



AMENDMENT NO. \_\_\_\_\_ Calendar No. \_\_\_\_\_

Purpose: In the nature of a substitute.

**IN THE SENATE OF THE UNITED STATES—117th Cong., 1st Sess.**

**S. 610**

To address behavioral health and well-being among health care professionals.

Referred to the Committee on \_\_\_\_\_ and ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT IN THE NATURE OF A SUBSTITUTE intended to be proposed by \_\_\_\_\_

Viz:

1 Strike all after the enacting clause and insert the following:  
2

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Dr. Lorna Breen  
5 Health Care Provider Protection Act”.

6 **SEC. 2. DISSEMINATION OF BEST PRACTICES.**

7 The Secretary of Health and Human Services (referred to in this Act as the “Secretary”) shall identify and  
8 disseminate evidence-based or evidence-informed best  
9 practices for preventing suicide and improving mental  
10 health and resiliency among health care professionals, and  
11 for training health care professionals in appropriate strat-  
12

1 egies to promote their mental health. Such best practices  
2 shall include recommendations related to preventing sui-  
3 cide and improving mental health and resiliency among  
4 health care professionals.

5 **SEC. 3. EDUCATION AND AWARENESS INITIATIVE ENCOUR-**  
6 **AGING USE OF MENTAL HEALTH AND SUB-**  
7 **STANCE USE DISORDER SERVICES BY**  
8 **HEALTH CARE PROFESSIONALS.**

9 (a) IN GENERAL.—The Secretary, in consultation  
10 with relevant stakeholders, including medical professional  
11 associations, shall establish a national evidence-based or  
12 evidence-informed education and awareness initiative to  
13 encourage health care professionals to seek support and  
14 care for their mental health or substance use concerns,  
15 to help such professionals identify risk factors associated  
16 with suicide and mental health conditions, and to help  
17 such professionals learn how best to respond to such risks,  
18 with the goal of preventing suicide, mental health condi-  
19 tions, and substance use disorders, and to address stigma  
20 associated with seeking mental health and substance use  
21 disorder services.

22 (b) REPORTING.—Not later than 2 years after the  
23 date of enactment of this Act, the Secretary shall provide  
24 to the Committee on Health, Education, Labor, and Pen-  
25 sions of the Senate and the Committee on Energy and

1 Commerce of the House of Representatives an update on  
2 the activities and outcomes of the initiative under sub-  
3 section (a), including a description of quantitative and  
4 qualitative metrics used to evaluate such activities and  
5 outcomes.

6 (c) AUTHORIZATION OF APPROPRIATIONS.—To carry  
7 out this section, there are authorized to be appropriated  
8 \$10,000,000 for each of fiscal years 2022 through 2024.

9 **SEC. 4. GRANTS TO PROMOTE MENTAL HEALTH AMONG**  
10 **THE HEALTH PROFESSIONAL WORKFORCE.**

11 Subpart I of part E of title VII of the Public Health  
12 Service Act (42 U.S.C. 294n et seq.) is amended by add-  
13 ing at the end the following:

14 **“SEC. 764. GRANTS TO PROMOTE MENTAL HEALTH AMONG**  
15 **THE HEALTH PROFESSIONAL WORKFORCE.**

16 “(a) IN GENERAL.—The Secretary shall award  
17 grants related to improving mental health and resiliency  
18 among health care professionals.

19 “(b) GRANTS TO PROMOTE MENTAL HEALTH  
20 AMONG HEALTH CARE PROFESSIONALS.—

21 “(1) IN GENERAL.—The Secretary shall award  
22 grants to health care entities, including entities that  
23 provide health care services, such as hospitals, com-  
24 munity health centers, and rural health clinics, or to  
25 medical professional associations, to establish or en-

1       hance evidence-based or evidence-informed programs  
2       dedicated to improving mental health and resiliency  
3       for health care professionals.

