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(Original Signature of Member)

119TH CONGRESS
2D SESSION

H. R. _____

To amend the Public Health Service Act to improve reproductive health care of individuals with disabilities.

IN THE HOUSE OF REPRESENTATIVES

Ms. PRESSLEY introduced the following bill; which was referred to the Committee on _____

A BILL

To amend the Public Health Service Act to improve reproductive health care of individuals with disabilities.

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 “Reproductive Health
5 Care Accessibility Act”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) In the United States, approximately 1 in 4
9 adults have some type of disability, more than 1 in

1 10 individuals with disabilities can become pregnant,
2 and over 4,100,000 individuals are parents with dis-
3 abilities.

4 (2) All people, including individuals with dis-
5 abilities, have the right to decide if, when, and how
6 to start and raise a family, as well as to have
7 healthy pregnancies and postpartum periods.

8 (3) Titles II and III of the Americans with Dis-
9 abilities Act of 1990 (42 U.S.C. 12131 et seq. and
10 12181 et seq.), section 504 of the Rehabilitation Act
11 of 1973 (29 U.S.C. 794), and section 1557 of the
12 Patient Protection and Affordable Care Act (42
13 U.S.C. 18116) provide individuals with disabilities
14 with the right to equitably access and receive health
15 care.

16 (4) Disabled individuals face unique barriers
17 when accessing reproductive health care, including
18 accessibility issues at health care facilities, lack of
19 accessible medical diagnostic equipment, barriers to
20 accessible travel, delay in receiving preventative serv-
21 ices, and lack of health care providers with training
22 and knowledge on the needs of individuals with dis-
23 abilities receiving reproductive health care.

24 (5) Reproductive health care is critical to an in-
25 dividual's long-term health. Disabled individuals

1 have higher mortality rates from reproductive re-
2 lated cancers often due to lack of access to reproduc-
3 tive health care, higher rates of maternal mortality
4 and morbidity, and often experience earlier onset
5 menopause.

6 (6) The United States Access Board has estab-
7 lished standards for accessible medical diagnostic
8 equipment that were adopted by the Department of
9 Health and Human Services and the Department of
10 Justice in 2024. Awareness about the standards re-
11 mains low among providers. Greater provider edu-
12 cation, implementation, and enforcement of the
13 standards is necessary to ensure equally effective re-
14 productive and sexual health care for individuals
15 with disabilities.

16 (7) Disabled individuals have an equal right to
17 reproductive autonomy, but harmful stereotypes
18 about individuals with disabilities create barriers to
19 getting care that respects that autonomy.

20 (8) Laws that restrict access to reproductive
21 health care, including abortion care,
22 disproportionately harm individuals who already face
23 barriers to reproductive health care, which includes
24 disabled individuals.

1 (9) Individuals with and without disabilities
2 want children at the same frequency, but individuals
3 with disabilities are less likely to receive contracep-
4 tion counseling and timely prenatal care, experience
5 a higher rate of sterilization, and are at a greater
6 risk for adverse pregnancy outcomes.

7 (10) Diversity and inclusion in the health care
8 workforce is a critical factor in the delivery of high-
9 quality, culturally competent health care and im-
10 proves patient outcomes. However, the rate of stu-
11 dents and trainees with disabilities in medical and
12 allied health education remains low compared to
13 those without disabilities.

14 **SEC. 3. PROGRAM FOR TRAINING THE WORKFORCE.**

15 Part D of title VII of the Public Health Service Act
16 (42 U.S.C. 294 et seq.) is amended by adding at the end
17 the following:

18 **“SEC. 760A. PROGRAM FOR TRAINING THE WORKFORCE**
19 **CONCERNING REPRODUCTIVE HEALTH CARE**
20 **FOR INDIVIDUALS WITH DISABILITIES.**

21 “(a) IN GENERAL.—The Secretary, acting through
22 the Administrator of the Health Resources and Services
23 Administration and in consultation with the Administrator
24 of the Administration for Community Living, shall award
25 grants, contracts, or cooperative agreements to eligible en-

1 tities to carry out training programs for health care pro-
2 fessionals and trainees on providing equitable sexual and
3 reproductive health care for individuals with disabilities.

