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HOUSE OF REPRESENTATIVES
REPORT
118–514

DR. LORNA BREEN HEALTH CARE PROVIDER PROTECTION REAUTHORIZATION ACT

MAY 21, 2024.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mrs. RODGERS of Washington, from the Committee on Energy and Commerce, submitted the following

R E P O R T

[To accompany H.R. 7153]

The Committee on Energy and Commerce, to whom was referred the bill (H.R. 7153) to reauthorize the Dr. Lorna Breen Health Care Provider Protection Act, and for other purposes, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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PURPOSE AND SUMMARY

H.R. 7153 reauthorizes the Dr. Lorna Breen Health Care Provider Protection Act, which directs the Secretary of Health and Human Services (HHS) to allocate resources to health care entities

for programs that promote the utilization of mental health and substance use disorder services among health care professionals.

BACKGROUND AND NEED FOR LEGISLATION

Health care provider burnout and mental health conditions have been on the rise in recent years and was exacerbated by the COVID–19 pandemic. As of 2022, 42 percent of health care workers reported feeling burned out, which has increased from 32 percent reported in 2018.[1] Additionally, health care workers who reported a hostile work environment were more likely to report having anxiety, depression, burnout and/or suicidal ideation.[2]

Since 2022, Congress has provided $103 million in funding to 44 organizations[3] to implement evidence-informed strategies that reduce and prevent suicide, burnout, and substance use disorders. This bill would reauthorize the Dr. Lorna Breen Health Care Provider Protection Act, which is aimed at reducing burn out and mental health conditions among health care workers.

COMMITTEE ACTION

On February 14, 2024, the Subcommittee on Health held a hearing on H.R. 7153. The title of the hearing was "Legislative Proposals to Support Patients and Caregivers." The Subcommittee received testimony from:

- Andy Shih, PhD, Chief Science Officer, Autism Speaks;
- Corey Feist, JD, MBA, Co-Founder and CEO, Dr. Lorna Breen Heroes' Foundation;
- Joanne Pike, DrPH, President and CEO, Alzheimer's Association;
- Gordon Tomaselli, MD, Former President, American Heart Association; Marilyn and Stanley M. Katz Dean, Emeritus and Professor of Medicine, Albert Einstein College of Medicine; Adjunct Professor of Medicine, Johns Hopkins University School of Medicine;
- Michelle Whitten, President, CEO, and Co-Founder, Global Down Syndrome Foundation;
- Randy Strozyk, President, American Ambulance Association; and
- Christina Annunziata, MD, PhD, Senior Vice President of Extramural Discovery Science, American Cancer Society.

On March 12, 2024, the Subcommittee on Health met in open markup session and forwarded H.R. 7153, without amendment, to the full Committee by a record vote of 25 yeas and 0 nays.

On March 20, 2024, the full Committee on Energy and Commerce met in open markup session and ordered H.R. 7153, without amendment, favorably reported to the House by a record vote of 48 yeas and 0 nays.

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[1] Centers for Disease Control and Prevention, Health Workers Face a Mental Health Crisis. October 24, 2023, https://www.cdc.gov/vitalsigns/health-worker-mental-health/index.html.

[2] Id.

[3] Workplace Change Collaborative, "HRSA Grantees". https://www.wpchange.org/hrsa-grantees.

COMMITTEE VOTES

Clause 3(b) of rule XIII requires the Committee to list the record votes on the motion to report legislation and amendments thereto. The following reflects the record votes taken during the Committee consideration:

COMMITTEE ON ENERGY AND COMMERCE
118TH CONGRESS
ROLL CALL VOTE # 13

BILL: H.R. 7153, Dr. Lorna Breen Health Care Provider Protection Reauthorization Act

AMENDMENT: A motion by Chair Rodgers to order H.R. 7153 favorably reported to the House, without amendment (Final Passage).

DISPOSITION: **AGREED TO**, by a roll call vote of 48 yeas to 0 nays.

