# V1. HEALTH SERVICES ADMINISTRATION

Legal Citation	Type of authority	Legislative text
A. Bureau of Commun 1. Community Healt		Service
<ul> <li>a) Public Health Service Act</li> <li>P.L. 78-410\$330, as added by P.L. 94-63 \$501(a), (1975) and amended</li> <li>42 USC §254c</li> </ul>		<ul> <li>(c)(1) "The Secretary may make grants to public and nonprofit private entities for projects to plan and develop community health centers which will serve medically undes erved populations. A project for which a grant may be made under this subsection shall include— <ul> <li>(A) an assessment of the need that the population proposed to be served by the community health center for which the project is undertaken has for primary health services, supplemental health services, and environmental health services;</li> <li>(e)(2) h application for a grant [for the operating costs or community health centers serving medically underserved areas] shall include— <ul> <li>(A) a description of the need in the center's catchmen area</li> </ul> </li> </ul></li></ul>
	Specific	<ul> <li>(e)(3) Except as provided in subsection (d)(l)(B) Of this section, the Secretary may not approve an application for a grant under subsection (d) of this section [e.g., for costs o operation of public and nonprofit private community health centers which serve medically underserved populations unless the Secretary determines that— (H) the center has developed, (ii) an effective procedure for compiling and report ing to the Secretary such statistics and other information at the Secretary may require relating to</li></ul>

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A. Bureau of Community	Health	Service
2. Fam/ly Planning		

	Type of	
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## 2. Family Planning

<ul> <li>a) Public Health Service Act</li> <li>P.L. 78-41051004, as added by P.L. 91-572 §6(c), (1970), and amended</li> </ul>	General	<ul> <li>(a) "The Secretary may—</li> <li>(1) conduct, and</li> <li>(2) make grants and enter into contracts for projects for research in biomedical, contraceptive develop- 'merit, behavioral, and program implementatio~ fields related to family planning and population "</li> <li>[Jointly administered with the National Institute of Child Health and Human Development (NIH). ]</li> </ul>
•42 USC §300a-2		
<ul> <li>b) Public Health Service Act</li> <li>P.L. 78-410\$1005, as added by P.L. 91-572 §6(c), (1970), and amended</li> </ul>	Implied	(a) "The Secretary is authorized to make grants to public or nonprofit private entities and to enter into contracts to assist in developing and making available family planning and population growth information (including educational materials) to all persons desiring such information (or materials) "
Q 42 USC §300a-3		
<ul> <li>c) Public Health Service Act</li> <li>P.L. 78-420 1009y§09, as added by P.L. 94-63 §203(a), (1975)</li> <li>. 42 USC §300a-6a</li> </ul>	Specific	<ul> <li>(a) "Not later than seven months after the close of each fiscal year, the Secretary shall make a report to the Congress setting forth a plan to be carried out over the next five fiscal years for— <ul> <li>(1) extension of family planning services to all persons desiring such services,</li> <li>(2) family planning and population research programs,</li> <li>(3) training of necessary manpower for the programs authorized by this subchapter and other Federal laws for which the Secretary has responsibility and which pertain to family planning, and</li> <li>(4) carrying out the other purposes set forth in this subchapter and the Family Planning Services and Population Research Act of 1970.</li> <li>(b) Such a plan shall, at a minimum, indicate on a phased basis— <ul> <li>(1) the number of individuals to be served by family planning programs under this subchapter and other Federal laws for which the Secretary has responsibility, the types of family planning and population growth information and educational materials to be developed under such laws and how they will</li> </ul> </li> </ul></li></ul>

