Sec.

607.

608.

609.

610.

611.

611a.

612

613.

616.

617.

618

619.

608a.

Subsec. (c)(6)(B), (C). Pub. L. 114-113, §302(a)(3)(F)(i), (ii), redesignated subpar. (C) as (B) and struck out former subpar. (B) which read as follows: "for fiscal year 2012, \$7,000,000; and".

CHAPTER 7-SOCIAL SECURITY

SUBCHAPTER I-GRANTS TO STATES FOR OLD-AGE ASSISTANCE

- Sec.
- 301. Authorization of appropriations.
- 302. State old-age plans. 303 Payments to States and certain territories; computation of amount; eligi-
- bility of State to receive payment. 304. Stopping payment on deviation from required provisions of plan or failure to comply therewith. 305.
 - Omitted.
- Definitions. 306.
- II—FEDERAL SUBCHAPTER OLD-AGE, SUR-VIVORS, AND DISABILITY INSURANCE BENE-FITS
- 401. Trust Funds.
- 401a. Omitted. 402. Old-age and survivors insurance benefit
- payments. 403. Reduction of insurance benefits.
- Overpayments and underpayments. 404.
- Evidence, procedure, and certification 405. for payments.
- 405a. Regulations pertaining to frequency or due dates of payments and reports under voluntary agreements covering State and local employees; effective date. 406 Representation of claimants before Com-
- missioner. Assignment of benefits. 407 Penalties. 408.
- "Wages" defined. 409
- Definitions relating to employment. 410.
- 410a. Transferred.
- Definitions relating to self-employment. 411 Self-employment income credited to cal-412. endar years. 413. Quarter and quarter of coverage. 414. Insured status for purposes of old-age
- and survivors insurance benefits. Computation of primary 415. insurance amount. 416 Additional definitions. 417. Benefits for veterans.
- Voluntary agreements for coverage of 418. State and local employees. Repealed. 419. 420. Disability provisions inapplicable if benefit rights impaired. 421. Disability determinations.
- Rehabilitation services. 422.
- 423. Disability insurance benefit payments. 424. Repealed.
- Reduction of disability benefits. 424a. 425. Additional rules relating to benefits
- based on disability. 426. Entitlement to hospital insurance bene-
- fits. 426-1. End stage renal disease program.
- Transitional provision on eligibility of 426a. uninsured individuals for hospital insurance benefits.
- 427. Transitional insured status for purposes of old-age and survivors benefits.
- 428. Benefits at age 72 for certain uninsured individuals. 429 Benefits in case of members of uniformed
- services. 430. Adjustment of contribution and benefit
 - base

- Benefits for certain individuals interned 431. by United States during World War II.
- 432. Processing of tax data.
- 433. International agreements.
- 434. Demonstration project authority.
- SUBCHAPTER III-GRANTS TO STATES FOR UN-EMPLOYMENT COMPENSATION ADMINISTRA-TION
- 501. Use of available funds.
- 502 Payments to States; computation of amounts.
- 503. State laws.
- 504. Judicial review.
- 505. Demonstration projects.
- SUBCHAPTER IV-GRANTS TO STATES FOR AID AND SERVICES TO NEEDY FAMILIES WITH CHILDREN AND FOR CHILD-WELFARE SERV-ICES
- PART A-BLOCK GRANTS TO STATES FOR TEMPORARY ASSISTANCE FOR NEEDY FAMILIES
- 601. Purpose.
- 602. Eligible States; State plan.
- 603. Grants to States.
- 603a. Transferred.
- Use of grants. 604.
- 604a Services provided by charitable, religious, or private organizations. Administrative provisions. 605.
- 606. Federal loans for State welfare programs.
 - Mandatory work requirements.
 - Prohibitions; requirements.
 - Fraud under means-tested welfare and public assistance programs.
 - Penalties.
 - Appeal of adverse decision.
 - Data collection and reporting.
 - State required to provide certain information.
 - Direct funding and administration by Indian tribes. Evaluation of temporary assistance for
 - needy families and related programs. Repealed.
- 614. Waivers 615
 - Administration.
 - Limitation on Federal authority.
 - Funding for child care.
 - Definitions.