REPRESENTATIVE	YEAS	NAYS	PRESENT	REPRESENTATIVE	YEAS	NAYS	PRESENT
Rep. Rodgers	X			Rep. Pallone	X		
Rep. Burgess	X			Rep. Eshoo	X		
Rep. Latta	X			Rep. DeGette	X		
Rep. Guthrie	X			Rep. Schakowsky	X		
Rep. Griffith	X			Rep. Matsui	X		
Rep. Bilirakis	X			Rep. Castor	X		
Rep. Bucshon	X			Rep. Sarbanes	X		
Rep. Hudson	X			Rep. Tonko	X		
Rep. Walberg	X			Rep. Clarke	X		
Rep. Carter	X			Rep. Cárdenas	X		
Rep. Duncan	X			Rep. Ruiz	X		
Rep. Palmer	X			Rep. Peters	X		
Rep. Dunn	X			Rep. Dingell	X		
Rep. Curtis	X			Rep. Veasey	X		
Rep. Lesko	X			Rep. Kuster			
Rep. Pence	X			Rep. Kelly	X		
Rep. Crenshaw	X			Rep. Barragán	X		
Rep. Joyce	X			Rep. Blunt Rochester			
Rep. Armstrong	X			Rep. Soto			
Rep. Weber	X			Rep. Craig	X		
Rep. Allen	X			Rep. Schrier	X		
Rep. Balderson	X			Rep. Trahan	X		
Rep. Fulcher	X			Rep. Fletcher	X		
Rep. Pfluger	X						
Rep. Harshbarger	X						
Rep. Miller-Meeks	X						
Rep. Cammack	X						
Rep. Obernolte	X						

03/20/2024

OVERSIGHT FINDINGS AND RECOMMENDATIONS

Pursuant to clause 2(b)(1) of rule X and clause 3(c)(1) of rule XIII, the Committee held a hearing and made findings that are reflected in this report.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

Pursuant to clause 3(c)(2) of rule XIII, the Committee finds that H.R. 7153 would result in no new or increased budget authority, entitlement authority, or tax expenditures or revenues.

CONGRESSIONAL BUDGET OFFICE ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII, at the time this report was filed, the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974 was not available.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII, the general performance goal or objective of this legislation is to help support the reduction of burnout and mental health conditions among health care professionals.

DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII, no provision of H.R. 7153 is known to be duplicative of another Federal program, including any program that was included in a report to Congress pursuant to section 21 of Public Law 111–139 or the most recent Catalog of Federal Domestic Assistance.

RELATED COMMITTEE AND SUBCOMMITTEE HEARINGS

Pursuant to clause 3(c)(6) of rule XIII, the following related hearing was used to develop or consider H.R. 7153:

- On February 14, 2024, the Subcommittee on Health held a hearing on H.R. 7153. The title of the hearing was "Legislative Proposals to Support Patients and Caregivers." The Subcommittee received testimony from:
  - Andy Shih, PhD, Chief Science Officer, Autism Speaks;
  - Corey Feist, JD, MBA, Co-Founder and CEO, Dr. Lorna Breen Heroes' Foundation;
  - Joanne Pike, DrPH, President and CEO, Alzheimer's Association;
  - Gordon Tomaselli, MD, Former President, American Heart Association; Marilyn and Stanley M. Katz Dean, Emeritus and Professor of Medicine, Albert Einstein College of Medicine; Adjunct Professor of Medicine, Johns Hopkins University School of Medicine;

- Michelle Whitten, President, CEO, and Co-Founder, Global Down Syndrome Foundation;
- Randy Strozyk, President, American Ambulance Association; and
- Christina Annunziata, MD, PhD, Senior Vice President of Extramural Discovery Science, American Cancer Society.

COMMITTEE COST ESTIMATE

Pursuant to clause 3(d)(1) of rule XIII, the Committee adopts as its own the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974. At the time this report was filed, the estimate was not available.

EARMARK, LIMITED TAX BENEFITS, AND LIMITED TARIFF BENEFITS

Pursuant to clause 9(e), 9(f), and 9(g) of rule XXI, the Committee finds that H.R. 7153 contains no earmarks, limited tax benefits, or limited tariff benefits.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act were created by this legislation.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

Section 1 provides that the Act may be cited as the "Dr. Lorna Breen Health Care Provider Protection Reauthorization Act".

Section 2. Education and awareness initiative encouraging use of mental health and substance use disorder services by health care professionals

Section 2 makes technical changes to, and reauthorizes, section 3 of the Dr. Lorna Breen Health Care Provider Protection Act for five fiscal years, from fiscal year 2025 through 2029.