A. Bureau of Community Health Service 2. Family P/arming—continued

Legal citation	Type of authority	Legislative text
Legal citation	autionity	Legislative text
		be made available, the research goals to be reached under sucl laws, and the manpower to be trained under such laws;
		(2) an estimate of the costs and personnel requirement needed to meet the purposes of this subchapter and othe Federal laws for which the Secretary has responsibility and
		which pertain to family planning programs; and
		(3) the steps to be taken to maintain a systematic report
		ing system capable of yielding comprehensive data on which service figures and program evaluations for the Department of
		Health, Education, and Welfare shall be based.
		(c) "Each report submitted under subsection (a) of this section shall—
		<ul> <li>(1) compare results achieved during the preceding fisca year with the objectives established for such year under th plan contained in the previous such report;</li> </ul>
		(2) indicate steps being taken to achieve the objective
		during the fiscal years covered by the plan contained in such report and any revisions to plans in previous reports necessary
		to meet these objectives; and
		(3) make recommendations with respect to any additiona
		legislative or administrative action necessary or desirable in
		carrying out the plan contained in such report. "
3 Ganatic Disa	asas Hamonhil	lia, and Sudden Infant Death Syndrome (SIDS)

J. Genetic Diseases,	nemoprina, and	Suuden mant	Death Synuron	e (SIDS)

a) Public Health Service Act	General	(a)(2) "The Secretary shall carry out, through art identifiable administrative unit within the Department of
Service Act		Health, Education, and Welfare, a program to develop
• P.L. 78-410\$1101,		information and educational materials relating to genetic
as added by P.L.		diseases and to disseminate such information and materials to
94-278\$403,		persons providing health care, to teachers and students, and
(1976)		to the public generally in order to most rapidly make available the latest advances in the testing, diagnosis, counseling, and
•42 USC §300b		treatment of individuals respecting genetic diseases "
b) Public Health Service Act	General	"In carrying out section 241 of title [42] the Secretary may make grants to public and nonprofit private entities, and may enter into contracts with public and private entities and
,	General	
Service Act	General	may make grants to public and nonprofit private entities, and may enter into contracts with public and private entities and
Service Act • P.L. 78-410\$1102,	General	may make grants to public and nonprofit private entities, and may enter into contracts with public and private entities and individuals, for projects for
Service Act • P.L. 78-410\$1102, as added by P.L.	General	<ul> <li>may make grants to public and nonprofit private entities, and may enter into contracts with public and private entities and individuals, for projects for <ul> <li>(1) basic or applied research leading to the understanding, diagnosis, treatment, and control of genetic diseases, In making grants and entering into contracts for</li> </ul> </li> </ul>
Service Act • P.L. 78-410\$1102, as added by P.L. 94-278 \$403(a),	General	may make grants to public and nonprofit private entities, and may enter into contracts with public and private entities and individuals, for projects for (1) basic or applied research leading to the understand- ing, diagnosis, treatment, and control of genetic

A. Bureau of **Community Health Service** 3. Genetic Diseases, Hemophilia, and Sudden InfanttnfantNFANT/nfant Deatfndrome (SIDs)—continued

Legal citation	Type of authority	Legislative text
		contracts which are submitted for research on sickle cell anemia and research on Cooley's anemia."* [Jointly administered with the National Institute of General Medical Sciences (NIH).]
<ul> <li>c) Public Health Service Act</li> <li>P.L. 78-410 § 1107, as added by P.L. 95-626 §205 (1978)</li> <li>42 USC §300b-6</li> </ul>	Specific	"The Secretary, acting through an identifiable administrative unit, shall— (1) conduct epidemiological assessments and surveillance of genetic diseases to define the scope and extent of such diseases and the need for programs for the diagnosis, treat- ment, and control of such diseases, screening for such diseases, and the counseling of persons with such diseases; (2) On the basis of the assessments and surveillance described in paragraph (1), develop for use by the States pro- grams which combine in an effective manner diagnosis, treat- ment, and control of such diseases, screening for such diseases, and counseling of persons with such diseases, " [Jointly administered with the Center for Disease Control. ]
<ul> <li>d) Public Health Service Act</li> <li>c P.L. 78-410\$1121, as added by P.L. 93-270 \$3(a) (1974) and amended</li> <li>• 42 USC \$300c-11</li> </ul>	General	<ul> <li>(a) "The Secretary, through the Assistant Secretary for Health, shall carry out a program to develop public information and professional educational materials relating to sudden infant death syndrome and to disseminate such information and materials to persons providing health care, to public safety officials, and to the public generally.</li> <li>(b)(1) The Secretary may make grants to public and non-profit private entities, and enter into contracts with public and private entities, for projects which include both— <ul> <li>(A) the collection, analysis, and furnishing of information (derived from post mortem examinations and other means) relating to the causes of sudden infant death syndrome; and</li> <li>(B) the provision of information and counseling to families affected by sudden infant death syndrome</li> <li>(b)(2) No grant maybe made or contract entered into under this subsection unless an application therefor has been submitted to and approved by the Secretary Each application shall—</li> </ul> </li> <li>(D) provide for making such reports in such form and containing such information as the Secretary may reasonably require.</li> </ul>

