

S 2217

Closing the Health Care Gap Act of 2004

Congress: 108 (2003–2005, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Mar 12, 2004

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S2794-2802)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S2794-2802)
(Mar 12, 2004)

Official Text: <https://www.congress.gov/bill/108th-congress/senate-bill/2217>

Sponsor

Name: Sen. Frist, William H. [R-TN]

Party: Republican • **State:** TN • **Chamber:** Senate

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Mar 12, 2004

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Closing the Health Care Gap Act of 2004 - Requires specified agencies to: (1) standardize health care quality measures across all Federal government programs; (2) standardize public reporting requirements; and (3) support data collection and reporting efforts in Federal and State agencies.

Allows the Secretary of Health and Human Services to award grants to improve access to health care for health care disparity populations and to support efforts to increase the enrollment and participation of eligible children in Medicaid and the State Children's Health Insurance Program. Provides for refundable tax credits to offset the cost of health insurance.

Changes the name of the Office of Minority Health to the Office of Minority Health and Health Disparities and changes the duties of the Office and its associated advisory committee to include health disparities as a problem to study and address.

Provides grants to support: (1) health professions education for racial or ethnic minorities or health disparity populations; and (2) curricula development for cultural competency training.

Requires the Director of the Office of Minority Health and Health Disparities to: (1) develop and maintain an Internet clearinghouse to improve health care quality for individuals with specific cultural needs, limited English proficiency, or low functional health literacy; and (2) reduce or eliminate the duplication of efforts to translate materials.

Authorizes grants or assistance for and establishes programs and projects to address: (1) the analysis of the causes and sources of health care disparities and strategies to reduce disparities; (2) disease management; (3) the effective measurement of disparities; (4) the analysis and collection of health disparity data; and (5) the recruitment of minority scientists or research professionals to the health disparity field.

Actions Timeline

- **Mar 12, 2004:** Introduced in Senate
- **Mar 12, 2004:** Sponsor introductory remarks on measure. (CR S2794)
- **Mar 12, 2004:** Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S2794-2802)