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119TH CONGRESS
2D SESSION

H. R. 8160

To expand research, improve awareness, and increase access to treatment for individuals affected by Premenstrual Dysphoric Disorder, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 30, 2026

Ms. ANSARI (for herself, Mrs. BEATTY, Mr. BELL, Ms. BROWNLEY, Mr. CARTER of Louisiana, Ms. CLARKE of New York, Mr. CONAWAY, Mr. GOLDMAN of New York, Mrs. GRIJALVA, Mr. JACKSON of Illinois, Mr. JOHNSON of Georgia, Mr. KENNEDY of New York, Mr. KRISHNAMOORTHI, Mr. MCGARVEY, Ms. NORTON, Ms. PRESSLEY, Ms. ROSS, Mr. THANEDAR, Ms. TLAIB, Mr. TONKO, Mrs. TRAHAN, Ms. VELÁZQUEZ, Ms. WILLIAMS of Georgia, and Ms. WILSON of Florida) introduced the following bill; which was referred to the Committee on Energy and Commerce

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A BILL

To expand research, improve awareness, and increase access to treatment for individuals affected by Premenstrual Dysphoric Disorder, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Premenstrual Dysphoric Disorder Awareness and Research Act of 2026''.

SEC. 2. FINDINGS.

Congress finds the following:

(1) Premenstrual Dysphoric Disorder (referred to in this section as ''PMDD'') is a severe, chronic, and often disabling medical condition affecting an estimated 5 to 8 percent of women and people assigned female at birth of reproductive age.

(2) PMDD is characterized by extreme mood shifts, irritability, depression, anger, hopelessness, tension, anxiety, and physical symptoms, such as difficulty concentrating, change in appetite, decreased energy, over or under sleeping, or joint and muscle aches, in the luteal phase of the menstrual cycle, significantly impairing work, education, and daily life.

(3) Despite its prevalence and debilitating impact, PMDD remains under-diagnosed, under-researched, and stigmatized.

(4) Early detection, effective treatment, and increased public and provider awareness are essential to improving quality of life for individuals living with PMDD.

SEC. 3. RESEARCH WITH RESPECT TO PREMENSTRUAL DYSPHORIC DISORDER (PMDD).

(a) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the ''Sec-

retary''), acting through the Director of the National Institutes of Health, shall—

(1) expand and intensify research on Premenstrual Dysphoric Disorder (referred to in this section as ''PMDD''), including the causes, risk factors, diagnosis, and treatment of PMDD;

(2) support clinical trials to develop improved treatment options for PMDD; and

(3) ensure adequate representation of diverse racial, ethnic, and socioeconomic populations in PMDD-related research.

(b) SURVEILLANCE AND DATA COLLECTION.—The Secretary shall collect and publish data on—

(1) the prevalence and incidence of PMDD across populations;

(2) the economic and workforce impact of PMDD; and

(3) barriers to diagnosis and treatment of PMDD.

(c) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section there are authorized to be appropriated such sums as is necessary for each of fiscal years 2027 through 2031.

SEC. 4. EDUCATION AND DISSEMINATION OF INFORMATION WITH RESPECT TO PREMENSTRUAL DYSPHORIC DISORDER (PMDD).

(a) IN GENERAL.—The Secretary shall carry out a public health awareness campaign that is designed to—

(1) raise patient and health care provider awareness of PMDD symptoms and treatment options;

(2) reduce stigma associated with menstrual health conditions; and

(3) encourage individuals to seek timely medical care.

(b) PROVIDER EDUCATION.—The Secretary, acting through the Administrator of the Health Resources and Services Administration, shall develop, and disseminate, continuing medical education materials to ensure that health care providers have sufficient knowledge—

(1) to accurately diagnose PMDD;

(2) to distinguish PMDD from other mental health and gynecological conditions; and

(3) to provide evidence-based care.

(c) COORDINATION.—In carrying out this section, the Secretary shall coordinate with existing awareness, education, and outreach programs and activities of the Department of Health and Human Services.

(d) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section there are authorized to be appropriated such sums as is necessary for each of fiscal years 2026 through 2030.

SEC. 5. GRANTS TO TRAIN HEALTH PROFESSIONALS WITH RESPECT TO PMDD.

(b) IN GENERAL.—The Secretary shall award grants to eligible entities for the purpose described in subsection (b).

(c) USE OF FUNDS.—A grant awarded under this subsection shall be used to develop, establish, or expand training programs (including accredited residency programs, fellowships, or other related clinical training) for physicians, registered nurses, nurse practitioners, physician assistants, pharmacists, other health care providers, and students and trainees to improve care, treatment, or management services for PMDD.

(d) ELIGIBILITY.—To be eligible to receive a grant under this subsection, an entity shall—

(1) be—

(A) an accredited school of medicine or osteopathic medicine;

(B) an accredited nursing school;

(C) an accredited school of pharmacy;

(D) an accredited public or nonprofit private hospital;

(E) an accredited medical residency program;

(F) an accredited nurse practitioner residency program; or

(G) a related training program for clinicians, allied health professionals, or social workers that interface with affected populations, which may include hospitals and research institutions, as determined by the Secretary; and

(2) submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require.

(e) TRAINING OPPORTUNITIES.—In carrying out this section, the Secretary shall expand outreach activities to support and expand training programs, fellowships, and other opportunities for students, faculty, and trainees (including continuing medical education) or establish new training opportunities to address barriers to access to—

(1) primary and specialty care services to support mid-life women's health; and

(2) early detection, diagnosis, treatment, and care services for perimenopause, menopausal symptoms, and related chronic conditions.

(f) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section there are authorized to be appropriated such sums as is necessary for each of fiscal years 2027 through 2031.

SEC. 6. REPORT ON IMPACTS ON PMDD RESEARCH AND TREATMENT.

(a) REPORT.—Not later than 2 years after the date of the enactment of this Act, the Secretary shall submit to Congress a report on progress made in—

(1) expanding PMDD research;

(2) improving awareness of, and education on, PMDD; and

(3) increasing access to diagnosis of, and treatment for, PMDD.

(b) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section there are authorized to be appropriated such sums as is necessary for each of fiscal years 2027 through 2031.

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