<sup>\*</sup>Section 301 of the Public Health Service Act, 42 USC \$241, is the general data collection authority for the Secretary of HEW,

A. Bureau of Community Health Service 3. Genetic Diseases, Hemophilia, and Sudden Infant Death Syndrome (SIDs)—continued

Legal citation	Type of authority	Legislative text	
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(c) The Secretary shall submit, not later than January 1, 1976, a comprehensive report to [Congress] respecting the administration of this section and the results obtained from the programs authorized by it. "

### 4. Health Underserved Rural Areas

a) Public Health Service Act	General	(a) "The Secretary may make grants to, and enter into contracts with, public and private entities which provide health services—
<ul> <li>P.L. 78-410 §340, as added by P.L. 95-626\$115 (1978)</li> </ul>		(1) to demonstrate new and innovative methods for the provision of primary health services and dental health serv- ices, or
55-0200115 (1570)		(2) to conduct research on such methods or on existing
•42 USC §256		methods for the provision of primary health services and den- tal health services, to medical underserved populations <i>or to</i> such other populations as the Secretary determines are
		necessary to demonstrate or conduct research on particular methods.
		(b) Grants and contracts may be made under subsection (a)
		to demonstrate and conduct research on-
		(1) methods of attracting and retaining primary care
		physicians, dentists, physician assistants, nurse practitioners,
		and other health professionals, both individually and as teams, to train and practice among medical underserved
		populations;
		(2) differing types of organizational models and relation-
		ships, including federations of health service centers, designed to meet unique primary health and dental health service
		needs;
		(3) management and technological improvements (including new or improved methods for biomedical commu-
		nication and medical and financial recordkeeping and billing
		systems) to increase the productivity, effectiveness, efficiency,
		and financial stability of primary health and dental health
		service providers;
		(4) methods of providing health promotion, disease pre-
		vention, and health education programs, including school
		health programs;
		(5) methods of identifying, coordinating, and integrating

(5) methods of identifying, coordinating, and integrating existing primary health and dental health service programs with mental health and social service programs to maximize

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A. Bureau of Community Health Service 4. Health Underserved Rural Areas—continued

Legal citation	Type of authority	Legislative text
		use of available resources, avoid duplication of effort, and en sure a coordinated, comprehensive care system; (6) specific services or mixtures of services appropriate for a given area, including ambulatory care, home health care environmental health services (described in section <b>330(a)(4)</b> ), community outreach activities, transportation services, and other supplemental health services (as defined in section <b>330(b)(2)</b> ); (7) the effect of availability of primary health and home health services in terms of reduction of emergency room visits hospitalizations, and institutionalization in long-term care facilities; (8) the use of mobile health screening clinics to provide preventive health care services to meet the needs of medica underserved populations; and (9) such other projects as the Secretary determines to be necessary to further the purposes of this section. (c)(2) The Secretary shall,to the extent feasible, coordinate demonstration and research projects carried out under this section with any demonstration and research projects carried out under the Social Security Act for the reimbursement o services which are the subject of projects under this section. (d)(1) No grant may be made under this section unless ar application therefor is submitted to, and approved by, the
		Secretary. Such an application shall be submitted in such form and manner and shall contain such information as the Secretary shall prescribe
<ul> <li>b) Social Security Act</li> <li>P.L. 74-241 §1112, as added by P.L.</li> </ul>	General	"In order to assist the States to extend the scope and content, and improve the quality, of medical care and medical services for which payments are made to or on behalf of needy and low-income individuals under this chapter and in order to promote better public understanding about medical care and
as added by P.L. 86-778\$705, (1960) and amended	d	promote better public understanding about medical care and medical assistance for needy and low-income individuals, the Secretary shall develop and revise from time to time guides or
•42 USC §1312		recommended standards as to the level, content, and quality of medical care and medical services for the use of the States in

