

public health emergency, the Secretary may appoint selected individuals to serve as intermittent personnel of such Corps in accordance with applicable civil service laws and regulations. In all other cases, members of the Corps are subject to the laws of the State in which the activities of the Corps are undertaken.

**(2) Applicable protections**

Subsections (c)(2), (d), and (e) of section 300hh-11 of this title shall apply to an individual appointed under paragraph (1) in the same manner as such subsections apply to an individual appointed under section 300hh-11(c) of this title.

**(3) Limitation**

State, local, and tribal officials shall have no authority to designate a member of the Corps as Federal intermittent disaster-response personnel, but may request the services of such members.

**(i) Authorization of appropriations**

There is authorized to be appropriated to carry out this section, \$11,200,000 for each of fiscal years 2014 through 2018.

(July 1, 1944, ch. 373, title XXVIII, §2813, as added Pub. L. 109-417, title III, §303(a), Dec. 19, 2006, 120 Stat. 2856; amended Pub. L. 113-5, title II, §203(b)(2), Mar. 13, 2013, 127 Stat. 175.)

AMENDMENTS

2013—Subsec. (d)(2). Pub. L. 113-5, §203(b)(2)(A), inserted at end “Such training exercises shall, as appropriate and applicable, incorporate the needs of at-risk individuals in the event of a public health emergency.”

Subsec. (i). Pub. L. 113-5, §203(b)(2)(B), substituted “\$11,200,000 for each of fiscal years 2014 through 2018” for “\$22,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2011”.

**§ 300hh-16. At-risk individuals**

The Secretary, acting through such employee of the Department of Health and Human Services as determined by the Secretary and designated publicly (which may, at the discretion of the Secretary, involve the appointment or designation of an individual as the Director of At-Risk Individuals), shall—

(1) monitor emerging issues and concerns as they relate to medical and public health preparedness and response for at-risk individuals in the event of a public health emergency declared by the Secretary under section 247d of this title;

(2) oversee the implementation of the preparedness goals described in section 300hh-1(b) of this title with respect to the public health and medical needs of at-risk individuals in the event of a public health emergency, as described in section 300hh-1(b)(4) of this title;

(3) assist other Federal agencies responsible for planning for, responding to, and recovering from public health emergencies in addressing the needs of at-risk individuals;

(4) provide guidance to and ensure that recipients of State and local public health grants include preparedness and response strategies and capabilities that take into account the medical and public health needs of

at-risk individuals in the event of a public health emergency, as described in section 247d-3a(b)(2)(A)(iii) of this title;

(5) ensure that the contents of the strategic national stockpile take into account at-risk populations as described in section 300hh-1(b)(4)(B) of this title;

(6) oversee curriculum development for the public health and medical response training program on medical management of casualties, as it concerns at-risk individuals as described in subparagraphs (A) through (C) of section 247d-6(a)(2) of this title;

(7) disseminate and, as appropriate, update novel and best practices of outreach to and care of at-risk individuals before, during, and following public health emergencies in as timely a manner as is practicable, including from the time a public health threat is identified; and

(8) ensure that public health and medical information distributed by the Department of Health and Human Services during a public health emergency is delivered in a manner that takes into account the range of communication needs of the intended recipients, including at-risk individuals.

(July 1, 1944, ch. 373, title XXVIII, §2814, as added Pub. L. 109-417, title I, §102(d), Dec. 19, 2006, 120 Stat. 2834; amended Pub. L. 113-5, title I, §101(b), Mar. 13, 2013, 127 Stat. 163.)

AMENDMENTS

2013—Par. (1). Pub. L. 113-5, §101(b)(4), added par. (1). Former par. (1) redesignated (2).

Par. (2). Pub. L. 113-5, §101(b)(3), (5), redesignated par. (1) as (2) and amended it generally. Prior to amendment, par. (2) read as follows: “oversee the implementation of the National Preparedness goal of taking into account the public health and medical needs of at-risk individuals in the event of a public health emergency, as described in section 300hh-1(b)(4) of this title;”. Former par. (2) redesignated (3).

Par. (3). Pub. L. 113-5, §101(b)(3), redesignated par. (2) as (3). Former par. (3) redesignated (4).

Par. (4). Pub. L. 113-5, §101(b)(3), redesignated par. (3) as (4). Former par. (4) redesignated (5).

Pub. L. 113-5, §101(b)(2), substituted “300hh-1(b)(4)(B)” for “300hh-10(b)(3)(B)”.

Par. (5). Pub. L. 113-5, §101(b)(1), (3), redesignated par. (4) as (5) and struck out former par. (5) which read as follows: “oversee the progress of the Advisory Committee on At-Risk Individuals and Public Health Emergencies established under section 247d-6(b)(2) of this title and make recommendations with a focus on opportunities for action based on the work of the Committee;”.

Pars. (7), (8). Pub. L. 113-5, §101(b)(1), (6), added pars. (7) and (8) and struck out former pars. (7) and (8) which read as follows:

“(7) disseminate novel and best practices of outreach to and care of at-risk individuals before, during, and following public health emergencies; and

“(8) not later than one year after December 19, 2006, prepare and submit to Congress a report describing the progress made on implementing the duties described in this section.”

**§ 300hh-17. Emergency response coordination of primary care providers**

The Secretary, acting through Administrator<sup>1</sup> of the Health Resources and Services Adminis-

<sup>1</sup> So in original. Probably should be preceded by “the”.