4 “(b) ELIGIBILITY.—

5 “(1) IN GENERAL.—To be eligible to receive an
6 award under this section, an entity shall be a public
7 or private nonprofit entity with demonstrated exper-
8 tise in serving individuals with disabilities, which
9 may include—

10 “(A) a multidisciplinary health care pro-
11 vider who provides sexual and reproductive
12 health care, such as federally qualified health
13 centers and Title X clinics;

14 “(B) institutions of higher education, as
15 defined in section 101 of the Higher Education
16 Act of 1965, with expertise in sexual and repro-
17 ductive health care;

18 “(C) an entity primarily led by individuals
19 with disabilities;

20 “(D) an entity with expertise in reproduc-
21 tive rights and justice;

22 “(E) an Indian Tribe, Tribal organization,
23 or urban Indian organization; or

24 “(F) a consortium of entities described in
25 any of subparagraphs (A) through (E).

1 “(2) APPLICATION.—To be eligible to receive an
2 award under this section, an eligible entity shall sub-
3 mit to the Secretary an application at such time, in
4 such manner, and containing such information as
5 the Secretary may require, that includes—

6 “(A) a description of the eligible entity’s or
7 consortium of entities’ expertise in providing
8 technical assistance and training, including evi-
9 dence such as—

10 “(i) knowledge of the rights afforded
11 to individuals with a disability under rel-
12 evant Federal and State law;

13 “(ii) knowledge of accessibility stand-
14 ards established by the United States Ac-
15 cess Board;

16 “(iii) expertise in evidence-based or
17 evidence-informed practices in providing
18 trauma-informed sexual and reproductive
19 health care, including preventive health
20 care services and perinatal care, to individ-
21 uals with disabilities and those facing com-
22 pounded barriers to accessing care;

23 “(iv) experience working with health
24 care providers, public or private nonprofit
25 entities, or Federal, State, or local agencies

1 focusing on sexual and reproductive health
2 care services for individuals with disabili-
3 ties;

4 “(v) experience working with individ-
5 uals with disabilities and their families;

6 “(vi) expertise in providing, collecting,
7 compiling, communicating, and dissemi-
8 nating sexual and reproductive health care
9 information in culturally and linguistically
10 appropriate manner especially in easily ac-
11 cessible formats; and

12 “(vii) experience improving coordina-
13 tion of services, such as mental health,
14 substance use disorder prevention, treat-
15 ment, and recovery support services, social
16 services, other health care services, and
17 transportation services for individuals with
18 disabilities;

19 “(B) a description of the activities to be
20 funded under the award and the goals of such
21 activities, including a description of—

22 “(i) the training or education program
23 to be implemented that meets the require-
24 ments of subsection (c);

1 “(ii) the process to be used to identify
2 health care providers that will participate
3 in the training program, including the
4 process to increase diversity in the pool of
5 participating providers;

6 “(iii) the process to be used to engage
7 stakeholders in such training, including in-
8 dividuals with disabilities; and

9 “(iv) the eligible entity’s evaluation
10 plan to determine the scope and impact of
11 the training program;

12 “(C) an assurance that the recipients of
13 the training will receive ongoing and com-
14 prehensive training or professional development
15 on the sexual and reproductive health care
16 needs of individuals with disabilities; and

17 “(D) any other assurances that the Sec-
18 retary may require.

19 “(3) SUBAWARDS.—An eligible entity or eligible
20 consortium receiving an award under this section
21 may, for contracting purposes, make subawards to
22 individuals or entities with expertise in sexual and
23 reproductive health care and serving individuals with
24 disabilities.

1 “(c) USE OF FUNDS.—An entity or entities shall use
2 amounts received under this section to carry out a training
3 program for health care professionals providing sexual and
4 reproductive health care that provides training con-
5 cerning—

6 “(1) comprehensive disability clinical care cur-
7 ricula to inform health care professionals providing
8 sexual and reproductive health care on how to pro-
9 vide effective, interprofessional team-based health
10 care;

11 “(2) comprehensive clinical care curricula on
12 how disability-based and intersectional discrimina-
13 tion shapes sexual and reproductive health care ac-
14 cess and quality for disabled individuals, including
15 historical and ongoing practices;

16 “(3) culturally and linguistically competent care
17 for individuals with disabilities;

18 “(4) delivering sexual and reproductive health
19 care for individuals with disabilities in a manner
20 that emphasizes the independence, self-determina-
21 tion, and choices of individuals with disabilities with
22 respect to their sexual and reproductive health
23 through comprehensive disability clinical care cur-
24 ricula;

1 “(5) the rights afforded to individuals with dis-
2 abilities under relevant Federal and State law; and

3 “(6) methods and evidence-based or evidence-in-
4 formed practices for providing sexual and reproduc-
5 tive health care, including preventive health care
6 services, to individuals with disabilities.