PART B-CHILD AND FAMILY SERVICES

SUBPART 1-CHILD WELFARE SERVICES

- 620. Repealed. 621. Purpose. State plans for child welfare services. 622. Allotments to States. 623. 624. Payment to States. Limitations on authorization of appro-625. priations. 626. Research, training, or demonstration projects. 627. Family connection grants. 628 Payments to Indian tribal organizations. 628a Transferred. 628b. National random sample study of child welfare SUBPART 2-PROMOTING SAFE AND STABLE FAMILIES
- 629. Purpose.
- 629a. Definitions. 629b.
- State plans. 629c
- Allotments to States. 629d.
- Payments to States. 629e.
 - Evaluations; research; technical assistance

Sec. 629f.	Authorization of appropriations; reserva-	Sec. 672.
629g.	tion of certain amounts. Discretionary and targeted grants.	673.
629h.	Entitlement funding for State courts to assess and improve handling of pro-	673a.
	ceedings relating to foster care and adoption.	673b.
6291.	Grants for programs for mentoring chil- dren of prisoners.	673c.
	SUBPART 3—COMMON PROVISIONS	$674. \\ 675.$
629m.	Data standardization for improved data matching.	675a.
	Work Incentive Program for Recipients Der State Plan Approved Under Part A	676. 677.
630 to 645.	Repealed or Omitted.	678.
Part D-	-CHILD SUPPORT AND ESTABLISHMENT OF PATERNITY	679. 679a.
651.	Authorization of appropriations.	
652. 653.	Duties of Secretary. Federal Parent Locator Service.	679b. 679c.
653a.	State Directory of New Hires.	
654. 654a.	State plan for child and spousal support.	Ι
654b.	Automated data processing. Collection and disbursement of support	681 to
655.	payments. Payments to States.	SUB
655a.	Provision for reimbursement of expenses.	
656.	Support obligation as obligation to	701.
	State; amount; discharge in bank- ruptcy.	702.
657.	Distribution of collected support.	703.
658. 658a.	Repealed. Incentive payments to States.	703a.
659.	Consent by United States to income	704.
	withholding, garnishment, and similar proceedings for enforcement of child	704a. 704b.
	support and alimony obligations.	705.
659a. 660.	International support enforcement. Civil action to enforce child support ob-	706.
000.	ligations; jurisdiction of district courts.	707.
661, 662.	Repealed.	708. 709.
663.	Use of Federal Parent Locator Service in connection with enforcement or deter-	
	mination of child custody in cases of	710.
664.	parental kidnaping of child. Collection of past-due support from Fed-	711.
0.05	eral tax refunds.	712.
665.	Allotments from pay for child and spous- al support owed by members of uni-	719
	formed services on active duty.	713. 714 to
666.	Requirement of statutorily prescribed procedures to improve effectiveness of	SU
	child support enforcement.	
667.	State guidelines for child support awards.	801.
668.	Encouragement of States to adopt civil	
	procedure for establishing paternity in contested cases.	901. 901a.
669.	Collection and reporting of child support	902.
669a.	enforcement data. Nonliability for financial institutions	903.
	providing financial records to State	904.
	child support enforcement agencies in child support cases.	905, 9 906.
669b.	Grants to States for access and visita-	
DARME	tion programs.	907. 907a.
PART E—	FEDERAL PAYMENTS FOR FOSTER CARE AND ADOPTION ASSISTANCE	
670.	Congressional declaration of purpose; au-	908. 909.
671.	thorization of appropriations. State plan for foster care and adoption	910.
011.	assistance.	

Sec.	
672.	Foster care maintenance payments pro-
673.	gram. Adoption and guardianship assistance
070	program.
673a.	Interstate compacts.
673b.	Adoption and legal guardianship incen- tive payments.
673c.	Timely interstate home study incentive payments.
674.	Payments to States.
675.	Definitions.
675a.	Additional case plan and case review sys-
676.	tem requirements. Administration.
677.	John H. Chafee Foster Care Independ-
011.	ence Program.
678.	Rule of construction.
679.	Collection of data relating to adoption
	and foster care.
679a.	National Adoption Information Clearing-
	house.
679b.	Annual report.
679c.	Programs operated by Indian tribal orga-
01001	nizations.
Part F-	-Job Opportunities and Basic Skills
	TRAINING PROGRAM
681 to 687.	Repealed.
SUBCHAPT	ER V—MATERNAL AND CHILD HEALTH
	SERVICES BLOCK GRANT
701.	Authorization of appropriations; pur-
-	poses; definitions.
702.	Allotment to States and Federal set- aside.
703.	Payments to States.
703a.	Omitted.
704.	Use of allotment funds.
704a.	Omitted.
704b.	Nonavailability of allotments after close
	of fiscal year.
705.	Application for block grant funds.
706.	Administrative and fiscal accountabil-
	ity.
707.	Criminal penalty for false statements.
708.	Nondiscrimination provisions.
709.	Administration of Federal and State pro- grams.
710.	Separate program for abstinence edu- cation.
711.	Maternal, infant, and early childhood home visiting programs.
712.	Services to individuals with a post-
112.	partum condition and their families.
713.	Personal responsibility education.
714 to 731.	Omitted or Repealed.
SUBCHAP	TER VI—TEMPORARY STATE FISCAL RELIEF
801.	Repealed.
	CHAPTER VII—ADMINISTRATION
SUB	
901.	Social Security Administration.
901a.	Repealed.
902.	Commissioner; Deputy Commissioner;

