

115TH CONGRESS
2D SESSION

H. R. 767

IN THE SENATE OF THE UNITED STATES

FEBRUARY 27, 2018

Received; read twice and referred to the Committee on Health, Education,
Labor, and Pensions

AN ACT

To establish the Stop, Observe, Ask, and Respond to Health
and Wellness Training pilot program to address human
trafficking in the health care system.

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 “Stop, Observe, Ask,
3 and Respond to Health and Wellness Act of 2018” or the
4 “SOAR to Health and Wellness Act of 2018”.

5 **SEC. 2. DEFINITIONS.**

6 In this Act:

7 (1) HUMAN TRAFFICKING.—The term “human
8 trafficking” has the meaning given the term “severe
9 forms of trafficking in persons” as defined in section
10 103 of the Trafficking Victims Protection Act of
11 2000 (22 U.S.C. 7102).

12 (2) SECRETARY.—The term “Secretary” means
13 the Secretary of Health and Human Services.

14 **SEC. 3. PROGRAM ESTABLISHMENT.**

15 (a) IN GENERAL.—The Secretary shall establish a
16 program to be known as the Stop, Observe, Ask, and Re-
17 spond to Health and Wellness Training Program or the
18 SOAR to Health and Wellness Training Program (in this
19 Act referred to as the “Program”) to provide training to
20 health care providers and other related providers, at all
21 levels, on human trafficking in accordance with the pur-
22 pose described in subsection (c).

23 (b) GRANTS.—The Secretary may carry out the Pro-
24 gram through the award of grants to health care sites and
25 health care professional organizations that represent di-
26 versity in—

6 (c) PURPOSE.—The purpose of the Program shall be
7 to train health care providers and other related providers
8 to enable such providers to—

9 (1) identify potential human trafficking victims;

10 (2) implement proper protocols and procedures

11 for working with law enforcement to report, and fa-

12 cilitate communication with, such victims, in accord-

13 ance with all applicable Federal, State, local, and

14 tribal requirements, including legal confidentiality

15 requirements for patients and health care providers;

16 (3) implement proper protocols and procedures

17 for referring such victims to appropriate health care,

18 social, or victims service agencies or organizations;

19 (4) provide such victims care that is—

20 (A) coordinated:

21 (B) victim centered:

22 (C) culturally relevant

23 (D) comprehensive;

24 (E) evidence-based:

25 (F) gender responsive;

(G) age-appropriate, with a focus on care for youth; and

3 (H) trauma-informed; and

4 (5) consider the potential for integrating the
5 training described in paragraphs (1) through (4)
6 with training programs, in effect on the date of en-
7 actment of this Act, for victims of domestic violence,
8 dating violence, sexual assault, stalking, child abuse,
9 child neglect, child maltreatment, and child sexual
0 exploitation.

11 (d) FUNCTIONS.—

(2) AUTHORIZED INITIATIVES.—The authorized initiatives of the Program shall include—

- (ii) that adapts to changing needs, settings, health care providers, and other related providers;

(B) providing technical assistance for health education programs and health care professional organizations to implement health care protocols, or develop continuing education training materials, that assist in achieving the purpose described in subsection (c);

(C) facilitating the dissemination of best practices and recommendations as the Secretary determines appropriate; and

(D) developing a reliable methodology for collecting data, and reporting such data, on the number of human trafficking victims identified and served in health care settings or other related provider settings.

18 SEC. 4. DATA COLLECTION AND REPORTING REQUIRE-
19 MENTS.

20 (a) DATA COLLECTION.—

21 (1) IN GENERAL.—During each of fiscal years
22 2018 through 2022, the Secretary shall collect data
23 on each of the following:

(A) The total number of grantees operating under the Program.

(B) The total number of health care providers and other related providers trained through the Program.

15 (b) REPORTING.—Not later than 90 days after the
16 first day of each of fiscal years 2019 through 2023, the
17 Secretary shall prepare and submit to Congress a report
18 on the data collected under subsection (a).

19 SEC. 5. AUTHORIZATION OF APPROPRIATIONS.

20 There is authorized to be appropriated to carry out
21 this Act \$4,000,000 for each of fiscal years 2018 through
22 2022.

23 SEC. 6. CUT-GO COMPLIANCE.

24 Subsection (f) of section 319D of the Public Health
25 Service Act (42 U.S.C. 247d-4) is amended by striking

- 1 "through 2018" and inserting "through 2017, and
- 2 \$118,300,000 for fiscal year 2018".

Passed the House of Representatives February 26,
2018.

Attest:

KAREN L. HAAS,

Clerk.