Section 3. Programs to promote mental health among the health professional workforce

Section 3 makes technical changes to, and reauthorizes, section 4 of the Dr. Lorna Breen Health Care Provider Protection Act for five fiscal years from, fiscal year 2025 through 2029.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics,

and existing law in which no change is proposed is shown in roman):

DR. LORNA BREEN HEALTH CARE PROVIDER PROTECTION ACT

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SEC. 3. EDUCATION AND AWARENESS INITIATIVE ENCOURAGING USE OF MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES BY HEALTH CARE PROFESSIONALS.

(a) IN GENERAL.—The Secretary, in consultation with relevant stakeholders, including medical professional associations, shall establish a national evidence-based or evidence-informed education and awareness initiative—

(1) to encourage health care professionals to seek support and care for their mental health or substance use concerns, to help such professionals identify risk factors associated with suicide and mental health conditions, and to help such professionals learn how best to respond to such risks, with the goal of preventing suicide, mental health conditions, and substance use disorders; and

(2) to address stigma associated with seeking mental health and substance use disorder services.

(b) REPORTING.—Not later than 2 years after the date of enactment of this Act, *and annually thereafter,* the Secretary shall provide to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives an update on the activities and outcomes of the initiative under subsection (a), including a description of quantitative and qualitative metrics used to evaluate such activities and outcomes.

(c) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $10,000,000 for each of fiscal years **[**2022 through 2024**]** *2025 through 2029*.

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PUBLIC HEALTH SERVICE ACT

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TITLE VII—HEALTH PROFESSIONS EDUCATION

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PART E—HEALTH PROFESSIONS AND PUBLIC HEALTH WORKFORCE

Subpart 1—Health Professions Workforce Information and Analysis

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SEC. [764] *764A*. PROGRAMS TO PROMOTE MENTAL HEALTH AMONG THE HEALTH PROFESSIONAL WORKFORCE.

(a) PROGRAMS TO PROMOTE MENTAL HEALTH AMONG HEALTH CARE PROFESSIONALS.—

(1) IN GENERAL.—The Secretary shall award grants or contracts to health care entities, including entities that provide health care services, such as hospitals, community health centers, and rural health clinics, or to medical professional associations, to establish or enhance evidence-based or evidence-informed programs dedicated to improving mental health and resiliency for health care professionals.

(2) USE OF FUNDS.—An eligible entity receiving a grant or contract under this subsection shall use funds received through the grant or contract to implement a new program or enhance an existing program to promote mental health among health care professionals, which may include—

(A) improving awareness among health care professionals about risk factors for, and signs of, suicide and mental health or substance use disorders, in accordance with evidence-based or evidence-informed practices;

(B) establishing new, or enhancing existing, evidence-based or evidence-informed programs for preventing suicide and improving mental health and resiliency among health care professionals;

(C) establishing new, or enhancing existing, peer-support programs among health care professionals; or

(D) providing mental health care, follow-up services and care, or referral for such services and care, as appropriate.

(3) PRIORITY.—In awarding grants and contracts under this subsection, the Secretary shall give priority [to eligible entities in] *to eligible entities that—*

(A) are in health professional shortage areas or rural areas[.]*; or*

(B) have a focus on the reduction of administrative burden on health care workers.

(b) TRAINING GRANTS.—The Secretary may establish a program to award grants to health professions schools, academic health centers, State or local governments, Indian Tribes or Tribal organizations, or other appropriate public or private nonprofit entities (or consortia of entities, including entities promoting multidisciplinary approaches) to support the training of health care students, residents, or health care professionals in evidence-based or evidence-informed strategies to address mental and substance use disorders and improve mental health and resiliency among health care professionals.

(c) GRANT TERMS.—A grant or contract awarded under subsection (a) or (b) shall be for a period of *not less than* 3 years.

(d) APPLICATION SUBMISSION.—An entity seeking a grant or contract under subsection (a) or (b) shall submit an application to the Secretary at such time, in such manner, and accompanied by such information as the Secretary may require.

(e) REPORTING.—An entity awarded a grant or contract under subsection (a) or (b) shall periodically submit to the Secretary a report evaluating the activities supported by the grant or contract.

(f) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section and section 5 of the Dr. Lorna Breen Health Care Provider Protection Act, there are authorized to be appropriated $35,000,000 for each of fiscal years [2022 through 2024] *2025 through 2029*.

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