

114TH CONGRESS  
2D SESSION

**S.** \_\_\_\_\_

To direct the Secretary of Health and Human Services to conduct a study on the designation of surgical health professional shortage areas.

---

IN THE SENATE OF THE UNITED STATES

Mr. GRASSLEY (for himself and Mr. SCHATZ) introduced the following bill; which was read twice and referred to the Committee on

---

**A BILL**

To direct the Secretary of Health and Human Services to conduct a study on the designation of surgical health professional shortage areas.

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 “Ensuring Access to  
5 General Surgery Act of 2016”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

1           (1) According to the Bureau of Health Work-  
2           force, the United States faces a shortage of physi-  
3           cians.

4           (2) In order to accurately prepare for future  
5           physician workforce demands, comprehensive, impar-  
6           tial research and high quality data is needed to in-  
7           form dynamic projections of physician workforce  
8           needs.

9           (3) A variety of factors, including health out-  
10          comes, utilization trends, growing and aging popu-  
11          lations, and delivery system changes, influence work-  
12          force needs and should be considered as part of  
13          flexible projections of workforce needs.

14          (4) Given the particularly acute needs for sur-  
15          geons in many rural areas, additional efforts to as-  
16          sess adequacy of the current surgeon workforce are  
17          necessary.

18 **SEC. 3. STUDY ON DESIGNATION OF SURGICAL HEALTH**

19 **PROFESSIONAL SHORTAGE AREAS.**

20          (a) STUDY.—The Secretary of Health and Human  
21          Services (in this section referred to as the “Secretary”)  
22          shall conduct a study on the following matters relating to  
23          access by underserved populations to general surgeons:

24                (1) Whether the designation of health profes-  
25                sional shortage areas under section 332 of the Pub-

1       lic Health Service Act (42 U.S.C. 254e) results in  
2       accurate assessments of the adequacy of local gen-  
3       eral surgeons to address the needs of underserved  
4       populations in urban, suburban, or rural areas.

5           (2) Whether another measure of access to gen-  
6       eral surgeons by underserved populations, such as  
7       hospital service areas, would provide more accurate  
8       assessments of shortages in the availability of local  
9       general surgeons to meets the needs of those popu-  
10      lations.

11          (3) The appropriateness of establishing the des-  
12      ignation under such section 332 of surgical health  
13      professional shortage areas (as defined in subsection  
14      (b)).

15      (b) SURGICAL HEALTH PROFESSIONAL SHORTAGE  
16      AREA DEFINED.—For purposes of this section, the term  
17      “surgical health professional shortage area” means, with  
18      respect to an urban, suburban or rural area in the United  
19      States, an area with a population that is underserved by  
20      general surgeons.

21      (c) DESIGNATION OF SURGICAL HEALTH PROFES-  
22      SIONAL SHORTAGE AREA (SHPSA).—

23          (1) IN GENERAL.—In carrying out the study  
24      under this section, the Secretary shall consider po-

1        tential methodologies for the designation of surgical  
2        health professional shortage areas, including—

3                (A) the criteria under which areas are des-  
4                igned as health professional shortage areas  
5                under section 332 of the Public Health Service  
6                Act (42 U.S.C. 254e); and

7                (B) the methodology described in para-  
8                graph (2).

9                (2) METHODOLOGY FOR THE DESIGNATION OF  
10        A SHPSA.—Among the methodologies considered  
11        under paragraph (1), the Secretary shall analyze the  
12        potential effectiveness and accuracy of the following  
13        methodology:

14                (A) DEVELOPMENT OF SURGERY SERVICE  
15                AREAS.—Development of surgery service areas  
16                through the identification of hospitals with sur-  
17                gery services and the identification of popu-  
18                lations by zip code areas using Medicare patient  
19                origin data.

20                (B) IDENTIFICATION OF SURGEONS.—  
21                Identification of all actively practicing general  
22                surgeons.

23                (C) SURGEON TO POPULATION RATIOS.—  
24                Development of general surgeon-to-population  
25                ratios for each surgery service area.

1                   (D) THRESHOLDS.—Determination of  
2                   threshold general surgeon-to-population ratios  
3                   for the number of general surgeons necessary to  
4                   treat a population for each of the following lev-  
5                   els:

6                           (i) Optimal supply of general sur-  
7                           geons.

8                           (ii) Adequate supply of general sur-  
9                           geons.

10                           (iii) Shortage of general surgeons.

11                           (iv) Critical shortage of general sur-  
12                           geons.

13           (d) CONSULTATION.—In conducting the study under  
14 this section, the Secretary shall consult with relevant  
15 stakeholders with appropriate expertise, including rep-  
16 resentatives of organizations representing surgeons and  
17 patients.

18           (e) REPORT.—Not later than one year after the date  
19 of the enactment of this Act, the Secretary shall submit  
20 to Congress a report on the study conducted under this  
21 section, including such recommendations for legislation or  
22 administrative action as the Secretary determines appro-  
23 priate.