4               “(2) USE OF FUNDS.—An eligible entity receiv-  
5       ing a grant under this subsection shall use amounts  
6       under the grant to implement a new program or en-  
7       hance an existing program to promote mental health  
8       among health care professionals, which may in-  
9       clude—

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

15               “(B) establishing new, or enhancing exist-  
16       ing, evidence-based or evidence-informed pro-  
17       grams for preventing suicide and improving  
18       mental health and resiliency among health care  
19       professionals;

20               “(C) establishing new, or enhancing exist-  
21       ing, peer-support programs among health care  
22       professionals; or

23               “(D) providing mental health care, follow-  
24       up services and care, or referral for such serv-  
25       ices and care, as appropriate.

1           “(3) PRIORITY.—In awarding grants under this  
2           subsection, the Secretary shall give priority to eligi-  
3           ble entities in health professional shortage areas or  
4           rural areas.

5           “(c) TRAINING GRANTS.—The Secretary may estab-  
6           lish a program to award grants to health professions  
7           schools, academic health centers, State or local govern-  
8           ments, Indian Tribes or Tribal organizations, or other ap-  
9           propriate public or private nonprofit entities (or consortia  
10          of entities, including entities promoting multidisciplinary  
11          approaches) to support the training of health care stu-  
12          dents, residents, or health care professionals in evidence-  
13          based or evidence-informed strategies to address mental  
14          and substance use disorders and improve mental health  
15          and resiliency among health care professionals.

16          “(d) GRANT TERMS.—A grant awarded under sub-  
17          section (b) or (c) shall be for a period of 3 years.

18          “(e) APPLICATION SUBMISSION.—An entity seeking  
19          a grant under subsection (b) or (c) shall submit an appli-  
20          cation to the Secretary at such time, in such manner, and  
21          accompanied by such information as the Secretary may  
22          require.

23          “(f) REPORTING.—An entity awarded a grant under  
24          subsection (b) or (c) shall periodically submit to the Sec-

1   retary a report evaluating the activities supported by the  
2   grant.

3       “(g) AUTHORIZATION OF APPROPRIATIONS.—To  
4   carry out this section and section 5 of the Dr. Lorna  
5   Breen Health Care Provider Protection Act, there are au-  
6   thorized to be appropriated \$35,000,000 for each of fiscal  
7   years 2022 through 2024.”.

8   **SEC. 5. REVIEW WITH RESPECT TO HEALTH CARE PROFES-**  
9                                   **SIONAL MENTAL HEALTH AND RESILIENCY.**

10       (a) IN GENERAL.—The Secretary, in consultation  
11   with relevant stakeholders, shall conduct a review and, not  
12   later than 3 years after the date of enactment of this Act,  
13   submit a report to Congress related to improving health  
14   care professional mental health and resiliency and the out-  
15   comes of programs authorized under this Act.

16       (b) CONSIDERATIONS.—The review under subsection  
17   (a) shall take into account—

18               (1) factors that contribute to mental health  
19       conditions;

20               (2) barriers to seeking and accessing mental  
21       health care for health care professionals, which may  
22       include consideration of stigma and licensing con-  
23       cerns, and actions taken by State licensing boards,  
24       schools for health professionals, health care profes-  
25       sional training associations, hospital associations, or

1 other organizations, as appropriate, to address such  
2 barriers;

3 (3) the impact of the COVID–19 public health  
4 emergency on the mental health of health care pro-  
5 fessionals and lessons learned for future public  
6 health emergencies;

7 (4) factors that promote mental health and re-  
8 siliency among health care professionals, including  
9 programs or strategies to strengthen mental health  
10 and resiliency among health care professionals; and

11 (5) the efficacy of health professional training  
12 programs that promote resiliency and improve men-  
13 tal health.

14 (c) RECOMMENDATIONS.—The review under sub-  
15 section (a), as appropriate, shall identify best practices re-  
16 lated to, and make recommendations to address—

17 (1) improving mental health and resiliency  
18 among health care professionals;

19 (2) removing barriers to mental health care for  
20 health care professionals; and

21 (3) strategies to promote resiliency among  
22 health care professionals in health care settings.