

119TH CONGRESS
1ST SESSION

H. R. 6077

To amend the Public Health Service Act to ensure that medical students, medical residents, and medical faculty receive education and training in the deployment of artificial intelligence in the medical profession, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 18, 2025

Ms. BARRAGÁN (for herself, Mr. LIEU, and Mr. GOTTHEIMER) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to ensure that medical students, medical residents, and medical faculty receive education and training in the deployment of artificial intelligence in the medical profession, and for other purposes.

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 “Healthcare Education
5 in AI Literacy Act” or the “HEAL-AI Act”.

1 **SEC. 2. ARTIFICIAL INTELLIGENCE MEDICAL EDUCATION.**

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

5 **“Subpart III—Artificial Intelligence Medical**
6 **Education**

7 **“SEC. 749C. PURPOSE.**

8 “The purpose of this subpart is to create a program
9 of grants to be administered by the Health Resources and
10 Services Administration for the education and training of
11 medical students, medical residents, and medical faculty
12 in the deployment of artificial intelligence in the medical
13 profession.

14 **“SEC. 749D. DEFINITIONS.**

15 “In this subpart:

16 “(1) **ARTIFICIAL INTELLIGENCE OR AI.**—The
17 term ‘artificial intelligence’ or ‘AI’ means, with re-
18 spect to the medical profession, a machine-based sys-
19 tem—

20 “(A) capable of generating predictions, rec-
21 ommendations, or decisions that influence real
22 medical profession environments, as aligned
23 with a set of objectives defined by humans; and

24 “(B) that employs inputs derived from
25 both machine and human sources to perceive
26 and process data from real or virtual environ-

1 ments to provide information or facilitate ac-
2 tions.

3 “(2) EDUCATION AND TRAINING.—The term
4 ‘education and training’—

5 “(A) means, with respect to the medical
6 profession, competency-based medical education
7 and training for skill-building and decision-
8 making to improve health outcomes and patient
9 care; and

10 “(B) includes—

11 “(i) the use of data and data analysis;

12 “(ii) training such as virtual simula-
13 tion and case studies; and

14 “(iii) student assessment to provide—

15 “(I) feedback and personalize
16 learning; and

17 “(II) the latest updates to health
18 care.

19 “(3) MEDICAL RESIDENT.—The term ‘medical
20 resident’ means a graduate from an accredited med-
21 ical school who is participating in a postgraduate
22 medical residency training program at a residency
23 sponsoring institution.

1 “(4) **MEDICAL STUDENT.**—The term ‘medical
2 student’ means a student who attends a qualified
3 medical school.

4 “(5) **QUALIFIED MEDICAL SCHOOL.**—The term
5 ‘qualified medical school’ means an accredited school
6 of medicine or accredited school of osteopathic medi-
7 cine.

8 “(6) **RESIDENCY SPONSORING INSTITUTION.**—
9 The term ‘residency sponsoring institution’ means
10 an institution that sponsors a postgraduate medical
11 residency training program accredited by the Ac-
12 creditation Council for Graduate Medical Education.

13 “(7) **SECRETARY.**—The term ‘Secretary’ means
14 the Secretary of Health and Human Services, acting
15 through the Administrator of the Health Resources
16 and Services Administration.

17 **“SEC. 749E. GRANT PROGRAM TO SUPPORT ARTIFICIAL IN-**
18 **TELLIGENCE LITERACY FOR MEDICAL STU-**
19 **DENTS, RESIDENTS, AND FACULTY.**

20 “(a) **GRANT PROGRAM.**—The Secretary shall estab-
21 lish and carry out a program under which the Secretary
22 makes grants, on a competitive basis, to qualified medical
23 schools or residency sponsoring institutions for the edu-
24 cation and training of medical students, medical residents,
25 and medical faculty of such schools or institutions in the

1 deployment of artificial intelligence in the medical profes-
2 sion.

3 “(b) APPLICATIONS.—

4 “(1) ELIGIBILITY.—To be eligible to receive a
5 grant under this section, a qualified medical school
6 or residency sponsoring institution shall include in
7 the application submitted under section 796, in addi-
8 tion to any information required by such section—

9 “(A) the desired grant amount, not to ex-
10 ceed \$100,000; and

11 “(B) the assurances described in para-
12 graph (2).

13 “(2) REQUIRED ASSURANCES.—The assurances
14 described in this paragraph are the following:

15 “(A) An assurance that the school or insti-
16 tution will comply with the reporting require-
17 ments under section 749F.

18 “(B) An assurance that the school or insti-
19 tution will provide a description of the need for
20 medical students, medical residents, or medical
21 faculty of such school or institution, as appro-
22 priate, to become literate in artificial intel-
23 ligence and to indicate how the grant would fa-
24 cilitate—

1 “(i) bringing interdisciplinary exper-
2 tise to the development and provision of
3 the AI curriculum;

4 “(ii) completing formal program eval-
5 uation regarding effectiveness of the local
6 implementation of AI; and

7 “(iii) sharing tools and learning with
8 the broader education community to sup-
9 port relationship building and continued
10 education within the medical education
11 community.

