

**(b) Pediatric emergency medical research**

The Secretary shall support Federal programs administered by the National Institutes of Health, the Agency for Healthcare Research and Quality, the Health Resources and Services Administration, the Centers for Disease Control and Prevention, and other agencies to coordinate and expand research in pediatric emergency medical care systems and pediatric emergency medicine, including—

- (1) an examination of the gaps and opportunities in pediatric emergency care research and a strategy for the optimal organization and funding of such research;
- (2) the role of pediatric emergency services as an integrated component of the overall health system;
- (3) system-wide pediatric emergency care planning, preparedness, coordination, and funding;
- (4) pediatric training in professional education; and
- (5) research in pediatric emergency care, specifically on the efficacy, safety, and health outcomes of medications used for infants, children, and adolescents in emergency care settings in order to improve patient safety.

**(c) Impact research**

The Secretary shall support research to determine the estimated economic impact of, and savings that result from, the implementation of coordinated emergency care systems.

**(d) Authorization of appropriations**

There are authorized to be appropriated to carry out this section such sums as may be necessary for each of fiscal years 2010 through 2014. (July 1, 1944, ch. 373, title IV, §498D, as added Pub. L. 111-148, title III, §3504(b), Mar. 23, 2010, 124 Stat. 521.)

**§ 289g-5. Precision medicine initiative****(a) In general**

The Secretary is encouraged to establish and carry out an initiative, to be known as the “Precision Medicine Initiative” (in this section referred to as the “Initiative”), to augment efforts to address disease prevention, diagnosis, and treatment.

**(b) Components**

The Initiative described under subsection (a) may include—

- (1) developing a network of scientists to assist in carrying out the purposes of the Initiative;
- (2) developing new approaches for addressing scientific, medical, public health, and regulatory science issues;
- (3) applying genomic technologies, such as whole genomic sequencing, to provide data on the molecular basis of disease;
- (4) collecting information voluntarily provided by a diverse cohort of individuals that can be used to better understand health and disease; and
- (5) other activities to advance the goals of the Initiative, as the Secretary determines appropriate.

**(c) Authority of the Secretary**

In carrying out this section, the Secretary may—

- (1) coordinate with the Secretary of Energy, private industry, and others, as the Secretary determines appropriate, to identify and address the advanced supercomputing and other advanced technology needs for the Initiative;
- (2) develop and utilize public-private partnerships; and
- (3) leverage existing data sources.

**(d) Requirements**

In the implementation of the Initiative under subsection (a), the Secretary shall—

- (1) ensure the collaboration of the National Institutes of Health, the Food and Drug Administration, the Office of the National Coordinator for Health Information Technology, and the Office for Civil Rights of the Department of Health and Human Services;
- (2) comply with existing laws and regulations for the protection of human subjects involved in research, including the protection of participant privacy;
- (3) implement policies and mechanisms for appropriate secure data sharing across systems that include protections for privacy and security of data;
- (4) consider the diversity of the cohort to ensure inclusion of a broad range of participants, including consideration of biological, social, and other determinants of health that contribute to health disparities;
- (5) ensure that only authorized individuals may access controlled or sensitive, identifiable biological material and associated information collected or stored in connection with the Initiative; and
- (6) on the appropriate Internet website of the Department of Health and Human Services, identify any entities with access to such information and provide information with respect to the purpose of such access, a summary of the research project for which such access is granted, as applicable, and a description of the biological material and associated information to which the entity has access.

**(e) Report**

Not later than 1 year after December 13, 2016, the Secretary shall submit a report on the relevant data access policies and procedures to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives. Such report shall include steps the Secretary has taken to consult with experts or other heads of departments or agencies of the Federal Government in the development of such policies.

(July 1, 1944, ch. 373, title IV, §498E, as added Pub. L. 114-255, div. A, title II, §2011, Dec. 13, 2016, 130 Stat. 1047.)

**§ 289h. Repealed. Pub. L. 103-43, title I, § 121(b)(2), June 10, 1993, 107 Stat. 133**

Section, act July 1, 1944, ch. 373, title IV, §499, as added Nov. 20, 1985, Pub. L. 99-158, §2, 99 Stat. 878, related to construction of subchapter.

**§ 290. National Institutes of Health Management Fund; establishment; advancements; availability; final adjustments of advances**

For the purpose of facilitating the economical and efficient conduct of operations in the Na-