evaluating and improving their public assistance medical care programs and their programs of medical assistance, shall secure periodic reports from the States on items included in, and the quantity of, medical care and medical services for which expenditures under such programs are made; and shall from A. Bureau of Community Health Service 4. Health Underserved Rural Areas—continued

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time to time publish data secured from these reports and other information necessary to carry out the purposes of this section. "

### 5. Maternal and Child Health

<ul> <li>a) Social Security Act</li> <li>P.L. 74-241\$505, as added by P.L. 90-248 §~301, 304(a), (1968), and amended</li> <li>42 USC §705</li> </ul>	General	<ul> <li>(a) "In order to be entitled to payments from allotments under section 702 of title [42], a State must have a State plan for maternal and child health services and services for crippled children which—</li> <li>(4) provides that the State agency will make such reports, in such form and containing such information, as the Secretary may from time to time require, and comply with such provisions as he may from time to time find necessary to assure the correctness verification of such reports; "</li> <li>(7) provides, with respect to the portion of the plan relating to services for crippled children, for early identification of children in need of health care and services, and for health care and treatment needed to correct or ameliorate defects or chronic conditions discovered thereby, through provision of such periodic screening and diagnostic services, "</li> </ul>
<ul> <li>b) Social Security Act</li> <li>P.L. 74-241 §512, as added by P.L. 90-248 §301, (1968)</li> <li>42 USC §712</li> </ul>	Implied	"From the sums available under section 702 of ti- tle [42], the Secretary is authorized to make grants to or joint- ly financed cooperative arrangements with public or other nonprofit institutions of higher learning, and public or non- profit private agencies and organizations engaged in research or in maternal and child health or crippled children's pro- grams, and contracts with public or nonprofit private agencies and organizations engaged in research or in such programs, for research projects relating to maternal and child health services or crippled children's services which show promise of substantial contribution to the advancement thereof. Effective with respect to grants made and arrangements entered into after June 30, 1968, (1) special emphasis shall be accorded to projects which will help in studying the need for, and the feas- ibility, costs, and effectiveness of, comprehensive health care programs in which maximum use is made of health personnel with varying levels of training, and in study methods of train- ing for such progams, "

# A. Bureau of **Community Health Service 5.** Maternal and Child Health

Legal citation	Type of authority	Legislative text
<ul> <li>c) Social Security Act</li> <li>P.L. 74-241 §513, as added by P.L. 90-248 §301, (1968)</li> <li>42 USC §713</li> </ul>	General	(a) "The Secretary of Health, Education, and Welfare shall make such studies and investigations as will promote the efficient administration of this subchapter."
6. Migrant Health		
<ul> <li>a) Public Health Service Act</li> <li>P.L. 78-410 y§319 formerly §310 as added by P.L. 94-63 §401(a) (1976), and amended</li> <li>42 USC §247d</li> </ul>	General	<ul> <li>(c)(l)(A) "The Secretary may, in accordance with the priorities assigned under subsection (b)(l) of this section, make grants to public and non-profit private entities for projects to plan and develop migrant health centers which will serve migratory agricultural workers, seasonal agricultural workers, and the members of the families of such migratory and seasonal workers, in high impact areas. A project for which a grant may be made under this subparagraph shall include— <ul> <li>(i) an assessment of the need that the workers (and the members of the families of such workers) proposed to be served by the migrant health center for which the project is undertaken have for primary health services, supplemental health services, and environmental health services;</li> <li>(e) "The Secretary may enter into contracts with public and private entities to—</li> </ul> </li> </ul>
	Specific	<ul> <li>(2) conduct projects and studies to assist the several States and entities which have received grants or contracts under this section in the assessment of problems related to camp and field sanitation, pesticide hazards, and other environmental health hazards to which migratory agricultural workers, seasonal agricultural workers, and members of their families are exposed</li> <li>(f)(2) The Secretary may not approve an application for a grant under subsection (d)(l)(A) of this section [e.g. for the costs of operation of public and nonprofit private migrant health centers in certain cases] unless the Secretary determines that—</li> </ul>

