

116TH CONGRESS
1ST SESSION

H. R. 4550

To amend the Public Health Service Act to authorize grants to provide treatment for diabetes in minority communities.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 27, 2019

Ms. WATERS (for herself, Mr. GRIJALVA, Ms. KELLY of Illinois, Ms. LEE of California, Ms. JUDY CHU of California, Mr. CARSON of Indiana, Ms. MOORE, Mr. PAYNE, Ms. WILD, Ms. SEWELL of Alabama, Ms. ROYBAL-ALLARD, Ms. NORTON, Mrs. BEATTY, Ms. CLARKE of New York, Mr. RUSH, Ms. PRESSLEY, Mr. VELA, Mr. MORELLE, Ms. FUDGE, Mr. SMITH of Washington, Mr. BUTTERFIELD, Ms. GARCIA of Texas, Mrs. LURIA, Mr. BROWN of Maryland, Mr. THOMPSON of Mississippi, Mr. COHEN, Mr. GONZALEZ of Texas, Ms. VELÁZQUEZ, Mr. DANNY K. DAVIS of Illinois, Mrs. DAVIS of California, Ms. JACKSON LEE, Mr. BISHOP of Georgia, Mr. CISNEROS, Ms. PLASKETT, Mr. SERRANO, Mr. SABLAN, Mr. SEAN PATRICK MALONEY of New York, Ms. SÁNCHEZ, Mr. PANETTA, Ms. BASS, Ms. TLAIB, Mr. SOTO, Mr. HASTINGS, Mrs. LAWRENCE, Mrs. WATSON COLEMAN, Mr. ESPAILLAT, Mr. CASTRO of Texas, Mr. VEASEY, Ms. BLUNT ROCHESTER, Mr. RICHMOND, Mr. COX of California, Mr. SIRES, Mr. LEWIS, Ms. JOHNSON of Texas, Mr. CÁRDENAS, Ms. MUCARSEL-POWELL, and Mr. COSTA) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to authorize grants to provide treatment for diabetes in minority communities.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Minority Diabetes Ini-
3 tiative Act”.

4 **SEC. 2. GRANTS REGARDING TREATMENT OF DIABETES IN**
5 **MINORITY COMMUNITIES.**

6 Subpart I of part D of title III of the Public Health
7 Service Act (42 U.S.C. 254b et seq.) is amended by insert-
8 ing after section 330M the following:

9 **“SEC. 330N. GRANTS REGARDING TREATMENT OF DIABE-**
10 **TES IN MINORITY COMMUNITIES.**

11 “(a) IN GENERAL.—The Secretary may make grants
12 to public and nonprofit private health care providers for
13 the purpose of providing treatment for diabetes in minor-
14 ity communities.

15 “(b) RECIPIENTS OF GRANTS.—The public and non-
16 profit private health care providers to whom grants may
17 be made under subsection (a) include physicians, podia-
18 trists, community-based organizations, health care organi-
19 zations, community health centers, and State, local, and
20 tribal health departments.

21 “(c) SCOPE OF TREATMENT ACTIVITIES.—The Sec-
22 retary shall ensure that grants under subsection (a) cover
23 a variety of diabetes-related health care services, including
24 routine care for diabetic patients, public education on dia-
25 betes prevention and control, eye care, foot care, and

1 treatment for kidney disease and other complications of
2 diabetes.

3 “(d) APPROPRIATE CULTURAL CONTEXT.—A condi-
4 tion for the receipt of a grant under subsection (a) is that
5 the applicant involved agrees that, in the program carried
6 out with the grant, services will be provided in the lan-
7 guages most appropriate for, and with consideration for
8 the cultural backgrounds of, the individuals for whom the
9 services are provided.

10 “(e) OUTREACH SERVICES.—A condition for the re-
11 ceipt of a grant under subsection (a) is that the applicant
12 involved agrees to provide outreach activities to inform the
13 public of the services of the program, and to provide offsite
14 information on diabetes.

15 “(f) APPLICATION FOR GRANT.—A grant may be
16 made under subsection (a) only if an application for the
17 grant is submitted to the Secretary and the application
18 is in such form, is made in such manner, and contains
19 such agreements, assurances, and information as the Sec-
20 retary determines to be necessary to carry out this section.

21 “(g) AUTHORIZATION OF APPROPRIATIONS.—For the
22 purpose of carrying out this section, there are authorized
23 to be appropriated such sums as may be necessary for
24 each of the fiscal years 2020 through 2025.”.

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