC. 3. NATIONAL HEALTH SERVICE CORPS.**

22           (a) **IN GENERAL.**—Section 10503(b)(2) of the Pa-  
23 tient Protection and Affordable Care Act (42 U.S.C. 254b-  
24 2(b)(2)) is amended—

1           (1) in subparagraph (D), by striking “and” at  
2 the end;

3           (2) in subparagraph (E), by striking the period;  
4 and

5           (3) by adding at the end the following:

6           “(F) \$850,000,000 for fiscal year 2018;

7           “(G) \$893,000,000 for fiscal year 2019;

8           “(H) \$938,000,000 for fiscal year 2020;

9           “(I) \$985,000,000 for fiscal year 2021;

10          “(J) \$1,030,000,000 for fiscal year 2022;

11          “(K) \$1,090,000,000 for fiscal year 2023;

12          “(L) \$1,100,000,000 for fiscal year 2024;

13          “(M) \$1,200,000,000 for fiscal year 2025;

14          “(N) \$1,300,000,000 for fiscal year 2026;

15          “(O) \$1,500,000,000 for fiscal year 2027;

16 and

17          “(P) for fiscal year 2028, and each subse-  
18 quent fiscal year, the amount appropriated for  
19 the preceding fiscal year adjusted by the prod-  
20 uct of—

21                 “(i) one plus the average percentage  
22 increase in the costs of health professions  
23 education during the prior fiscal year; and

24                 “(ii) one plus the average percentage  
25 change in the number of individuals resid-

1           ing in health professions shortage areas  
2           designated under section 333 of the Public  
3           Health Service Act during the prior fiscal  
4           year, relative to the number of individuals  
5           residing in such areas during the previous  
6           fiscal year.”.

7           (b) LIMITATION.—Amounts otherwise appropriated  
8           for National Health Service Corps may not be reduced as  
9           a result of the appropriations made under this section.

10          (c) AVAILABILITY OF FUNDS.—Amounts appro-  
11          priated under this section shall remain available until ex-  
12          pended.

13       **SEC. 4. TEACHING HEALTH CENTERS.**

14          (a) IN GENERAL.—Section 340H(g) of the Public  
15          Health Service Act (42 U.S.C. 256h(g)) is amended—

16               (1) by striking “2015 and” and inserting  
17               “2015,”; and

18               (2) by striking the period and inserting “,  
19               \$176,000,000 for fiscal years 2018 and 2019,  
20               \$184,000,000 for fiscal year 2020, \$194,000,000 for  
21               fiscal year 2021, \$203,000,000 for fiscal year 2022,  
22               \$214,000,000 for fiscal year 2023, \$224,000,000 for  
23               fiscal year 2024, \$235,000,000 for fiscal year 2025,  
24               \$247,000,000 for fiscal year 2026, \$260,000,000 for  
25               fiscal year 2027, and for fiscal year 2028, and each

1 subsequent fiscal year, the amount appropriated for  
2 the preceding fiscal year adjusted by the greater of  
3 the annual percentage increase in the medical care  
4 component of the consumer price index for all urban  
5 consumers (U.S. city average) as rounded up in an  
6 appropriate manner, or the percentage increase for  
7 the fiscal year involved under section 2(a)(11).”.

8 (b) LIMITATION.—Amounts otherwise appropriated  
9 for Teaching Health Centers may not be reduced as a re-  
10 sult of the appropriations made under this section.

11 (c) AVAILABILITY OF FUNDS.—Amounts appro-  
12 priated under this section shall remain available until ex-  
13 pended.

14 **SEC. 5. NURSE PRACTITIONER RESIDENCY TRAINING PRO-**  
15 **GRAMS.**

16 (a) IN GENERAL.—Section 5316 of the Patient Pro-  
17 tection and Affordable Care Act is amended by striking  
18 subsection (i) and inserting the following:

19 “(i) APPROPRIATIONS.—In addition to amounts oth-  
20 erwise appropriated, there is authorized to be appro-  
21 priated, and there is appropriated to carry out this sec-  
22 tion—

23 “(1) \$35,000,000 for fiscal year 2018;

24 “(2) \$40,000,000 for fiscal year 2019;

25 “(3) \$45,000,000 for fiscal year 2020;

1 “(4) \$50,000,000 for fiscal year 2021;

2 “(5) \$55,000,000 for fiscal year 2022;

3 “(6) \$60,000,000 for fiscal year 2023;

4 “(7) \$65,000,000 for fiscal year 2024;

5 “(8) \$70,000,000 for fiscal year 2025;

6 “(9) \$75,000,000 for fiscal year 2026;

7 “(10) \$80,000,000 for fiscal year 2027; and

8 “(11) for fiscal year 2028, and each subsequent

9 fiscal year, the amount appropriated for the pre-

10 ceding fiscal year adjusted by the greater of the an-

11 nual percentage increase in the medical care compo-

12 nent of the consumer price index for all urban con-

13 sumers (U.S. city average) as rounded up in an ap-

14 propriate manner, or the percentage increase for the

15 fiscal year involved under section 10503(b)(1)(P) of

16 the Patient Protection and Affordable Care Act.”.

17 (b) LIMITATION.—Amounts otherwise appropriated

18 for Nurse Practitioner Residency Training Programs may

19 not be reduced as a result of the appropriations made

20 under this section.

21 (c) AVAILABILITY OF FUNDS.—Amounts appro-

22 priated under this section shall remain available until ex-

23 pended.