7 “(d) EVALUATION AND REPORT.—

8 “(1) IN GENERAL.—An entity or entities that
9 receives an award under this section shall, at the
10 end of the award period, carry out an evaluation of
11 outcomes achieved through the program in training
12 health care professionals providing sexual and repro-
13 ductive health care, consistent with the purposes of
14 this section.

15 “(2) REPORT.—Not later than 180 days after
16 the end of the award period, an entity that receives
17 an award under this section shall submit to the Sec-
18 retary a report on the results of the evaluation con-
19 ducted under paragraph (1).

20 “(3) SECRETARY.—The Secretary shall annu-
21 ally compile the reports submitted under paragraph
22 (2) and submit such compilation to the Committee
23 on Health, Education, Labor, and Pensions of the
24 Senate and the Committee on Energy and Com-
25 merce of the House of Representatives. Such com-

1 pilations shall be posted on the internet website of
2 the Department of Health and Human Services in
3 an accessible format.

4 “(e) DEFINITIONS.—In this section:

5 “(1) DISABILITY.—The terms ‘disability’ and
6 ‘disabilities’ have the meaning given such terms for
7 purposes of the Americans with Disabilities Act of
8 1990.

9 “(2) INDIAN TRIBE; TRIBAL ORGANIZATION.—
10 The terms ‘Indian Tribe’ and ‘Tribal organization’
11 have the meaning given such terms in section 4 of
12 the Indian Self-Determination and Education Assist-
13 ance Act.

14 “(3) URBAN INDIAN ORGANIZATION.—The term
15 ‘Urban Indian organization’ has the meaning given
16 such term in section 4 of the Indian Health Care
17 Improvement Act.

18 “(f) AUTHORIZATION OF APPROPRIATIONS.—There
19 is authorized to be appropriated to carry out this section,
20 \$10,000,000 for each of fiscal years 2027 through 2031.
21 Funds provided to carry out this section shall supplement
22 not supplant funds otherwise made available to carry out
23 this title.”.

1 **SEC. 4. PROGRAM FOR EXPANDING THE REPRODUCTIVE**
2 **HEALTH CARE PROVIDER WORKFORCE.**

3 Part B of title VII of the Public Health Service Act
4 (42 U.S.C. 293 et seq.) is amended by adding at the end
5 the following:

6 **“SEC. 742. PROGRAM FOR EXPANDING THE REPRODUCTIVE**
7 **HEALTH CARE PROVIDER WORKFORCE.**

8 “(a) PURPOSE.—It is the purpose of this section—

9 “(1) to establish and sustain a competitive
10 health professions applicant pool of individuals with
11 disabilities by increasing the total number of individ-
12 uals with disabilities who pursue a career in sexual
13 and reproductive health care, including abortion care
14 and maternal health care; and

15 “(2) to develop a culturally and linguistically
16 competent health care workforce providing sexual
17 and reproductive health care that will serve unserved
18 and underserved populations, including individuals
19 with disabilities.

20 “(b) AWARDS.—To assist individuals with disabilities
21 in undertaking education to enter into the sexual and re-
22 productive health care workforce, the Secretary may
23 award grants, contracts, or cooperative agreements to
24 public or private nonprofit health or educational entities,
25 including schools of medicine, schools of osteopathic medi-
26 cine, schools of nursing, and other institutions of higher

1 education, that offer programs, including graduate pro-
2 grams, in obstetrics and gynecology, comprehensive sexual
3 and reproductive health care, or programs for the training
4 of health care providers to enable such entities to carry
5 out the activities described in subsection (d).

6 “(c) APPLICATION.—To be eligible to receive an
7 award under subsection (b), an entity described in such
8 subsection shall submit to the Secretary an application at
9 such time, in such manner, and containing such informa-
10 tion as the Secretary may require.