12 “(c) USE OF FUNDS.—

13 “(1) IN GENERAL.—A grant under this section
14 may only be used for the education and training of
15 medical students, medical residents, and medical fac-
16 ulty in the deployment of artificial intelligence to un-
17 derstand the immediate effectiveness of training in
18 competencies of the technology, including—

19 “(A) utilizing AI for medical diagnostics,
20 treatment recommendations, and predictive
21 analytics;

22 “(B) integrating AI tools into clinical sup-
23 port and decision-making processes;

1 “(C) understanding the ethical implications
2 of AI in health care, such as bias, patient data
3 privacy, and algorithm transparency;

4 “(D) studying the impact of artificial intel-
5 ligence in medical ethics use cases; and

6 “(E) conducting practical educational dem-
7 onstrations or laboratories to exhibit the variety
8 of use cases artificial intelligence may be de-
9 ployed in a health profession field.

10 “(2) LIMITATION ON USE FOR ADMINISTRATIVE
11 COSTS.—Not more than 10 percent of the amount of
12 a grant under this section may be used for adminis-
13 trative costs, including the preparation of the annual
14 reports required under section 749F.

15 “(3) PROHIBITION ON PUBLISHING IN PREDA-
16 TORY JOURNALS.—A grant under this section may
17 not be used to support the publication of any piece
18 in a predatory journal.

19 “(d) RENEWAL.—A qualified medical school or resi-
20 dency sponsoring institution that receives a grant under
21 this section may apply for renewal of such grant for one
22 or more additional grant periods.

23 “(e) ACCESS; PRIORITY.—In making grants under
24 this section, the Secretary shall—

1 “(1) promote access to emerging technologies;
2 and

3 “(2) give priority to schools or institutions that
4 provide care to medically underserved communities.

5 “(f) COLLABORATING WITH OUTSIDE ENTITIES.—In
6 carrying out the activities described in subsection (c)(1),
7 a qualified medical school or residency sponsoring institu-
8 tion may—

9 “(1) collaborate with academic, nonprofit, and
10 government entities, including other educational de-
11 partments within the university or college of the
12 qualified medical school, such as departments of
13 computer science, computer engineering, software
14 engineering, data science, computer programming,
15 scientific computing, or any other related field as the
16 Secretary determines appropriate; and

17 “(2) consult with—

18 “(A) any of the academic, nonprofit, or
19 government entities described in paragraph (1);

20 or

21 “(B) a for-profit entity.

22 “(g) GEOGRAPHIC DIVERSITY.—In awarding grants
23 under this section, the Secretary shall ensure that, to the
24 extent practicable, grants are distributed among qualified
25 medical schools and residency sponsoring institutions that

1 serve geographically diverse areas, including urban, subur-
2 ban, and rural areas across the United States. The Sec-
3 retary may award grants under this section to not more
4 than two qualified medical schools or residency sponsoring
5 institutions located within the same 2020 United States
6 Census Division.

7 “(h) YEARLY FUNDING LIMIT.—A qualified medical
8 school or residency sponsoring institution may not receive
9 more than \$100,000 in funding under this section in any
10 fiscal year.

11 **“SEC. 749F. REPORTING REQUIREMENTS.**

12 “(a) ANNUAL REPORTS.—Not later than 180 days
13 after receiving a grant under section 749E, and annually
14 thereafter for the duration of the grant period, a qualified
15 medical school or residency sponsoring institution that re-
16 ceives such grant shall submit to the Secretary a report
17 that includes—

18 “(1) a summary of the educational program
19 goals and objectives and related evidence to support
20 academic progress or advancements made under
21 such grant;

22 “(2) the amount of grant funds expended by
23 such school or institution for artificial intelligence
24 education and training;

1 “(3) a description of how education and train-
2 ing was integrated into existing curricula, or used to
3 create new curricula including the strategy, ap-
4 proach, and methods to begin development of the re-
5 sources or curricula;

6 “(4) the number of learners that enrolled in
7 and successfully completed at least one course fund-
8 ed by such grant, to become knowledgeable in artifi-
9 cial intelligence literacy; and

10 “(5) a list of any entity with which the school
11 or institution collaborated or consulted under section
12 749E(f).

13 “(b) REQUIREMENT TO MAKE EDUCATIONAL MATE-
14 RIAL PUBLICLY AVAILABLE.—Not later than 30 days
15 after submitting a report under subsection (a), the quali-
16 fied medical school or residency sponsoring institution
17 submitting such report shall make publicly available any
18 educational materials funded by the grant with respect to
19 which such report was submitted—

20 “(1) on the website of the school or institution;

21 or

22 “(2) on an online academic research portal.

1 **“SEC. 749G. AUTHORIZATION OF APPROPRIATIONS.**

2 “There is authorized to be appropriated to carry out
3 this subpart \$1,000,000 for each of fiscal years 2026
4 through 2030.”.

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