

agencies with demonstrated experience and expertise in health care and preventive medicine, such as the Centers for Disease Control and Prevention, the Substance Abuse and Mental Health Administration, the Health Resources and Services Administration, the National Institutes of Health, the Office of the National Coordinator for Health Information Technology, the Indian Health Service, the Agricultural Cooperative Extension Service of the Department of Agriculture, and other entities, as the Secretary determines appropriate.

**(f) Authorization of appropriations**

To awards grants as provided in subsection (d), there are authorized to be appropriated \$120,000,000 for each of fiscal years 2011 and 2012, and such sums as may be necessary to carry out this section for each of fiscal years 2013 through 2014.

(July 1, 1944, ch. 373, title III, §399V-1, formerly §399W, as added, amended, and renumbered §399V-1, Pub. L. 111-148, title V, §5405, title X, §10501(f)(1), (2), Mar. 23, 2010, 124 Stat. 649, 996.)

REFERENCES IN TEXT

Section 256a-1 of this title, referred to in subsec. (c)(2)(B)(i), was in the original “section 3602 of the Patient Protection and Affordable Care Act”, and was translated as meaning section 3502 of the Patient Protection and Affordable Care Act, Pub. L. 111-148, to reflect the probable intent of Congress.

AMENDMENTS

2010—Subsec. (b)(2)(A). Pub. L. 111-148, §10501(f)(2), substituted “and the departments that train providers in primary care in 1 or more health professions schools in the State” for “and the departments of 1 or more health professions schools in the State that train providers in primary care”.

**§ 280g-13. National Congenital Heart Disease Surveillance System**

**(a) In general**

The Secretary, acting through the Director of the Centers for Disease Control and Prevention, may—

- (1) enhance and expand infrastructure to track the epidemiology of congenital heart disease and to organize such information into a nationally-representative, population-based surveillance system that compiles data concerning actual occurrences of congenital heart disease, to be known as the “National Congenital Heart Disease Surveillance System”; or
- (2) award a grant to one eligible entity to undertake the activities described in paragraph (1).

**(b) Purpose**

The purpose of the Congenital Heart Disease Surveillance System shall be to facilitate further research into the types of health services patients use and to identify possible areas for educational outreach and prevention in accordance with standard practices of the Centers for Disease Control and Prevention.

**(c) Content**

The Congenital Heart Disease Surveillance System—

(1) may include information concerning the incidence and prevalence of congenital heart disease in the United States;

(2) may be used to collect and store data on congenital heart disease, including data concerning—

- (A) demographic factors associated with congenital heart disease, such as age, race, ethnicity, sex, and family history of individuals who are diagnosed with the disease;
- (B) risk factors associated with the disease;
- (C) causation of the disease;
- (D) treatment approaches; and
- (E) outcome measures, such that analysis of the outcome measures will allow derivation of evidence-based best practices and guidelines for congenital heart disease patients; and

(3) may ensure the collection and analysis of longitudinal data related to individuals of all ages with congenital heart disease, including infants, young children, adolescents, and adults of all ages.

**(d) Public access**

The Congenital Heart Disease Surveillance System shall be made available to the public, as appropriate, including congenital heart disease researchers.

**(e) Patient privacy**

The Secretary shall ensure that the Congenital Heart Disease Surveillance System is maintained in a manner that complies with the regulations promulgated under section 264 of the Health Insurance Portability and Accountability Act of 1996.

**(f) Eligibility for grant**

To be eligible to receive a grant under subsection (a)(2), an entity shall—

- (1) be a public or private nonprofit entity with specialized experience in congenital heart disease; and
- (2) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

(July 1, 1944, ch. 373, title III, §399V-2, as added Pub. L. 111-148, title X, §10411(b)(1), Mar. 23, 2010, 124 Stat. 988.)

REFERENCES IN TEXT

Section 264 of the Health Insurance Portability and Accountability Act of 1996, referred to in subsec. (e), is section 264 of Pub. L. 104-191, which is set out as a note under section 1320d-2 of this title.

**§ 280g-14. National diabetes prevention program**

**(a) In general**

The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall establish a national diabetes prevention program (referred to in this section as the “program”) targeted at adults at high risk for diabetes in order to eliminate the preventable burden of diabetes.

**(b) Program activities**

The program described in subsection (a) shall include—