11 “(d) USE OF FUNDS.—An entity shall use amounts
12 received under an award under subsection (b) to—

13 “(1) conduct or support activities to develop a
14 competitive applicant pool, through partnership with
15 public or private nonprofit institutions of higher
16 education, local educational agencies, health care
17 providers, such as sexual and reproductive health
18 care providers and primary care providers, or other
19 community-based entities, and establish an edu-
20 cation pipeline for individuals with disabilities enter-
21 ing the sexual and reproductive health care work-
22 force;

23 “(2) establish, strengthen, or expand programs
24 to support the academic performance of individuals

1 with disabilities participating in activities funded
2 under this section, including mentorship programs;

3 “(3) identify, recruit, enroll, and retain individ-
4 uals with disabilities in education and training re-
5 lated to sexual and reproductive health care;

6 “(4) improve the capacity of the entity involved
7 to train, recruit, and retain faculty with disabilities
8 including the payment of such stipends and fellow-
9 ships as the Secretary may determine appropriate;

10 “(5) carry out activities to improve the informa-
11 tion resources, clinical education, curricula, and
12 competencies of the graduates of the entity involved,
13 as it relates to individuals with disabilities;

14 “(6) facilitate faculty and student research on
15 health issues affecting individuals with disabilities,
16 including research on issues relating to the delivery
17 of sexual and reproductive health care to individuals
18 with disabilities;

19 “(7) carry out programs, or offer experiences,
20 to train students in providing sexual and reproduc-
21 tive health services to individuals with disabilities at
22 community-based health facilities that provide sexual
23 and reproductive health services;

24 “(8) provide stipends to individuals with disabil-
25 ities participating in activities funded under this sec-

1 tion as the Secretary determines appropriate, in
2 amounts as the Secretary determines appropriate,
3 with an assurance that such stipends shall not result
4 in loss of an individual's Federal or State benefits;
5 or

6 “(9) carry out any other activities that the Sec-
7 retary may require.

8 “(e) PREFERENCE.—In awarding grants, contracts,
9 or cooperative agreements under this section, the Sec-
10 retary shall give preference to applications that have been
11 approved for programs that involve a comprehensive ap-
12 proach through multiple entities described in subsection
13 (b) to establish, enhance, and expand educational pro-
14 grams that will result in the development of a competitive
15 applicant pool of individuals with disabilities who desire
16 to pursue careers in sexual and reproductive health care
17 services.

18 “(f) CONSIDERATION FOR AWARDS.—In awarding
19 grants, contracts, or cooperative agreements under this
20 section, the Secretary shall—

21 “(1) consider current enrollment trends and the
22 needs of certain populations, including individuals
23 with disabilities; and

1 “(2) align and coordinate with other training
2 programs administered by the Health Resources and
3 Services Administration.

4 “(g) EFFECT ON OTHER PROGRAMS.—Assistance or
5 stipends provided to an individual under this section shall
6 not be considered when applying asset or resource limita-
7 tion provisions related to the eligibility of such individual
8 for any benefit, assistance, or service provided under any
9 Federal or State program.

10 “(h) REPORT.—Not later than 180 days after the end
11 of the award period, the Secretary shall submit to the
12 Committee on Health, Education, Labor, and Pensions of
13 the Senate and the Committee on Energy and Commerce
14 of the House of Representatives, a report concerning the
15 activities carried out under this section to increase the rep-
16 resentation of individuals with disabilities in the sexual
17 and reproductive health profession and related training
18 programs.

19 “(i) AUTHORIZATION OF APPROPRIATIONS.—There is
20 authorized to be appropriated to carry out this section,
21 \$15,000,000 for each of fiscal years 2027 through 2031.
22 Funds provided to carry out this section shall supplement
23 not supplant funds otherwise made available to carry out
24 this title.”.

1 **SEC. 5. EXPANDING THE REPRODUCTIVE HEALTH CARE**
2 **NURSING WORKFORCE.**

3 Section 821 of the Public Health Service Act (42
4 U.S.C. 296m) is amended by adding at the end the fol-
5 lowing:

6 “(d) EXPANDING THE REPRODUCTIVE HEALTH
7 CARE NURSING WORKFORCE.—

8 “(1) AWARDS.—To assist individuals with dis-
9 abilities in undertaking education to enter into the
10 reproductive nursing workforce, the Secretary may
11 award grants, contracts, or cooperative agreements
12 under subsection (a)(1) to eligible entities to enable
13 such entities to carry out the activities described in
14 paragraph (3).

15 “(2) APPLICATION.—To be eligible to receive an
16 award under paragraph (1), an entity described in
17 such paragraph shall submit to the Secretary an ap-
18 plication at such time, in such manner, and con-
19 taining such information as the Secretary may re-
20 quire.

