

112TH CONGRESS
1ST SESSION

S. 1481

To authorize the Secretary of Health and Human Services to establish a program of grants to newly accredited allopathic and osteopathic medical schools for the purpose of increasing the supply of physicians.

IN THE SENATE OF THE UNITED STATES

AUGUST 2, 2011

Mr. CASEY (for himself and Mr. SCHUMER) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To authorize the Secretary of Health and Human Services to establish a program of grants to newly accredited allopathic and osteopathic medical schools for the purpose of increasing the supply of physicians.

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 “Medical Education De-
5 velopment Act of 2011”.

6 **SEC. 2. FINDINGS.**

7 Congress finds as follows:

1 (1) According to the Council on Graduate Med-
2 ical Education, the Nation will face a shortage of
3 about 85,000 physicians by 2020, due in part to the
4 aging population. The Association of American Med-
5 ical Colleges estimates the shortage to reach 91,000
6 physicians over the next decade.

7 (2) The American Academy of Family Physi-
8 cians recommended in 2006 that to meet the need
9 for primary care physicians in 2020, the United
10 States would have to train 3,725 family physicians
11 and 714 osteopathic physicians annually, with an
12 overall goal of a 39 percent increase in family physi-
13 cians.

14 (3) The Association of American Medical Col-
15 leges has called for increased enrollment at Liaison
16 Committee on Medical Education (LCME) accred-
17 ited schools from 15 to 30 percent over the 2002
18 levels by 2015. This increase would boost the num-
19 ber of graduates to about 20,000.

20 (4) The Federal Government added 500 resi-
21 dency slots for Graduate Medical Education, pledg-
22 ing \$168,000,000 by 2015. This was the first sig-
23 nificant expansion of medical education since the
24 1960s and 1970s.

1 **SEC. 3. GRANTS FOR FUNDING OF NEWLY ACCREDITED**
2 **MEDICAL SCHOOLS.**

3 (a) IN GENERAL.—The Secretary of Health and
4 Human Services (in this section referred to as the “Sec-
5 retary”) shall establish a program of grants to newly ac-
6 credited allopathic and osteopathic medical schools for the
7 purpose of increasing the supply of physicians.

8 (b) USE OF GRANTS.—Amounts provided under
9 grants under this section may be used to support scholar-
10 ships, develop residencies, build infrastructure, recruit and
11 retain faculty, and develop research programs for the pur-
12 pose described in subsection (a).

13 (c) ALLOCATION.—The Secretary shall allocate funds
14 appropriated under this section among newly accredited
15 medical schools based on the following criteria:

16 (1) First priority shall be given to allopathic
17 and osteopathic medical schools accredited to admit
18 students from fiscal years 2009 through 2014.

19 (2) Medical schools that enroll larger classes,
20 while maintaining competitive faculty to student ra-
21 tios, shall receive increased funding based on their
22 size.

23 (3) Funds shall only be allocated to medical
24 schools that provide accountability and transparency
25 in expending such funds.

26 (d) ANNUAL REPORTS.—

1 (1) REPORTS TO SECRETARY.—Each medical
2 school receiving a grant under this section shall sub-
3 mit an annual report to the Secretary—

4 (A) describing the specific uses of the
5 funds received through the grant;

6 (B) describing how the grant has bene-
7 fitted the region and the Nation as a whole;
8 and

9 (C) containing such additional information
10 as the Secretary may require.

11 (2) REPORTS TO CONGRESS.—Not later than
12 the end of fiscal year 2012, and annually thereafter,
13 the Secretary shall submit a report to the Congress
14 on the grant program under this section. Each such
15 report shall include an evaluation of the effectiveness
16 of grants under this section, taking into consider-
17 ation the extent to which such grants have—

18 (A) increased the supply of physicians;

19 (B) resulted in greater access to primary
20 and specialty health care;

21 (C) enabled the creation of new, high-qual-
22 ity, cost-conscious care models;

23 (D) provided economic regional benefits;
24 and

1 (E) increased the focus on communications
2 skills of medical students.

3 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
4 authorized to be appropriated to carry out this section
5 \$500,000,000 for the 5-fiscal-year period beginning with
6 fiscal year 2012.

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