

SUBPART III—CERTAIN PARTNER NOTIFICATION PROGRAMS

§ 300ff-38. Grants for partner notification programs

(a) In general

In the case of States whose laws or regulations are in accordance with subsection (b) of this section, the Secretary, subject to subsection (c)(2) of this section, may make grants to the States for carrying out programs to provide partner counseling and referral services.

(b) Description of compliant State programs

For purposes of subsection (a) of this section, the laws or regulations of a State are in accordance with this subsection if under such laws or regulations (including programs carried out pursuant to the discretion of State officials) the following policies are in effect:

(1) The State requires that the public health officer of the State carry out a program of partner notification to inform partners of individuals with HIV/AIDS that the partners may have been exposed to the disease.

(2)(A) In the case of a health entity that provides for the performance on an individual of a test for HIV/AIDS, or that treats the individual for the disease, the State requires, subject to subparagraph (B), that the entity confidentially report the positive test results to the State public health officer in a manner recommended and approved by the Director of the Centers for Disease Control and Prevention, together with such additional information as may be necessary for carrying out such program.

(B) The State may provide that the requirement of subparagraph (A) does not apply to the testing of an individual for HIV/AIDS if the individual underwent the testing through a program designed to perform the test and provide the results to the individual without the individual disclosing his or her identity to the program. This subparagraph may not be construed as affecting the requirement of subparagraph (A) with respect to a health entity that treats an individual for HIV/AIDS.

(3) The program under paragraph (1) is carried out in accordance with the following:

(A) Partners are provided with an appropriate opportunity to learn that the partners have been exposed to HIV/AIDS, subject to subparagraph (B).

(B) The State does not inform partners of the identity of the infected individuals involved.

(C) Counseling and testing for HIV/AIDS are made available to the partners and to infected individuals, and such counseling includes information on modes of transmission for the disease, including information on prenatal and perinatal transmission and preventing transmission.

(D) Counseling of infected individuals and their partners includes the provision of information regarding therapeutic measures for preventing and treating the deterioration of the immune system and conditions arising from the disease, and the provision of other prevention-related information.

(E) Referrals for appropriate services are provided to partners and infected individuals, including referrals for support services and legal aid.

(F) Notifications under subparagraph (A) are provided in person, unless doing so is an unreasonable burden on the State.

(G) There is no criminal or civil penalty on, or civil liability for, an infected individual if the individual chooses not to identify the partners of the individual, or the individual does not otherwise cooperate with such program.

(H) The failure of the State to notify partners is not a basis for the civil liability of any health entity who under the program reported to the State the identity of the infected individual involved.

(I) The State provides that the provisions of the program may not be construed as prohibiting the State from providing a notification under subparagraph (A) without the consent of the infected individual involved.

(4) The State annually reports to the Director of the Centers for Disease Control and Prevention the number of individuals from whom the names of partners have been sought under the program under paragraph (1), the number of such individuals who provided the names of partners, and the number of partners so named who were notified under the program.

(5) The State cooperates with such Director in carrying out a national program of partner notification, including the sharing of information between the public health officers of the States.

(c) Reporting system for cases of HIV/AIDS; preference in making grants

In making grants under subsection (a) of this section, the Secretary shall give preference to States whose reporting systems for cases of HIV/AIDS produce data on such cases that is sufficiently accurate and reliable for use for purposes of section 300ff-28(a)(2)(D)(i) of this title.

(d) Authorization of appropriations

For the purpose of carrying out this section, there is authorized to be appropriated \$10,000,000 for each of the fiscal years 2007 through 2009.

(July 1, 1944, ch. 373, title XXVI, § 2631, as added Pub. L. 106-345, title II, § 221, Oct. 20, 2000, 114 Stat. 1343; amended Pub. L. 109-415, title II, § 210, title VII, §§ 702(3), 703, Dec. 19, 2006, 120 Stat. 2803, 2820; Pub. L. 111-87, § 2(a)(1), (3)(A), Oct. 30, 2009, 123 Stat. 2885.)

AMENDMENTS

2009—Pub. L. 111-87 repealed Pub. L. 109-415, § 703, and revived the provisions of this section as in effect on Sept. 30, 2009. See 2006 Amendment note and Effective Date of 2009 Amendment; Revival of Section note below.

2006—Pub. L. 109-415, § 703, which directed repeal of this section effective Oct. 1, 2009, was itself repealed by Pub. L. 111-87, § 2(a)(1), effective Sept. 30, 2009.

Subsecs. (b), (c). Pub. L. 109-415, § 702(3), substituted “HIV/AIDS” for “HIV disease” wherever appearing.

Subsec. (d). Pub. L. 109-415, § 210, substituted “there is authorized to be appropriated \$10,000,000 for each of the fiscal years 2007 through 2009.” for “there are authorized to be appropriated \$30,000,000 for fiscal year 2001,

and such sums as may be necessary for each of the fiscal years 2002 through 2005.”

EFFECTIVE DATE OF 2009 AMENDMENT; REVIVAL OF SECTION

For provisions that repeal by section 2(a)(1) of Pub. L. 111-87 of section 703 of Pub. L. 109-415 be effective Sept. 30, 2009, and that the provisions of this section as in effect on Sept. 30, 2009, be revived, see section 2(a)(2), (3)(A) of Pub. L. 111-87, set out as a note under section 300ff-11 of this title.