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#### (H) the Center has developed

(ii) an effective procedure for compiling and reporting to the Secretary such statistics and other information as the Secretary may require relating to (I) the costs of its operations, (II) the patterns of use of its services, (III) the availability, accessibility, and acceptability of its services, and (IV) such other matters relating to operations of the applicant as the Secretary may, by regulation require; . . . "

#### 7. National Health Service Corps

- a) Public Health Implied Service Act
  - P.L. 78-410\$332, as added by P.L. 94-484, §407(b)(3) (1976)
  - 42 USC §254e

(b) "The Secretary shall establish by regulation promulgated not later than May 1, 1977, criteria for the designation of areas, population, groups, medical facilities, and other public facilities, in the States, as health manpower shortage areas. In establishing such criteria, the Secretary shall take into consideration the following:

(1) The ratio of available health manpower to the number of individuals in an area or population group, or served by a medical facility or other public facility under consideration for designation.

(2) Indicators of a need, notwithstanding the supply of health manpower, for health services for the individuals in an area or population group or served by a medical facility or other public facility with special consideration to indicators of -

(A) infant mortality,

(B) access to health services, and

(C) health status.

(3) The percentage of physicians serving an area, population group, medical facility, or other public facility under consideration for designation who are employed by hospitals and who are graduates of foreign medical schools. . . .

(d) In accordance with the criteria established under subsection (b) of this section and the considerations listed in subsection (c) of this section, the Secretary shall designate, not later than November 1, 1977, health manpower shortage areas in the States, publish a descriptive list of the areas, population groups, medical facilities, and other public facilities so designated, and at least annually review and, as necessary, revise such designations. . . . "

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A. Bureau of Community Health Service 7. National Health Service Corps—continued

Type of authority	Legislative text
	[Jointly administered with the Bureau of Health Manpower (HRA). ]
Specific	<ul> <li>(g) "The Secretary shall conduct, or enter into contracts for the conduct of, studies of the methods of assignments of Corps members to health manpower shortage areas. Such studies shall include studies of— <ul> <li>(1) the characteristics of physicians, dentists, and other health professionals who are more likely to remain in practice in health manpower shortage areas;</li> <li>(2) the characteristics, including utilization and reimbursement patterns, of areas which have been able to retain health manpower personnel, and</li> <li>(3) the appropriate conditions for the assignment and use of nurse practitioners, physician assistants, and expanded function dental auxiliaries in health manpower shortage areas."</li> </ul> </li> </ul>
Implied Specific	The Secretary shall submit an annual report to Congress on May 1 of each year, and shall include in such report with respect to the previous calendar year— <ol> <li>the number, identity, and priority of all health man- power shortage areas designated in such year and the number of health manpower shortage areas which the Secretary estimates will be designated in the subsequent year;                 <li>the number of applications filed under section 254f title [42] in such year for assignment of Corps members and the action take on each application;</li></li></ol>
	Specific

A. Bureau of Community Health Service 7. National Health Service Corps—continued

	Type of		
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after termination of their service in the Corps and the reasons (as reported to the Secretary) of members who did not elect for not making such election;

(7) the results of evaluations and determinations made under section 254 f(a)(l)(D) of this title during such year; and

(8) the amount charged during such year for health services provided by Corps members, the amount which was collected in such year by entities in accordance with agreements under section 254g of this title, and the amount which was paid to the Secretary in such year under such agreements. " [Jointly administered with the Bureau of Health Manpower

(HRA).]