901a. Repealed.
902. Commissioner; Deputy Commissioner; other officers.
903. Social Security Advisory Board.
904. Administrative duties of Commissioner.
905. 905a. Transferred.
906. Training grants for public welfare personnel.
907. Repealed.
907a. National Commission on Social Security.
908. Omitted.
909. Delivery of benefit checks.
910. Recommendations by Board of Trustees to remedy inadequate balances in Social Security trust funds.

Sec.	Dudgetens treatment of trust fund ener	Sec.	
911.	Budgetary treatment of trust fund oper- ations.	1308.	A
912.	Office of Rural Health Policy.		
913.	Duties and authority of Secretary.	1309.	Aı
914.	Office of Women's Health.		
SUBCHAR	TER VIII—SPECIAL BENEFITS FOR		
	AIN WORLD WAR II VETERANS	1310.	Co
		1311.	D
1001. 1002.	Basic entitlement to benefits.	1311.	Ρι
1002.	Qualified individuals. Residence outside the United States.	1312.	Μ
1005.	Disqualifications.		
1005.	Benefit amount.	1313.	As
1006.	Applications and furnishing of informa-		-
	tion.	1314. 1314a.	Pi M
1007.	Representative payees.	1514a.	Μ
1008.	Overpayments and underpayments.	1314b.	Na
1009. 1010.	Hearings and review. Other administrative provisions.		
1010. 1010a.	Optional Federal administration of State		
101000	recognition payments.	1315.	De
1011.	Penalties for fraud.	1315a.	Ce
1012.	Definitions.	1315b.	Pı
1013.	Appropriations.	10100.	11
SUBCHAI	PTER IX—EMPLOYMENT SECURITY		
Al	DMINISTRATIVE FINANCING	1316.	A
1101.	Employment security administration ac-		
1101.	count.	1317.	A
1102.	Transfers between Federal unemploy-		
	ment account and employment secu-	1318.	Al
	rity administration account.	10101	
1103.	Amounts transferred to State accounts.		
1104. 1105.	Unemployment Trust Fund. Extended unemployment compensation	1319.	Fe
1105.	account.		
1106.	Unemployment compensation research	1320.	Δ.
	program.	1320. 1320a.	A] Ui
1107.	Personnel training.	102000.	01
1108.	Advisory Council on Unemployment	1320a–1.	Li
1100	Compensation.		
1109.	Federal Employees Compensation Ac- count.	1320a-1a.	TI
1110.	Borrowing between Federal accounts.	1320a–2. 1320a–2a.	Ef Re
1111.	Data exchange standardization for im-	1520a-2a.	100
	proved interoperability.		
SUBCHAPT	ER X—GRANTS TO STATES FOR AID		
	TO BLIND	1320a–3.	Di
1201.	Authorization of appropriations.		
1201.	State plans for aid to blind.	1320a-3a.	Di
1202a.	Repealed.	1020a-0a.	
1203.	Payment to States.	1320a-4.	Is
1204.	Operation of State plans.		
1205.	Omitted.	1320a–5.	Di
1206.	"Aid to the blind" defined.		
	ER XI—GENERAL PROVISIONS, PEER		
REVIEW, AN	D ADMINISTRATIVE SIMPLIFICATION		
T	Part A—General Provisions	1320a-6.	A
1301. 1301–1, 1301a.	Definitions. Omitted.		
1301-1, 1301a. 1302.	Rules and regulations; impact analyses	1320a–6a.	In
1002.	of Medicare and Medicaid rules and	1320a-7.	Ez
	regulations on small rural hospitals.	1320a-1.	102
1303.	Separability.		
1304.	Reservation of right to amend or repeal.	1320a–7a.	Ci
1305.	Short title of chapter.	1320a–7b.	Cr
1306.	Disclosure of information in possession	1000 -	-
	of Social Security Administration or Department of Health and Human	1320a-7c.	Fi
	Services.	1320a–7d.	Gı
1306a.	Public access to State disbursement	1320a-7e.	He
	records.		
1306b.	State data exchanges.	1320a–7f.	Co
1306c.	Restriction on access to the Death Mas-	1000- 7	-
1307.	ter File. Penalty for fraud.	1320a–7g.	Fu
1001.	i onatoy tot madu.		:

18.	Additional grants to Puerto Rico, Virgin Islands, Guam, and American Samoa;
	limitation on total payments.
19.	Amounts disregarded not to be taken
	into account in determining eligibility of other individuals.
.0.	Cooperative research or demonstration
1	projects.
.1.	Public assistance payments to legal representatives.
.2.	Medical care guides and reports for pub-
.3.	lic assistance and medical assistance. Assistance for United States citizens re-
	turned from foreign countries.
4.	Public advisory groups.
4a.	Measurement and reporting of welfare receipt.
4b.	National Advisory Committee on the Sex Trafficking of Children and Youth in
.5.	the United States. Demonstration projects.
.5a.	Center for Medicare and Medicaid Inno-
F 1-	vation.
.5b.	Providing Federal coverage and payment coordination for dual eligible bene- ficiaries.
.6.	Administrative and judicial review of
.7.	public assistance determinations. Appointment of the Administrator and
	Chief Actuary of the Centers for Medi-
.8.	care & Medicaid Services. Alternative Federal payment with re-
	spect to public assistance expendi-
.9.	tures. Federal participation in payments for re-
	pairs to home owned by recipient of
0	aid or assistance.
20. 20a.	Approval of certain projects. Uniform reporting systems for health
	services facilities and organizations.
20a–1.	Limitation on use of Federal funds for capital expenditures.
0a–1a.	Transferred.
20a-2.	Effect of failure to carry out State plan.
20a–2a.	Reviews of child and family services pro- grams, and of foster care and adoption
	assistance programs, for conformity
20a-3.	with State plan requirements. Disclosure of ownership and related in-
	formation; procedure; definitions;
0a-3a.	scope of requirements. Disclosure requirements for other pro-
10 <i>a</i> -5 <i>a</i> .	viders under part B of Medicare.
20a–4.	Issuance of subpenas by Comptroller General.
0a-5.	Disclosure by institutions, organiza-
	tions, and agencies of owners, officers,
	etc., convicted of offenses related to programs; notification requirements;
	"managing employee" defined.
20a–6.	Adjustments in SSI benefits on account of retroactive benefits under sub-
	chapter II.
20a-6a.	Interagency coordination to improve program administration.
20a–7.	Exclusion of certain individuals and en-
	tities from participation in Medicare and State health care programs.
0a-7a.	Civil monetary penalties.
20a–7b.	Criminal penalties for acts involving Federal health care programs.
0a-7c.	Fraud and abuse control program.
20a-7d.	Guidance regarding application of health
0a-7e.	care fraud and abuse sanctions. Health care fraud and abuse data collec-
	tion program.
20a–7f.	Coordination of medicare and medicaid surety bond provisions.
0a-7g.	Funds to reduce medicaid fraud and
	abuse.

TITLE 42-THE PUBLIC HEALTH AND WELFARE

Sec

Fage 1499	IIILE 42—IHE FUBLIC
Sec.	
1320a–7h.	Transparency reports and reporting of physician ownership or investment interests.
1320a–7i.	Reporting of information relating to drug samples.
1320a–7j.	Accountability requirements for facili- ties.
1320a–7k.	Medicare and Medicaid program integ- rity provisions.
1320a–7 <i>l</i> .	Nationwide program for national and State background checks on direct pa- tient access employees of long-term care facilities and providers.
1320a–7m.	Use of predictive modeling and other analytics technologies to identify and prevent waste, fraud, and abuse in the Medicare fee-for-service program.
1320a–7n.	Disclosure of predictive modeling and other analytics technologies to iden- tify and prevent waste, fraud, and abuse.
1320a-8.	Civil monetary penalties and assess- ments for subchapters II, VIII and XVI.
1320a–8a.	Administrative procedure for imposing

ters II, VIII and XVI. edure for imposing penalties for false or misleading statements. 1320a-8b. Attempts to interfere with administra-

tion of this chapter. 1320a-9.

Demonstration projects.

