

119TH CONGRESS
1ST SESSION

S. 1282

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

IN THE SENATE OF THE UNITED STATES

APRIL 3, 2025

Mr. ROUNDS (for himself and Mr. WELCH) introduced the following bill; which was read twice and referred to the Committee on Agriculture, Nutrition, and Forestry

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 Development
5 Hospital Technical Assistance Program Act of 2025”.

6 **SEC. 2. CODIFICATION OF THE RURAL HOSPITAL TECH-**
7 **NICAL ASSISTANCE PROGRAM OF THE DE-**
8 **PARTMENT OF AGRICULTURE.**

9 (a) DEFINITIONS.—In this section:

1 (1) DEVELOPMENT NEEDS.—The term “devel-
2 opment needs” means—

3 (A) constructing, expanding, renovating, or
4 otherwise modernizing health care facilities;

5 (B) increasing telehealth capabilities;

6 (C) acquiring or upgrading health care in-
7 formation systems, such as electronic health
8 records; and

9 (D) such other needs as the Secretary de-
10 termines to be critical to maintaining health
11 care services in the community in which an eli-
12 gible hospital facility is located.

13 (2) ELIGIBLE HOSPITAL FACILITY.—The term
14 “eligible hospital facility” means a facility that is—

15 (A)(i) a hospital (as defined in section
16 1861(e) of the Social Security Act (42 U.S.C.
17 1395x(e)));

18 (ii) a psychiatric hospital (as defined in
19 section 1861(f) of that Act (42 U.S.C.
20 1395x(f)));

21 (iii) a long-term care hospital (as defined
22 in section 1861(cc) of that Act (42 U.S.C.
23 1395x(cc)));

1 (iv) a critical access hospital (as defined in
2 section 1861(mm)(1) of that Act (42 U.S.C.
3 1395x(mm)(1)));

4 (v) a religious nonmedical health care in-
5 stitution (as defined in section 1861(ss)(1) of
6 that Act (42 U.S.C. 1395x(ss)(1)));

7 (vi) a rural health clinic (as defined in sec-
8 tion 1861(aa)(2) of that Act (42 U.S.C.
9 1395x(aa)(2)));

10 (vii) a sole community hospital (as defined
11 in section 1886(d)(5)(D)(iii) of that Act (42
12 U.S.C. 1395ww(d)(5)(D)(iii)));

13 (viii) a rural emergency hospital (as de-
14 fined in section 1861(kkk)(2) of that Act (42
15 U.S.C. 1395x(kkk)(2)));

16 (ix) a community health center receiving
17 funding under section 330 of the Public Health
18 Service Act (42 U.S.C. 254b); or

19 (x) any other rural hospital, as determined
20 by the Secretary, in consultation with the Sec-
21 retary of Health and Human Services; and

22 (B) located in a rural area.

23 (3) HEALTH PROFESSIONAL SHORTAGE
24 AREA.—The term “health professional shortage
25 area” has the meaning given the term in section

1 332(a)(1)(A) of the Public Health Service Act (42
2 U.S.C. 254e(a)(1)(A)).

3 (4) MEDICALLY UNDERSERVED AREA.—The
4 term “medically underserved area” has the meaning
5 given the term in section 330I(a)(4) of the Public
6 Health Service Act (42 U.S.C. 254e–14(a)(4)).

7 (5) MEDICALLY UNDERSERVED POPULATION.—
8 The term “medically underserved population” has
9 the meaning given the term in section 330(b)(3) of
10 the Public Health Service Act (42 U.S.C.
11 254b(b)(3)).

12 (6) PROGRAM.—The term “Program” means
13 the Rural Hospital Technical Assistance Program
14 established under subsection (b).

15 (7) SECRETARY.—The term “Secretary” means
16 the Secretary of Agriculture.

17 (8) RURAL AREA.—The term “rural area” has
18 the meaning given the term in section 343(a)(13)(A)
19 of the Consolidated Farm and Rural Development
20 Act (7 U.S.C. 1991(a)(13)(A)).

21 (b) ESTABLISHMENT.—In lieu of any other authority
22 under which the Secretary may provide technical assist-
23 ance to any eligible hospital facility, the Secretary shall
24 establish, and maintain, directly or by grant, contract, or
25 cooperative agreement, a Rural Hospital Technical Assist-

1 ance Program to provide technical assistance and training,
2 tailored to the capacity and needs of each eligible hospital
3 facility, to help eligible hospital facilities—

4 (1) identify development needs for maintaining
5 essential health care services, and support action
6 plans for financial, operational, and quality improve-
7 ment projects to meet the development needs;

8 (2) better manage the financial and business
9 strategies of the eligible hospital facilities; and

10 (3) identify, and apply for assistance from, loan
11 and grant programs of the Department of Agri-
12 culture for which the eligible hospital facilities are
13 eligible.

14 (c) GOALS.—The goals of the Program shall be—

15 (1) to improve the long-term financial position
16 and operational efficiency of eligible hospital facili-
17 ties;

18 (2) to prevent the closure of eligible hospital fa-
19 cilities;

20 (3) to strengthen the delivery of health care in
21 rural areas; and

22 (4) to help eligible hospital facilities better ac-
23 cess and compete for loans and grants from pro-
24 grams administered by the Department of Agri-
25 culture.

1 (d) PROGRAM PARTICIPATION.—

2 (1) IN GENERAL.—The Secretary shall engage
3 in outreach and engagement strategies to encourage
4 eligible hospital facilities to participate in the Pro-
5 gram.

6 (2) HOSPITAL SELECTION.—In selecting eligible
7 hospital facilities to participate in the Program, the
8 Secretary—

9 (A) shall give priority to borrowers of loans
10 and recipients of grants from the Rural Hous-
11 ing Service, the Rural Business-Cooperative
12 Service, and the Rural Utilities Service; and

13 (B) may consider—

14 (i) the age and physical state of the
15 hospital or clinic facilities involved;

16 (ii) the financial vulnerability of the
17 hospital or clinic facilities, and the ability
18 of the hospital or clinic facilities to meet
19 debt obligations;

20 (iii) the electronic health record imple-
21 mentation needs of the hospital or clinic
22 facilities;

23 (iv) whether the hospital or clinic is
24 located in a health professional shortage
25 area or a medically underserved area;

1 (v) whether the hospital serves a
2 medically underserved population; and
3 (vi) such other criteria and priorities
4 as are determined by the Secretary.

5 (e) REPORTING REQUIREMENTS.—Not later than 1
6 year after the date of enactment of this Act, and annually
7 thereafter, the Secretary shall submit to the Committee
8 on Agriculture of the House of Representatives and the
9 Committee on Agriculture, Nutrition, and Forestry of the
10 Senate a written report describing the progress and re-
11 sults of the Program, including—

12 (1) a brief description of each project to provide
13 technical assistance to an eligible hospital facility,
14 including—

15 (A) the name and location of the facility;
16 (B) a description of the assistance pro-
17 vided;

18 (C) a description of the outcomes for com-
19 pleted projects;

20 (D) the cost of the technical assistance;
21 and

22 (E) any other information the Secretary
23 determines to be appropriate;

24 (2) a summary of the technical assistance
25 projects completed;

1 (3) a summary of the outcomes of the technical
2 assistance projects;

3 (4) an assessment of the effectiveness of the
4 Program; and

5 (5) recommendations for improving the Pro-
6 gram.

7 (f) AUTHORIZATION OF APPROPRIATIONS.—There is
8 authorized to be appropriated to the Secretary to carry
9 out this section not more than \$2,000,000 for each of fis-
10 cal years 2025 through 2029.

