ed to guaranteed availability of coverage, was added by Pub. L. 111-148, title I, §1201(4), Mar. 23, 2010, 124 Stat. 156, effective for plan years beginning on or after Jan. 1, 2014, and is classified to section 300gg-1 of this title.

#### EFFECTIVE DATE

Section effective 18 months after May 21, 2008, see section 213 of Pub. L. 110-233, set out as a note under section 2000ff of this title.

## § 2000ff-9. Medical information that is not genetic information

An employer, employment agency, labor organization, or joint labor-management committee shall not be considered to be in violation of this chapter based on the use, acquisition, or disclosure of medical information that is not genetic information about a manifested disease, disorder, or pathological condition of an employee or member, including a manifested disease, disorder, or pathological condition that has or may have a genetic basis.

(Pub. L. 110-233, title II, §210, May 21, 2008, 122 Stat. 920.)

#### EFFECTIVE DATE

Section effective 18 months after May 21, 2008, see section 213 of Pub. L. 110-233, set out as a note under section 2000ff of this title.

### § 2000ff-10. Regulations

Not later than 1 year after May 21, 2008, the Commission shall issue final regulations to carry out this chapter.

(Pub. L. 110-233, title II, §211, May 21, 2008, 122 Stat. 920.)

#### EFFECTIVE DATE

Section effective 18 months after May 21, 2008, see section 213 of Pub. L. 110-233, set out as a note under section 2000ff of this title.

### § 2000ff-11. Authorization of appropriations

There are authorized to be appropriated such sums as may be necessary to carry out this chapter (except for section 2000ff-7 of this title).

(Pub. L. 110–233, title II, §212, May 21, 2008, 122 Stat. 920.)

### EFFECTIVE DATE

Section effective 18 months after May 21, 2008, see section 213 of Pub. L. 110-233, set out as a note under section 2000ff of this title.

# CHAPTER 22—INDIAN HOSPITALS AND HEALTH FACILITIES

SUBCHAPTER I-MAINTENANCE AND OPERATION

Sec.
2001. Hospitals and health facilities transferred to
Public Health Service; restriction on closing hospitals.

2002. Transfer of hospitals and facilities to State or private institutions; conditions and restrictions; failure to meet requirements.

2003. Regulations.

2004. Transfer of personnel, property, records, monies.

2004a. Sanitation facilities.

2004b. Implementation of education, hospital and health facility, etc., contracts and grants by Public Health Service personnel; request for detail of personnel.

Sec

### SUBCHAPTER II—CONSTRUCTION OF HEALTH FACILITIES AND COMMUNITY HOSPITALS

2005. Financial assistance by Surgeon General. 2005a. Amount of assistance; determination of costs.

2005b. Conditions of assistance.

2005c. Payments.

2005d. Eligibility of assisted project for aid under

other acts; excluded costs.

2005e. Definitions.

2005f. Supervision or control of assisted hospitals.

### SUBCHAPTER I—MAINTENANCE AND OPERATION

### § 2001. Hospitals and health facilities transferred to Public Health Service; restriction on closing hospitals

(a) All functions, responsibilities, authorities, and duties of the Department of the Interior, the Bureau of Indian Affairs, Secretary of the Interior, and the Commissioner of Indian Affairs relating to the maintenance and operation of hospital and health facilities for Indians, and the conservation of the health of Indians, are transferred to, and shall be administered by, the Surgeon General of the United States Public Health Service, under the supervision and direction of the Secretary of Health and Human Services: Provided, That hospitals now in operation for a specific tribe or tribes of Indians shall not be closed prior to July 1, 1956, without the consent of the governing body of the tribe or its organized council.

(b) In carrying out his functions, responsibilities, authorities, and duties under this subchapter, the Secretary is authorized, with the consent of the Indian people served, to contract with private or other non-Federal health agencies or organizations for the provision of health services to such people on a fee-for-service basis or on a prepayment or other similar basis.

(Aug. 5, 1954, ch. 658, §1, 68 Stat. 674; Pub. L. 93–222, §6(a), Dec. 29, 1973, 87 Stat. 935; Pub. L. 96–88, title V, §509(b), Oct. 17, 1979, 93 Stat. 695.)

### AMENDMENTS

1973—Pub. L. 93–222 designated existing provisions as subsec. (a) and added subsec. (b).

### EFFECTIVE DATE

Act Aug. 5, 1954, ch. 658, §6, 68 Stat. 675, as amended by Pub. L. 86–121, §2, July 31, 1959, 73 Stat. 268, provided that: "Sections 1 to 5, inclusive, of this Act [enacting this subchapter and repealing sections 444 to 449 of Title 25. Indians] shall take effect July 1, 1959."

### TRANSFER OF FUNCTIONS

Office of Surgeon General abolished by section 3 of Reorg. Plan No. 3 of 1966, eff. June 25, 1966, 31 F.R. 8855, 80 Stat. 1610, and functions thereof transferred to Secretary of Health, Education, and Welfare by section 1 of Reorg. Plan No. 3 of 1966, set out as a note under section 202 of this title. Secretary of Health, Education, and Welfare redesignated Secretary of Health and Human Services by section 509(b) of Pub. L. 96-88, which is classified to section 3508(b) of Title 20, Education. Office of Surgeon General reestablished within the Office of the Assistant Secretary for Health, see Notice of Department of Health and Human Services, Office of the Assistant Secretary for Health, Mar. 30, 1987, 52 F.R. 11754.