21 “(3) USE OF FUNDS.—An entity shall use
22 amounts received under an award under paragraph
23 (1) to—

24 “(A) conduct activities to develop a com-
25 petitive applicant pool, through partnership
26 with public or private nonprofit institutions of

1 higher education, local educational agencies,
2 nurse-managed health clinics, health care pro-
3 viders, such as sexual and reproductive health
4 care providers and nurses, or other community-
5 based entities, and establish an education pipe-
6 line for individuals with disabilities entering the
7 sexual and reproductive health care nursing
8 workforce;

9 “(B) establish, strengthen, or expand pro-
10 grams to support the academic performance of
11 individuals with disabilities participating in ac-
12 tivities funded under this subsection, including
13 mentorship programs;

14 “(C) identify, recruit, enroll, and retain in-
15 dividuals with disabilities in education and
16 training related to sexual and reproductive
17 health care;

18 “(D) improve the capacity of the entity in-
19 volved to train, recruit, and retain faculty with
20 disabilities, including the payment of such sti-
21 pends and fellowships as the Secretary may de-
22 termine appropriate;

23 “(E) carry out activities to improve the in-
24 formation resources, clinical education, cur-
25 ricula, and competencies of the graduates of the

1 entity involved, as it relates to individuals with
2 disabilities;

3 “(F) facilitate faculty and student research
4 to include evidence-based practice and quality
5 improvement projects focused on health issues
6 affecting individuals with disabilities, including
7 research on issues relating to the delivery of
8 sexual and reproductive health care to individ-
9 uals with disabilities;

10 “(G) carry out programs, or offer experi-
11 ences, to train students in providing sexual and
12 reproductive health services to individuals with
13 disabilities at community-based health care fa-
14 cilities that provide sexual and reproductive
15 health services;

16 “(H) provide stipends to individuals with
17 disabilities participating in activities funded
18 under this subsection as the Secretary deter-
19 mines appropriate, in amounts as the Secretary
20 determines appropriate, with an assurance that
21 such stipends shall not result in the loss of an
22 individual’s Federal or State benefits; or

23 “(I) carry out any other activities that the
24 Secretary may require.

1 “(4) PREFERENCE.—In awarding grants, con-
2 tracts, or cooperative agreements under this sub-
3 section, the Secretary shall give preference to appli-
4 cations that have been approved for programs that
5 involve a comprehensive approach through multiple
6 entities described in paragraph (1) to establish, en-
7 hance, and expand educational programs that will
8 result in the development of a competitive applicant
9 pool of individuals with disabilities who desire to
10 pursue careers in sexual and reproductive health
11 care services.

12 “(5) CONSIDERATION FOR AWARDS.—In award-
13 ing grants, contracts, or cooperative agreements
14 under this subsection, the Secretary shall—

15 “(A) consider current enrollment trends
16 and the needs of certain populations, including
17 individuals with disabilities; and

18 “(B) align and coordinate with other train-
19 ing programs administered by the Health Re-
20 sources and Services Administration.

21 “(6) EFFECT ON OTHER PROGRAMS.—Assist-
22 ance or stipends provided to an individual under this
23 subsection shall not be considered when applying
24 asset or resource limitation provisions related to the
25 eligibility of such individual for any benefit, assist-

1 ance, or service provided under any Federal or State
2 program.

3 “(7) REPORT.—Not later than 180 days after
4 the end of the award period, the Secretary shall sub-
5 mit to the Committee on Health, Education, Labor,
6 and Pensions of the Senate and the Committee on
7 Energy and Commerce of the House of Representa-
8 tives, a report concerning the activities carried out
9 under this subsection to increase the representation
10 of individuals with disabilities in the sexual and re-
11 productive health profession and related training
12 programs.

13 “(8) AUTHORIZATION OF APPROPRIATIONS.—
14 There is authorized to be appropriated to carry out
15 this subsection, \$15,000,000 for each of fiscal years
16 2027 through 2031. Funds provided to carry out
17 this subsection shall supplement not supplant funds
18 otherwise made available to carry out this title.”.

19 **SEC. 6. PROGRAM FOR REPRODUCTIVE HEALTH EDU-**
20 **CATION.**

21 (a) IN GENERAL.—The Secretary of Health and
22 Human Services (referred to in this section as the “Sec-
23 retary”), acting through the Administrator of the Health
24 Resources and Services Administration and in consulta-
25 tion with the Administrator of the Administration for

1 Community Living, shall award grants, contracts, or coop-
2 erative agreements to eligible entities to provide funding
3 for education programs focused on sexual and reproduc-
4 tive health needs for individuals with disabilities.

