

118TH CONGRESS
1ST SESSION

H. R. 4713

To codify the Rural Hospital Technical Assistance Program of the
Department of Agriculture.

IN THE HOUSE OF REPRESENTATIVES

JULY 18, 2023

Mr. JACKSON of Texas (for himself, Mr. KILMER, Mr. ZINKE, Ms. TOKUDA, Mrs. BOEBERT, Ms. SEWELL, Mr. ARRINGTON, Ms. KUSTER, Mr. MANN, Ms. WILD, Mr. SESSIONS, Ms. PETTERSEN, Mr. CARL, Mr. LARSEN of Washington, Mr. LAMALFA, Ms. SCHRIER, Ms. PEREZ, Ms. HOYLE of Oregon, Ms. BUDZINSKI, Mr. DAVIS of North Carolina, Mr. SCHIFF, Mr. PFLUGER, Mr. TRONE, and Mrs. MILLER of West Virginia) introduced the following bill; which was referred to the Committee on Agriculture

A BILL

To codify the Rural Hospital Technical Assistance Program
of the Department of Agriculture.

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 “Rural Hospital Tech-
5 nical Assistance Program Act”.

1 **SEC. 2. CODIFICATION OF THE RURAL HOSPITAL TECH-**
2 **NICAL ASSISTANCE PROGRAM OF THE DE-**
3 **PARTMENT OF AGRICULTURE.**

4 (a) IN GENERAL.—In lieu of any other authority
5 under which the Secretary of Agriculture (in this section
6 referred to as the “Secretary”) may provide technical as-
7 sistance to any eligible rural hospital facility, the Sec-
8 retary shall establish, and maintain, directly or by grant,
9 contract, or cooperative agreement, a Rural Hospital
10 Technical Assistance Program (in this section referred to
11 as the “Program”) to provide technical assistance and
12 training, tailored to the capacity and needs of each eligible
13 hospital facility, to help eligible hospital facilities in rural
14 areas with a population of not more than 50,000 inhab-
15 itants—

16 (1) identify development needs for maintaining
17 essential health care services, and support action
18 plans for financial, operational, and quality improve-
19 ment projects to meet the development needs;

20 (2) better manage their financial and business
21 strategies; and

22 (3) identify, and apply for assistance from, loan
23 and grant programs of the Department of Agri-
24 culture for which the facilities are eligible.

25 (b) GOALS.—The goals of the Program shall be to—

1 (1) improve the long-term financial position and
2 operational efficiency of eligible rural hospital facili-
3 ties;

4 (2) prevent the closure of eligible rural hospital
5 facilities;

6 (3) strengthen the delivery of health care in
7 rural areas; and

8 (4) help eligible rural hospital facilities better
9 access and compete for loans and grants from pro-
10 grams administered by the Department of Agri-
11 culture.

12 (c) DEFINITIONS.—In this section:

13 (1) DEVELOPMENT NEEDS.—The term “devel-
14 opment needs” includes—

15 (A) constructing, expanding, renovating or
16 otherwise modernizing health care facilities;

17 (B) increasing telehealth capabilities;

18 (C) acquiring or upgrading health care in-
19 formation systems such as electronic health
20 records; and

21 (D) such other needs as the Secretary
22 deems critical to maintaining health care serv-
23 ices in the community in which an eligible rural
24 hospital facility is located.