PART C—EARLY INTERVENTION SERVICES

§§ 300ff-41 to 300ff-50. Repealed. Pub. L. 106-345, title III, § 301(a), Oct. 20, 2000, 114 Stat. 1345

Section 300ff-41, act July 1, 1944, ch. 373, title XXVI, § 2641, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 597; amended Pub. L. 102-531, title III, § 312(d)(31), Oct. 27, 1992, 106 Stat. 3506, established program of formula grants to States.

Section 300ff-42, act July 1, 1944, ch. 373, title XXVI, § 2642, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 599, related to provision of services through medicaid providers.

Section 300ff-43, act July 1, 1944, ch. 373, title XXVI, § 2643, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 600; amended Pub. L. 102-531, title III, § 312(d)(32), Oct. 27, 1992, 106 Stat. 3506, related to requirement of matching funds.

Section 300ff-44, act July 1, 1944, ch. 373, title XXVI, § 2644, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 601, related to the offering and encouraging of early intervention services.

Section 300ff-45, act July 1, 1944, ch. 373, title XXVI, § 2645, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 602, related to notification of certain individuals receiving blood transfusions.

Section 300ff-46, act July 1, 1944, ch. 373, title XXVI, § 2646, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 602, related to reporting and partner notification.

Section 300ff-47, act July 1, 1944, ch. 373, title XXVI, § 2647, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 603; amended Pub. L. 101-502, § 6(c), Nov. 3, 1990, 104 Stat. 1291; Pub. L. 104-146, § 12(c)(4), May 20, 1996, 110 Stat. 1373, related to requirement of State law protection against intentional transmission.

Section 300ff-48, act July 1, 1944, ch. 373, title XXVI, § 2648, formerly Pub. L. 100-607, title IX, § 902, Nov. 4, 1988, 102 Stat. 3171; amended Pub. L. 100-690, title II, § 2605(a), Nov. 18, 1988, 102 Stat. 4234; renumbered § 2648 and amended Pub. L. 101-381, title III, § 301(b), Aug. 18, 1990, 104 Stat. 614; Pub. L. 104-146, § 12(c)(5), May 20, 1996, 110 Stat. 1374, related to testing and other early intervention services for State prisoners.

Section 300ff-49, act July 1, 1944, ch. 373, title XXVI, § 2649, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 604; amended Pub. L. 101-502, § 6(b), Nov. 3, 1990, 104 Stat. 1290; Pub. L. 102-531, title III, § 312(d)(33), Oct. 27, 1992, 106 Stat. 3506; Pub. L. 104-146, § 12(c)(6), May 20, 1996, 110 Stat. 1374, related to determination of amount of allotments.

Section 300ff-49a, act July 1, 1944, ch. 373, title XXVI, § 2649A, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 605, related to miscellaneous prerequisites for the Secretary to make a grant.

Section 300ff-50, act July 1, 1944, ch. 373, title XXVI, § 2650, as added Pub. L. 101-381, title III, § 301(a), Aug. 18, 1990, 104 Stat. 606, authorized appropriations.

SUBPART I—CATEGORICAL GRANTS AMENDMENTS

Pub. L. 106-345, title III, § 301(b)(1), Oct. 20, 2000, 114 Stat. 1345, redesignated subpart II as subpart I.

PRIOR PROVISIONS

A prior subpart I, consisting of sections 300ff-41 to 300ff-50, related to formula grants for States, prior to

repeal by Pub. L. 106-345, title III, § 301(a), Oct. 20, 2000, 114 Stat. 1345.

§ 300ff-51. Establishment of a program

(a) In general

For the purposes described in subsection (b), the Secretary, acting through the Administrator of the Health Resources and Services Administration, may make grants to public and non-profit private entities specified in section 300ff-52(a) of this title.

(b) Requirements

(1) In general

The Secretary may not make a grant under subsection (a) unless the applicant for the grant agrees to expend the grant only for—

- (A) core medical services described in subsection (c);
- (B) support services described in subsection (d); and
- (C) administrative expenses as described in section 300ff-64(g)(3) of this title.

(2) Early intervention services

An applicant for a grant under subsection (a) shall expend not less than 50 percent of the amount received under the grant for the services described in subparagraphs (B) through (E) of subsection (e)(1) for individuals with HIV/AIDS.

(c) Required funding for core medical services

(1) In general

With respect to a grant under subsection (a) to an applicant for a fiscal year, the applicant shall, of the portion of the grant remaining after reserving amounts for purposes of paragraphs (3) and (5) of section 300ff-64(g) of this title, use not less than 75 percent to provide core medical services that are needed in the area involved for individuals with HIV/AIDS who are identified and eligible under this subchapter (including services regarding the co-occurring conditions of the individuals).

(2) Waiver

(A) The Secretary shall waive the application of paragraph (1) with respect to an applicant for a grant if the Secretary determines that, within the service area of the applicant—

- (i) there are no waiting lists for AIDS Drug Assistance Program services under section 300ff-26 of this title; and
- (ii) core medical services are available to all individuals with HIV/AIDS identified and eligible under this subchapter.

(B) NOTIFICATION OF WAIVER STATUS.—When informing an applicant that a grant under subsection (a) is being made for a fiscal year, the Secretary shall inform the applicant whether a waiver under subparagraph (A) is in effect for the fiscal year.

(3) Core medical services

For purposes of this subsection, the term “core medical services”, with respect to an individual with HIV/AIDS (including the co-occurring conditions of the individual) means the following services:

- (A) Outpatient and ambulatory health services.