5 (b) ELIGIBILITY.—

6 (1) IN GENERAL.—To be eligible to receive an
7 award under this section an entity shall be a public
8 or private nonprofit entity with a demonstrated ex-
9 pertise in serving individuals with disabilities, which
10 may include—

11 (A) a multidisciplinary health care provider
12 who provides sexual and reproductive health
13 care services, such as a federally qualified
14 health center or a Title X clinic;

15 (B) institutions of higher education, as de-
16 fined in section 101 of the Higher Education
17 Act of 1965, with expertise in sexual and repro-
18 ductive health care;

19 (C) an entity primarily led by individuals
20 with disabilities;

21 (D) an entity with expertise in reproduc-
22 tive rights and justice;

23 (E) an Indian Tribe, Tribal organization,
24 or Urban Indian organization; and

1 (F) a consortium of entities described in
2 any of subparagraphs (A) through (E).

3 (2) APPLICATION.—To be eligible to receive a
4 grant, contract, or cooperative agreement under this
5 section, an eligible entity or consortium of entities
6 shall submit to the Secretary an application at such
7 time, in such manner, and containing such informa-
8 tion as the Secretary may require, that includes a
9 description of the eligible entity’s or entities’ exper-
10 tise in providing education programs including evi-
11 dence that such entity has—

12 (A) knowledge of best practices in pro-
13 viding sexual and reproductive health care, in-
14 cluding preventive health care services, to indi-
15 viduals with disabilities;

16 (B) experience working with individuals
17 with disabilities and their families; and

18 (C) demonstrated expertise of developing
19 materials in culturally and linguistically acces-
20 sible formats including plain language.

21 (3) SUBAWARDS.—An eligible entity or eligible
22 consortium receiving an award under this section
23 may, for contracting purposes, make subawards to
24 individuals or entities with expertise in sexual and

1 reproductive health care and serving individuals with
2 disabilities.

3 (c) USE OF FUNDS.—An entity shall use amounts re-
4 ceived under subsection (a) to—

5 (1) carry out evidence-based or evidence-in-
6 formed sexual and reproductive health education
7 programs for individuals with disabilities, including
8 youth, in culturally and linguistically accessible for-
9 mats;

10 (2) develop sexual and reproductive health edu-
11 cation programs in culturally and linguistically ac-
12 cessible formats to be used in carrying out para-
13 graph (1);

14 (3) provide education to individuals with dis-
15 abilities, including youth, concerning abortion care
16 options and their sexual, reproductive, and perinatal
17 health care needs;

18 (4) provide education to individuals with dis-
19 abilities, including youth, concerning their rights
20 under relevant Federal and State law;

21 (5) provide access to disability affirmative and
22 supportive clinical resources that are accessible to
23 individuals with disabilities;

24 (6) build the entity's capacity and enhance their
25 leadership of the entity within the community to

1 promote community engagement in, and advance-
2 ment of, evidence-based or evidence-informed sexual
3 and reproductive health care education in easily ac-
4 cessible formats; and

5 (7) support dissemination of newly developed
6 sexual and reproductive health care education pro-
7 grams as described in paragraph (2) throughout the
8 State, territorial, and Tribal communities.

9 (d) EVALUATION AND REPORT.—

10 (1) IN GENERAL.—An entity that receives an
11 award under this section shall, at the end of the
12 award period, carry out an evaluation of success of
13 the entity in achieving the goals of the program for
14 which the award was made.

15 (2) REPORT.—Not later than 180 days after
16 the end of the award period, an entity that receives
17 an award under this section shall submit to the Sec-
18 retary a report on the results of the evaluation con-
19 ducted under paragraph (1).

20 (3) SECRETARY.—The Secretary shall annually
21 compile the reports submitted under paragraph (2)
22 and submit such compilation to the Committee on
23 Health, Education, Labor, and Pensions of the Sen-
24 ate and the Committee on Energy and Commerce of
25 the House of Representatives. Such compilations

1 shall be posted on the website of the Department of
2 Health and Human Services in an accessible format.

3 (e) DEFINITIONS.—In this section:

4 (1) DISABILITY.—The terms “disability” and
5 “disabilities” have the meaning given such terms for
6 purposes of the Americans with Disabilities Act of
7 1990 (42 U.S.C. 12101 et seq.).

