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(Original Signature of Member)

118TH CONGRESS
2D SESSION

H. R. _____

To authorize the Secretary of Health and Human Services to award grants to qualified entities to support community paramedicine programs, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. CLEAVER introduced the following bill; which was referred to the Committee on _____

A BILL

To authorize the Secretary of Health and Human Services to award grants to qualified entities to support community paramedicine programs, and for other purposes.

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 “Community
5 Paramedicine Act of 2024”.

1 **SEC. 2. COMMUNITY PARAMEDICINE GRANT PROGRAM.**

2 Part P of title III of the Public Health Service Act
3 (42 U.S.C. 280g et seq.) is amended by adding at the end
4 the following:

5 **“SEC. 399V–8. COMMUNITY PARAMEDICINE GRANT PRO-**
6 **GRAM.**

7 “(a) IN GENERAL.—The Secretary, acting through
8 the Administrator of the Health Resources and Services
9 Administration, shall award grants to qualified entities to
10 support community paramedicine programs.

11 “(b) USE OF FUNDS.—A grant received under sub-
12 section (a) may be used for any of the following:

13 “(1) Hiring community paramedicine personnel.

14 “(2) Recruiting and retaining community
15 paramedicine personnel.

16 “(3) Reimbursing costs associated with a med-
17 ical director providing medical oversight (as the
18 terms ‘medical director’ and ‘medical oversight’ are
19 defined in section 303(k)(13) of the Controlled Sub-
20 stances Act).

21 “(4) Purchasing necessary equipment, including
22 personal protective equipment, uniforms, medical
23 supplies, and vehicles.

24 “(5) Reimbursing costs associated with certifi-
25 cation and recertification courses.

1 “(6) Conducting public outreach and education
2 on the patient-centered outcomes that can be
3 achieved through community paramedicine.

4 “(7) Any other activity the Secretary deter-
5 mines appropriate related to paramedicine services.

6 “(c) QUALIFIED ENTITIES.—

7 “(1) IN GENERAL.—To be qualified to receive a
8 grant under this section, an entity shall be (subject
9 to paragraph (2)) one of the following:

10 “(A) An emergency medical services agen-
11 cy (as defined in section 303(k)(13) of the Con-
12 trolled Substances Act).

13 “(B) A State, Indian Tribe, Tribal organi-
14 zation, county, or municipality.

15 “(C) An organization representing the in-
16 terests of one or more emergency medical serv-
17 ices organizations.

18 “(2) LIMITATION.—A for-profit entity is ineli-
19 gible to receive a grant under this section, but is eli-
20 gible to receive a subgrant from, or enter into a con-
21 tract with, a grantee under this section to provide
22 items or services in connection with the grant.

23 “(d) APPLICATIONS.—

24 “(1) IN GENERAL.—To seek a grant under this
25 section, a qualified entity shall submit an application

1 at such time, in such manner, and containing such
2 information and assurances as the Secretary may re-
3 quire.

4 “(2) CONTENTS.—Any such application shall,
5 at a minimum, include the following:

6 “(A) A description of the financial need of
7 the qualified entity.

8 “(B) The costs and benefits of the commu-
9 nity paramedicine program to be supported
10 through the grant.

11 “(3) JOINT APPLICATIONS.—A qualified entity
12 may submit an application for a grant under this
13 section jointly with one or more other qualified enti-
14 ties.

15 “(e) ADVISORY BOARD.—The Secretary, after con-
16 sultation with national community paramedicine, national
17 fire service, national emergency medical service, and Trib-
18 al health organizations, shall appoint an advisory board—

19 “(1) to advise the Secretary on carrying out the
20 grant program under this section;

21 “(2) to assist the Secretary in preparing the re-
22 port required under subsection (a); and

23 “(3) to conduct peer review of applications for
24 grants under this section.

1 “(f) SELECTION CONSIDERATIONS.—In selecting the
2 recipients of grants under this section, the Secretary shall
3 consider each of the following:

4 “(1) The recommendations of the advisory
5 board appointed under paragraph (1) with respect to
6 the applications for such grants.

7 “(2) The need in the geographic area involved
8 for the community paramedicine program proposed
9 to be funded.

10 “(g) NOTICE TO TRIBAL COMMUNITIES.—The Sec-
11 retary shall give notice of the grant program under this
12 section to the heads of community emergency management
13 for Tribal communities.

14 “(h) MAXIMUM AMOUNT OF AWARDS.—The max-
15 imum amount of an award under this section shall be—

16 “(1) in the case of a qualified entity applying
17 individually, \$750,000; and

18 “(2) in the case of two or more qualified enti-
19 ties applying jointly, \$1,500,000.

20 “(i) PERIOD OF A GRANT.—The period of a grant
21 under this section shall not exceed 5 years.

22 “(j) ADMINISTRATIVE COSTS.—Of the amount re-
23 ceived through a grant under this section for a fiscal year,
24 a grantee may use not more than—

1 “(1) 10 percent for administrative costs for the
2 first year of grant funding; and

3 “(2) 5 percent for administrative costs for any
4 subsequent year of grant funding.

5 “(k) REPORTING BY GRANTEES.—As a condition on
6 receipt of a grant under this section, a qualified entity
7 shall agree to submit to the Secretary such information
8 as the Secretary may require regarding the activities fund-
9 ed through the grant and the results of such activities.

10 “(l) REPORTING BY SECRETARY.—Not later than 90
11 days after the date of enactment of this section, the Sec-
12 retary shall submit a report to the Congress—

13 “(1) detailing the challenges of establishing and
14 operating community paramedicine programs, espe-
15 cially to serve rural and underserved communities;

16 “(2) demonstrating the cost-savings and value
17 of community paramedicine programs to patients,
18 communities, and the health care system; and

19 “(3) providing recommendations for—

20 “(A) establishing, and providing support
21 for ongoing operations of, community
22 paramedicine programs;

23 “(B) serving rural and underserved com-
24 munities through such programs; and

1 “(C) best practices for community
2 paramedicine programs.

3 “(m) DEFINITION.—In this section, the term ‘com-
4 munity paramedicine’ means mobile-integrated health care
5 through which communities utilize specially trained para-
6 medics, often teamed with other health care practitioners
7 or social workers, to—

8 “(1) address health problems;

9 “(2) minimize the use of emergency care re-
10 sources in circumstances when non-emergency re-
11 sources like community paramedic or mobile inte-
12 grated healthcare (MIH) programs might be used,
13 thereby making emergency resources more available;
14 and

15 “(3) enhance access to primary care for medi-
16 cally underserved populations and those with acute
17 and chronic health issues.

18 “(n) FUNDING.—

19 “(1) AUTHORIZATION OF APPROPRIATIONS.—
20 To carry out this section, there is authorized to be
21 appropriated \$25,000,000 for each of fiscal years
22 2025 through 2029.

23 “(2) RESERVATION.—Of the amount appro-
24 priated to award grants under this section for a fis-
25 cal year, the Secretary—

1 “(A) shall reserve 15 percent for appli-
2 cants proposing to use a grant to serve one or
3 more Tribal communities; and

4 “(B) if the full amount of such reservation
5 is not obligated, may reallocate the unobligated
6 portion for grants to other qualified entities.”.