### 8. Office of State Program Coordination: Grants to States

a) Public Health	Specific	(d)(l) "The Secretary shall make grants to State health
Service Act	-	authorities to assist in meeting the costs of providing compre-
		hensive public health services.
P.L. 78-410 §314,		(2) No grant may be made under paragraph (1) to the
as added by P.L.		State health authority of any State unless an application there-
94-63 §102, (1975)		fore has been submitted to and approved by the Secretary.
and amended		Such an application shall be submitted in such form and man-
		ner and shall contain such information as the Secretary may
•42 USC §246		require, and shall contain or be supported by assurances
		satisfactory to the Secretary that—
		(A) the comprehensive public health services which
		will be provided within the State with funds under a grant
		under paragraph (1) will be provided in accordance with the
		State health plan in effect under section 1524(c);

(C)(ii) from time to time, as prescribed  $b_y t h_e$ Secretary, report to the Secretary (through a uniform national reporting system and by such categories as the Secretary may prescribe) a description of the comprehensive public health services provided in the State in the fiscal year for which the grant applied for is made and the amount and source of funds expended in that fiscal year and in the preceding fiscal year for the provision of each such category of services; and

(iii) make such other reports (in such form and containing such information as the Secretary may prescribe) as the Secretary may reasonably require and keep such records and afford such access thereto as the Secretary may find

A. Bureau of Community Health Service
8. Office of State Program Coordination: Grants to States—continued

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Legal citation	authority	Legislative text
		necessary to assure the correctness of, and to verify, such reports;
	Implied	<ul> <li>(4)(A) In determining the amount of a grant to a State health authority under subclause (I), the Secretary shall take into account the financial need of such State and the level of State and local expenditures for comprehensive public health services (as defined in subparagraph (C)). In determining the financial need of a State, the Secretary shall consider, as major factors, the proportion of the State's population whose income level is below the poverty income level established by the Secretary and the proportion of its population which is living in medical underserved areas. "</li> </ul>
<ul> <li>b) Public Health Service Act</li> <li>P.L. 78-410\$317, as added by P.L. 87-868 §2 (1962), and amended</li> <li>42 USC \$247b</li> </ul>	General	<ul> <li>(a) "The Secretary may make grants— <ul> <li>(1) to State health authorities to assist them in meeting the costs of establishing and maintaining preventive health service programs for screening for, the detection, diagnosis, prevention, and referral for treatment of, and follow-up on compliance with treatment prescribed for hypertension; and</li> <li>(2) to States and, to political subdivisions of States and to other public entities to assist them in meeting the costs of establishing and maintaining preventive health service programs (other than programs described in paragraph (1)).</li> <li>(b) No grant may be made under section (a) unless an application therefor has been submitted to, and approved by, the Secretary. Such an application shall be in such form and be submitted in such manner as the Secretary shall by regulation prescribe and shall provide— <ul> <li>(1) a complete description of the type and extent of the program for which the applicant is seeking a grant under subsection (a);</li> <li>(2) with respect to each such program,</li> <li>(B) a description of the services provided by the applicant in such program in such period, and,</li> <li>(D) if the applicant proposes changes in the provision of the services in such program, the priorities of such proposed changes, reasons for such changes, and the amount of Federal funds needed by the applicant to make such changes;</li> </ul> </li> </ul></li></ul>