8 (2) INDIAN TRIBE; TRIBAL ORGANIZATION.—
9 The terms “Indian Tribe” and “Tribal organiza-
10 tion” have the meaning given such terms in section
11 4 of the Indian Self-Determination and Education
12 Assistance Act (25 U.S.C. 5304).

13 (3) URBAN INDIAN ORGANIZATION.—The term
14 “Urban Indian organization” has the meaning given
15 such term in section 4 of the Indian Health Care
16 Improvement Act (25 U.S.C. 1603).

17 (f) AUTHORIZATION OF APPROPRIATIONS.—There is
18 authorized to be appropriated to carry out this section,
19 \$10,000,000 for each of fiscal years 2027 through 2031.

20 **SEC. 7. NATIONAL TECHNICAL ASSISTANCE CENTER.**

21 (a) ESTABLISHMENT.—The Secretary of Health and
22 Human Services, acting through the Administration for
23 Community Living, shall directly, or through a grant, con-
24 tract, or cooperative agreement, establish a National Tech-
25 nical Assistance Center to—

1 (1) provide recommendations and best practices
2 to States, territories, Indian Tribes, Tribal organiza-
3 tions, and Urban Indian organizations concerning
4 improving coordination of services including mental
5 health and substance use disorder services, social
6 services, health care, and transportation to increase
7 access to quality, integrated systems of accessible,
8 comprehensive disability clinical care, and services
9 for individuals with disabilities;

10 (2) provide technical assistance to health care
11 providers on culturally and linguistically accessible
12 and appropriate sexual and reproductive health care,
13 including before, during, and after pregnancy and
14 perinatal care and family planning services;

15 (3) develop resources and provide technical as-
16 sistance to assist covered entities in complying with
17 applicable Federal laws and regulations; and

18 (4) develop resources for individuals with dis-
19 abilities facing barriers to accessible care, including
20 related to accessible medical diagnostic equipment
21 and the Barrier-Free Health Care Initiative.

22 (b) DEFINITIONS.—In this section:

23 (1) DISABILITY.—The terms “disability” and
24 “disabilities” have the meaning given such terms for

1 purposes of the Americans with Disabilities Act of
2 1990 (42 U.S.C. 12101 et seq.).

3 (2) INDIAN TRIBE; TRIBAL ORGANIZATION.—
4 The terms “Indian Tribe” and “Tribal organiza-
5 tion” have the meaning given such terms in section
6 4 of the Indian Self-Determination and Education
7 Assistance Act (25 U.S.C. 5304).

8 (3) URBAN INDIAN ORGANIZATION.—The term
9 “Urban Indian organization” has the meaning given
10 such term in section 4 of the Indian Health Care
11 Improvement Act (25 U.S.C. 1603).

12 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
13 authorized to be appropriated to carry out this section,
14 \$10,000,000 for each of fiscal years 2027 through 2031.

15 **SEC. 8. RESEARCH STUDY.**

16 (a) IN GENERAL.—The Secretary of Health and
17 Human Services, in consultation with the Administrator
18 of the Administration for Community Living, shall carry
19 out a study to—

20 (1) identify the types of programs and services
21 that have demonstrated effectiveness in providing
22 sexual and reproductive health care services for indi-
23 viduals with disabilities;

24 (2) analyze the effectiveness of Federal, State,
25 Tribal, and local partnerships to coordinate efforts

1 to ensure an integrated system of accessible, com-
2 prehensive sexual and reproductive health care for
3 individuals with disabilities; and

4 (3) identify necessary memoranda of under-
5 standing or interagency agreements that are needed
6 to foster data and public health research focusing on
7 sexual and reproductive health care barriers for indi-
8 viduals with disabilities.

9 (b) REPORT.—Not later than 3 years after the date
10 of enactment of this Act, the Secretary of Health and
11 Human Services shall submit to the Committee on Health,
12 Education, Labor, and Pensions of the Senate and the
13 Committee on Energy and Commerce and the Committee
14 on Education and Workforce of the House of Representa-
15 tives, a report on the results of the study conducted under
16 subsection (a).

17 (c) DEFINITION.—In this section the terms “dis-
18 ability” and “disabilities” have the meanings given such
19 terms for purposes of the Americans with Disabilities Act
20 of 1990 (42 U.S.C. 12101 et seq.).

21 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
22 authorized to be appropriated to carry out this section,
23 \$15,000,000 for fiscal year 2027.