

# HEALTH LEGISLATIVE ISSUES

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The following pieces of legislation regarding health and minority populations may be relevant to readers of *Ethnicity & Disease*. Information on these bills was current when this issue went to press. We encourage readers to further investigate legislation of interest to your health discipline.

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## **S 1576: MINORITY HEALTH IMPROVEMENT AND HEALTH DISPARITY ELIMINATION ACT**

Ethnic minorities make up 52% of the 45 million Americans who have no health insurance, and they experience higher rates of morbidity and mortality than the White population. Only 6% of the nation's doctors and 7% of nurses and dentists are ethnic minorities, despite constituting approximately one third of the US population.

To help eliminate these disparities, this act will re-

authorize Title VII health workforce diversity programs that help schools recruit and retain minority students and students from disadvantaged backgrounds. Studies demonstrate that minority health professionals are more likely to care for minority patients and in under-served areas, so sustaining the Title VII programs is essential to improving health care for all Americans.

This act also provides grants to communities to increase public awareness about access to health care and disease prevention and reauthorizes the National Center on Minority Health and Health Disparities at the National Institutes of Health and strengthens its role in coordinating and planning minority health and health disparity research. The bill also reauthorizes and strengthens the Office of Minority Health, man-

dates uniform data collection standards for federal health programs, and creates a pharmacogenomics advisory committee at the Food and Drug Administration to address issues related to ethnic minorities.

Sponsor: Sen. Edward M. Kennedy, Edward M. (R-Mass)

Introduced 6/7/2007

Status: Referred to the Committee on Health, Education, Labor, and Pensions.

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## **HR 1601: TELEHEALTH AND MEDICALLY UNDERSERVED AND ADVANCEMENT ACT OF 2007**

Studies state that telehealth improves access to medical care for geographically or socioeconomically isolated patients. Research has consistently shown that the use of telehealth is a major factor in preventing unnecessary patient travel to secondary or tertiary health care centers. Literature states that the use of telehealth can augment the

quality, continuity, and affordability of medical care. The practice of telehealth preserves the patient's current provider-to-patient relationship while facilitating access to specialty care. Telehealth allows patients to obtain medical consultation in their own communities, and the expanded use of telehealth technology will improve the quality

of chronic disease care, increase wellness initiatives, and reduce health disparities among patients.

In consideration of these findings, this act aims to facilitate the provision of telehealth services. This act will increase types of originating telehealth sites and facilitate the provision of telehealth services across state lines. In addition, it will

strengthen telehealth services in rural and under-served urban areas in the United States and establish a Joint Working Group on Telehealth.

Sponsor: Rep. William J. Jefferson (D-La)

Introduced 3/20/2007

Status: Referred to the Subcommittee on Health

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### S 901: HEALTH CENTERS RENEWAL ACT OF 2007

Community, migrant, public housing, and homeless health centers are vital to thousands of communities across the United States. More than 1,000 such health centers serve more than 16,000,000 people at more than 5,000 health delivery sites, located in all 50 of the United States, the District of Columbia, and Puerto Rico, Guam, the Virgin Islands, and other territories of the United States. Health centers provide cost-effective, quality

health care to poor and medically under-served people, including the working poor, the uninsured, and many high-risk and vulnerable populations. Health centers provide care to 1 of every 8 uninsured Americans, 1 of every 4 Americans in poverty, and 1 of every 9 rural Americans.

Health centers are community-oriented and patient-focused and tailor their services to fit the special needs and priorities of local communities, working to-

gether with schools, businesses, churches, community organizations, foundations, and state and local governments. Health centers encourage citizen participation and provide jobs for 50,000 community residents. Expert studies have demonstrated that these community-owned and patient-controlled primary care delivery systems have reduced traditional access barriers and eliminated health disparities among their patients. In order

to ensure that these health centers are allowed to continue serving their communities, this act will amend the Public Health Service Act to provide additional authorizations of appropriations for the health centers program.

Sponsor: Sen. Edward M. Kennedy, Edward M. (D-Mass)

Introduced 3/15/2007

Status: Referred to the Committee on Health, Education, Labor, and Pensions