A. Bureau of Community Health Service8. Office of State Program Coordination: Grants to States—continued

Legal citation	Type of authority	Legislative text
		<ul> <li>(6) assurances satisfactory to the Secretary that the applicant will make such reports (in such form and containing such information as the Secretary may by regulation prescribe) as the Secretary may reasonably require and keep such records and afford such access thereto as the Secretary may find necessary to assure the correctness of, and to verify, such reports;</li> <li>(h) The Secretary shall include, as part of the report required by section 1705 [42 USC 300u-4], a report on the extent of the problems presented by the diseases and conditions referred to in subsection (j) [concerning preventive health service programs to immunize children against immunizable diseases, and influenza]; and on the effectiveness of the activities assisted under grants under subsection (a) in controlling such diseases and conditions.</li> <li>[Center for Disease Control administers all but the authority concerning hypertension; the Bureau of Community Health Services (HSA) administers the hypertension program. ]</li> </ul>
<ul> <li>c) Social Security Act</li> <li>P.L. 74-241\$1861 note, as added by P.L. 94-63\$602 (1975), and amended</li> <li>42 USC \$1395x note 2</li> </ul>	Implied	<ul> <li>(a)(1) "For the purpose of demonstrating the establishment and initial operation of public and nonprofit private agencies which will provide home health services in areas in which such services are not otherwise available, the Secretary of Health, Education, and Welfare may make grants to meet the initial costs of establishing and operating such agencies and expanding the services available through existing agencies, and to meet the costs of compensating professional and paraprofessional personnel during the initial operation of such agencies or the expansion of services of existing agencies.</li> <li>(2) In making grants under this subsection, the Secretary shall consider the relative needs of the several States for home health services and preference shall be given to areas within a state in which a high percentage of the population proposed to be served is composed of individuals who are elderly, medically indigent, or both.</li> <li>(3) Application for grants under this subsection shall be in such form and contain such information as the Secretary health area and contain such information as the Secretary health services and contain such information as the secretary shall be given to area secretary shall be in such form and contain such information as the Secretary health form and contain such information as the secretary shall be given the secretary shall be in such form and contain such information as the Secretary health services and contain such information as the secretary when the secretary and contain such information as the secretary and the secretary and the secretary and contain such information as the secretary and the secretary and contain such information as the secretary and the secretary and the secretary and contain such information as the secretary and the secretary and</li></ul>

shall prescribe by regulation. . . . "

### iB. Bureau of Medical Services

1. Emergency Medical Services

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Legal citation	authority	Legislative text

#### B. Bureau of Medical Services 1. Emergency Medical Services

a) Public Health General (a) "The Secretary may make grants . . . and enter into Service Act contracts . . . for the support of research in emergency medical techniques, methods, devices, and delivery. The • P.L. 78-410 §1205 Secretary shall give special consideration to applications for as added by P.L. grants or contracts for research relating to the delivery of 93-154 §2(a) (1973), emergency medical services in rural areas and especially research which emphasizes the identification and utilization of and amended techniques and methods to apply the results of such research •42 USC §300d-4 to improve the delivery of emergency medical services in such areas. (c) The recipient of a grant or contract under this section shall make such reports to the Secretary as the Secretary may require. Such reports shall contain recommendations and a

cy medical services. "

- b) Public Health Specific Service Act
  - P.L. 78-410 §1206, added by P.L. 93-154, §2(a), (1973), and amended
  - •42 USC §300d-5

(b)(4)(C) "An emergency medical services system shall— . . .

plan of action for applying the results of the research assisted by such grantor contract to improve the delivery of emergen-

(xi) provide for a coordinated patient recordkeeping system meeting appropriate standards established by the Secretary, which records shall cover the treatment of the patient from initial entry into the system through his discharge from it, and shall be consistent with ensuing patient records used in follow-up care and rehabilitation of the patient; . . .

(xiii) provide the Secretary with such information as he may require to conduct periodic, comprehensive, and independent reviews and evaluations of the extent and quality of the emergency health care services provided in the system's service area, and submit to the Secretary the results of any review or evaluation which may be conducted by such system of the extent and quality of the emergency health care services provided in the system's service area;" B. Bureau of Medical Services 1. Emergency Medical Services-continued