- 1 (2) ELIGIBLE HOSPITAL FACILITY.—The term
2 “eligible hospital facility” means a facility that is—
- 3 (A)(i) a hospital (as defined in section
4 1861(e) of the Social Security Act);
- 5 (ii) a psychiatric hospital (as defined in
6 section 1861(f) of such Act);
- 7 (iii) a long-term care hospital (as defined
8 in section 1861(ccc) of such Act);
- 9 (iv) a critical access hospital (as defined in
10 section 1861(mm)(1) of such Act);
- 11 (v) a religious nonmedical health care in-
12 stitution (as defined in section 1861(ss)(1) of
13 such Act);
- 14 (vi) a rural health clinic (as defined in sec-
15 tion 1861(aa)(2) of such Act);
- 16 (vii) a sole community hospital (as defined
17 in section 1886(d)(5)(C)(iii) of such Act);
- 18 (viii) a rural emergency hospital (as de-
19 fined in section 1861(kkk)(2) of such Act);
- 20 (ix) a community health center (as defined
21 in section 330 of the Public Health Service
22 Act); or
- 23 (x) any other rural hospital as determined
24 by the Secretary of Agriculture in consultation

1 with the Secretary of the Department of Health
2 and Human Services; and

3 (B) located in a rural area.

4 (3) RURAL AREA.—The term “rural area” has
5 the meaning given the term in section 343(a)(13)(A)
6 of the Consolidated Farm and Rural Development
7 Act.

8 (4) HEALTH PROFESSIONAL SHORTAGE
9 AREA.—The term “health professional shortage
10 area” has the meaning given the term in section
11 332(a)(1)(A) of the Public Health Service Act.

12 (5) MEDICALLY UNDERSERVED AREA.—The
13 term “medically underserved area” has the meaning
14 given the term in section 330I(a)(5) of the Public
15 Health Service Act.

16 (6) MEDICALLY UNDERSERVED POPULATION.—
17 The term “medically underserved population” has
18 the meaning given the term in section 330(b)(3) of
19 the Public Health Service Act.

20 (d) PROGRAM PARTICIPATION.—

21 (1) IN GENERAL.—The Secretary shall engage
22 in outreach and engagement strategies to encourage
23 eligible hospital facilities to participate in the Pro-
24 gram.

1 (2) HOSPITAL SELECTION.—In selecting eligible
2 hospital facilities to participate in the Program, the
3 Secretary shall give priority to borrowers and grant-
4 ees of the Rural Housing Service, Rural Business-
5 Cooperative Service, and Rural Utilities Service. The
6 Secretary may also consider—

7 (A) the age and physical state of the hos-
8 pital or clinic facilities involved;

9 (B) the financial vulnerability of the hos-
10 pital or clinic facilities, and the ability of the
11 hospital or clinic facilities to meet debt obliga-
12 tions;

13 (C) the electronic health record implemen-
14 tation needs of the hospital or clinic facilities;

15 (D) whether the hospital or clinic is lo-
16 cated in a health professional shortage area or
17 a medically underserved area;

18 (E) whether the hospital serves a medically
19 underserved population; and

20 (F) such other criteria and priorities as
21 are determined by the Secretary.

22 (e) REPORTING REQUIREMENTS.—Not later than 1
23 year after the date of the enactment of this section, and
24 annually thereafter, the Secretary shall submit to the
25 Committee on Agriculture of the House of Representatives

1 and the Committee on Agriculture, Nutrition, and For-
2 estry of the Senate a written report describing the
3 progress and results of the program conducted under this
4 section, which should include—

5 (1) a brief description of each project to provide
6 technical assistance to an eligible hospital facility
7 under this section, including—

8 (A) the name and location of the facility;

9 (B) a description of the assistance pro-
10 vided;

11 (C) a description of the outcomes for com-
12 pleted projects;

13 (D) the cost of the technical assistance;
14 and

15 (E) any other information the Secretary
16 deems appropriate;

17 (2) a summary of the technical assistance
18 projects completed;

19 (3) a summary of the outcomes of the technical
20 assistance projects;

21 (4) an assessment of the effectiveness of the
22 Program; and

23 (5) recommendations for improving the Pro-
24 gram.

1 (f) LIMITATIONS ON AUTHORIZATION OF APPROPRIA-
2 TIONS.—To carry out this section, there are authorized
3 to be appropriated to the Secretary not more than
4 \$2,000,000 for each of fiscal years 2024 through 2028.

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