115TH CONGRESS 2D SESSION

H.R. 767

AN ACT

To establish the Stop, Observe, Ask, and Respond to Health and Wellness Training pilot program to address human trafficking in the health care system.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

- This Act may be cited as the "Stop, Observe, Ask,
- 3 and Respond to Health and Wellness Act of 2018" or the
- 4 "SOAR to Health and Wellness Act of 2018".
- 5 SEC. 2. DEFINITIONS.
- 6 In this Act:
- 7 (1) Human trafficking.—The term "human
- 8 trafficking" has the meaning given the term "severe
- 9 forms of trafficking in persons" as defined in section
- 10 103 of the Trafficking Victims Protection Act of
- 11 2000 (22 U.S.C. 7102).
- 12 (2) Secretary.—The term "Secretary" means
- the Secretary of Health and Human Services.
- 14 SEC. 3. PROGRAM ESTABLISHMENT.
- 15 (a) IN GENERAL.—The Secretary shall establish a
- 16 program to be known as the Stop, Observe, Ask, and Re-
- 17 spond to Health and Wellness Training Program or the
- 18 SOAR to Health and Wellness Training Program (in this
- 19 Act referred to as the "Program") to provide training to
- 20 health care providers and other related providers, at all
- 21 levels, on human trafficking in accordance with the pur-
- 22 pose described in subsection (c).
- 23 (b) Grants.—The Secretary may carry out the Pro-
- 24 gram through the award of grants to health care sites and
- 25 health care professional organizations that represent di-
- 26 versity in—

1	(1) geography;
2	(2) the demographics of the population served;
3	(3) the predominant types of human trafficking
4	cases; and
5	(4) health care provider profiles.
6	(c) Purpose.—The purpose of the Program shall be
7	to train health care providers and other related providers
8	to enable such providers to—
9	(1) identify potential human trafficking victims;
10	(2) implement proper protocols and procedures
11	for working with law enforcement to report, and fa-
12	cilitate communication with, such victims, in accord-
13	ance with all applicable Federal, State, local, and
14	tribal requirements, including legal confidentiality
15	requirements for patients and health care providers;
16	(3) implement proper protocols and procedures
17	for referring such victims to appropriate health care,
18	social, or victims service agencies or organizations;
19	(4) provide such victims care that is—
20	(A) coordinated;
21	(B) victim centered;
22	(C) culturally relevant;
23	(D) comprehensive;
24	(E) evidence-based;
25	(F) gender responsive;

1	(G) age-appropriate, with a focus on care
2	for youth; and
3	(H) trauma-informed; and
4	(5) consider the potential for integrating the
5	training described in paragraphs (1) through (4)
6	with training programs, in effect on the date of en-
7	actment of this Act, for victims of domestic violence,
8	dating violence, sexual assault, stalking, child abuse,
9	child neglect, child maltreatment, and child sexual
10	exploitation.
11	(d) Functions.—
12	(1) In general.—The functions of the Pro-
13	gram shall include the functions of the Stop, Ob-
14	serve, Ask, and Respond to Health and Wellness
15	Training program that was operating on the day be-
16	fore the date of enactment of this Act and the au-
17	thorized initiatives described in paragraph (2).
18	(2) Authorized initiatives.—The authorized
19	initiatives of the Program shall include—
20	(A) engaging stakeholders, including vic-
21	tims of human trafficking and any Federal,
22	State, local, or tribal partners, to develop a
23	flexible training module—
24	(i) for achieving the purpose described
25	in subsection (c); and

1	(ii) that adapts to changing needs,
2	settings, health care providers, and other
3	related providers;
4	(B) providing technical assistance for
5	health education programs and health care pro-
6	fessional organizations to implement health care
7	protocols, or develop continuing education train-
8	ing materials, that assist in achieving the pur-
9	pose described in subsection (c);
10	(C) facilitating the dissemination of best
11	practices and recommendations as the Secretary
12	determines appropriate; and
13	(D) developing a reliable methodology for
14	collecting data, and reporting such data, on the
15	number of human trafficking victims identified
16	and served in health care settings or other re-
17	lated provider settings.
18	SEC. 4. DATA COLLECTION AND REPORTING REQUIRE-
19	MENTS.
20	(a) Data Collection.—
21	(1) In general.—During each of fiscal years
22	2018 through 2022, the Secretary shall collect data
23	on each of the following:
24	(A) The total number of grantees oper-
25	ating under the Program.

- 1 (B) The total number of health care pro-2 viders and other related providers trained
- 3 through the Program.
- 4 (2) Initial report.—In addition to the data
- 5 required to be collected under paragraph (1), for
- 6 purposes of the initial report to be submitted under
- 7 subsection (b), the Secretary shall collect data on
- 8 the total number of facilities and health care profes-
- 9 sional organizations that were operating under, and
- the total number of health care providers and other
- 11 related providers trained through, the Stop, Observe,
- 12 Ask, and Respond to Health and Wellness Training
- program that was operating before the establishment
- under section 3(a) of the Program.
- 15 (b) REPORTING.—Not later than 90 days after the
- 16 first day of each of fiscal years 2019 through 2023, the
- 17 Secretary shall prepare and submit to Congress a report
- 18 on the data collected under subsection (a).

19 SEC. 5. AUTHORIZATION OF APPROPRIATIONS.

- There is authorized to be appropriated to carry out
- 21 this Act \$4,000,000 for each of fiscal years 2018 through
- 22 2022.

23 SEC. 6. CUT-GO COMPLIANCE.

- Subsection (f) of section 319D of the Public Health
- 25 Service Act (42 U.S.C. 247d-4) is amended by striking

- 1 "through 2018" and inserting "through 2017, and
- 2 \$118,300,000 for fiscal year 2018".

Passed the House of Representatives February 26, 2018.

Attest:

Clerk.

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