Type of authority Legislative text Legal citation c) Public Health Specific (a) The Secretary shall administer the program of grants and contracts . . . authorized by this part through an iden-Service Act tifiable administrative unit specializing in emergency medical • P.L. 78-410\$1208, services within the Department of Health, Education and as added by P.L. Welfare. 93-154 §2(a), (b) Such administrative unit shall-(1) be responsible for collecting, analyzing, cataloging, (1973) and and disseminating all data . . . derived from reviews and amended evaluations of emergency medical services systems assisted • 42 USC §300d-7 under sections 300d-1, 300d-2, and 300d-3 of . . . title [42]; (2) publish suggested criteria for collecting necessary information for the evaluation of projects and programs funded under this subchapter; . . . (7) provide for periodic, independent evaluations of the effectiveness of, and coordination between, the programs carried out under this part and the programs carried out under section 295g-9 of . . . title [42]. (c) In addition, such administrative unit shall, through the Interagency Committee on Emergency Medical Services (established under section 300d-8 of this title)-(1) study on a continuing basis (including evaluating the adequacy, technical soundness, and redundancy of) the roles, resources, and responsibilities of all Federal programs and activities relating to emergency medical services. Such unit shall report to the Congress the results of studies made under paragraph (1). The . . . reports shall be made not later than February 1 of each year after 1978. ' Implied The Secretary shall prepare and submit annually to the d) Public Health Service Act Congress a report on the administration of this subchapter. Each report shall include an evaluation of the adequacy of the • P.L. 78-410\$1210, provision of emergency medical services in the United States as added by P.L. during the period covered by the report, and evaluation of the 93-15462 (1973) extent to which the needs for such services are being adequately met through assistance provided under this sub-•42 USC §300d-9

chapter . . . "

#### B. Bureau of Medical Services

1. Emergency Medical Services-continued

Legal citation	Type of authority	Legislative text
e) Public Health Service Act	General	(a)(l) "The Secretary may make grants to, and enter into contracts with, public or private non-profit entities for the support of, and may conduct programs for the establishment,
• P.L. 78-410\$1221		operation, and improvement of activities to
as added by P.L.		(A) demonstrate the effectiveness of different methods
94-573 \$14(3),		for the treatment and rehabilitation of individuals injured by
(1976) and		burns,
amended		(B) conduct research in the treatment and rehabilitation of such individuals
• 42 USC §300d-21		(2) The Secretary may enter into contracts for the support of research in the treatment and rehabilitation of individuals injured by burns."
		[Jointly administered with the National Institute of General Medical Sciences (NIH).]

#### 2. Public Health Service Hospitals

a) Public Health	Implied	"The Surgeon General, pursuant to regulations, shall—
Service Act	-	(a) Control, manage, and operate all institutions, hospitals
		and stations of the service, and provide for the care,
• P.L. 78-410\$321		treatment, and hospitalization of patients "
(1944) and amended	f	

• 42 USC §248

#### C. Indian Health Service

a)	Indian Health C	Specific	
	Improvement	Act	

- Q P.L. 94-437 §503 (1976)
- •25 USC §1653

(a) "The Secretary, acting through the Service, shall place such conditions as he deems necessary to effect the purpose of . . . title [25] in any contract which he makes with any urban Indian organization pursuant to this title. Such conditions shall include, but are not limited to, requirements that the organization successfully undertake the following activities:

(1) determine the population of urban Indians which are or could be recipients of health referral or care services;

(2) identify all public and private health service resources within the urban center in which the organization is situated which are or may be available to urban Indians;

(7) identify gaps between unmet health needs of urban Indians and the resources available to meet such needs;

#### C. Indian Health Service—continued

Legal citation	Type of authority	Legislative text
	Implied	<ul> <li>(8) make recommendations to the Secretary and Federal, State, local, and other resource agencies on methods of improving health service programs to meet the needs of urban Indians;</li> <li>(b) The Secretary, acting through the Service, shall by regulation prescribe the criteria for selecting urban Indian organizations with which to contract pursuant to this title. Such criteria shall, among other factors, take into consideration: <ul> <li>(1) the extent of the unmet health care needs of urban Indians in the urban center involved;</li> <li>(2) the size of the urban Indian population which is to receive assistance;</li> <li>(3) the relative accessibility which such population has to health care services in such urban center; "</li> </ul> </li> </ul>
<ul> <li>b) Indian Health Care Improvement Act</li> <li>• P.L. 94-437\$505 (1976)</li> <li>• 25 USC §1655</li> </ul>	General	"For each fiscal year during which an urban Indian organization receives or expends funds pursuant to a contract under title [25], such organization shall submit to the Secretary a report including information gathered pursuant to section $503(a)(7)$ and (8) [25 USC §1653(a)(7), (8)] and such other information as the Secretary may request "