- 1320a-10. Effect of failure to carry out State plan. 1320b. Repealed.
- 1320b-1. Notification of Social Security claimant with respect to deferred vested benefits.
- 1320b-2. Period within which certain claims must be filed.
- Applicants or recipients under public as-1320b-3. sistance programs not to be required to make election respecting certain veterans' benefits. 1320b-4. Nonprofit hospital or critical access hos
 - pital philanthropy.
- 1320b-5. Authority to waive requirements during national emergencies.
- 1320b-6. Exclusion of representatives and health care providers convicted of violations from participation in social security programs. 1320b-7. Income and eligibility verification sys-
- tem. 1320b-8. Hospital protocols for organ procurement and standards for organ procure-
- ment agencies. 1320b-9. Improved access to, and delivery of, health care for Indians under subchapters XIX and XXI.
- 1320b–9a. Child health quality measures.
- 1320b-9b. Adult health quality measures.
- 1320b-10. Prohibitions relating to references to Social Security or Medicare.
- 1320b-11. Blood Donor Locator Service. Research on outcomes of health care 1320b-12.
- services and procedures. 1320b-13. Social security account statements.
- 1320b-14. Outreach efforts to increase awareness of the availability of medicare cost-sharing and subsidies for low-income individuals under subchapter XVIII.
- 1320b-15. Protection of social security and medicare trust funds.
- 1320b-16. Public disclosure of certain information on hospital financial interest and referral patterns.
- 1320b-17. Cross-program recovery of overpayments from benefits. 1320b-18
- Repealed. The Ticket to Work and Self-Sufficiency 1320b-19. Program.
- 1320b-20 Work incentives outreach program.

- 1320b-21. State grants for work incentives assistance to disabled beneficiaries. 1320b-22. Grants to develop and establish State infrastructures to support working individuals with disabilities. 1320b-23. Pharmacy benefit managers transparency requirements. Consultation with Tribal Technical Ad-1320b-24. visory Group. 1320b-25. Reporting to law enforcement of crimes occurring in federally funded longterm care facilities. PART B-PEER REVIEW OF UTILIZATION AND QUALITY OF HEALTH CARE SERVICES 1320c. Purpose. Definition of quality improvement orga-1320c-1. nization. Contracts with quality improvement or-1320c-2. ganizations. Functions of quality improvement orga-1320c-3. nizations. 1320c-4. Right to hearing and judicial review. Obligations of health care practitioners 1320c-5. and providers of health care services; sanctions and penalties; hearings and review. 1320c-6. Limitation on liability. Application of this part to certain State 1320c-7. programs receiving Federal financial assistance. 1320c-8. Authorization for use of certain funds to administer provisions of this part. 1320c-9. Prohibition against disclosure of information. 1320c-10. Annual reports. Exemptions for religious nonmedical 1320c-11. health care institutions.
- 1320c-12. Medical officers in American Samoa, the Northern Mariana Islands, and the Trust Territory of the Pacific Islands to be included in the quality improvement program.
- 1320c-13 to 1320c-22. Repealed or Omitted.

PART C-ADMINISTRATIVE SIMPLIFICATION

- 1320d. Definitions. General requirements for adoption of 1320d-1. standards. 1320d-2. Standards for information transactions and data elements. 1320d - 3Timetables for adoption of standards. 1320d-4. Requirements. General penalty for failure to comply 1320d-5. with requirements and standards. 1320d-6. Wrongful disclosure of individually identifiable health information. 1320d-7. Effect on State law. Processing payment transactions by fi-1320d-8. nancial institutions. 1320d-9. Application of HIPAA regulations to genetic information PART D-COMPARATIVE CLINICAL EFFECTIVENESS RESEARCH 1320e. Comparative clinical effectiveness research. 1320e-1. Limitations on certain uses of comparative clinical effectiveness research. 1320e-2. Trust Fund transfers to Patient-Centered Outcomes Research Trust Fund. Information exchange with payroll data 1320e-3. providers. SUBCHAPTER XII-ADVANCES TO STATE UNEMPLOYMENT FUNDS 1321. Eligibility requirements for transfer of
 - funds; reimbursement by State; application; certification; limitation.

Sec. 1322.	Repayment by State; certification; transfer; interest on loan; credit of in-	Sec. 1394.
1323.	terest on loan. Repayable advances to Federal unem-	SUBCHA
1324.	ployment account. "Governor" defined.	SUBOIL
	HAPTER XIII—RECONVERSION	1395.
UNEMPL 1331 to 1336.	OYMENT BENEFITS FOR SEAMEN Repealed.	1395a. 1395b.
SUBCHAPTE	R XIV—GRANTS TO STATES FOR AID NENTLY AND TOTALLY DISABLED	1395b–1.
1351. 1352.	Authorization of appropriations. State plans for aid to permanently and	1395b–2.
1353.	totally disabled. Payments to States.	1395b–3.
1354. 1355.	Operation of State plans. Definitions.	1395b-4.
	HAPTER XV—UNEMPLOYMENT ATION FOR FEDERAL EMPLOYEES	1395b–5.
1361 to 1371.	Repealed.	1395b–6.
	ER XVI—SUPPLEMENTAL SECURITY	1395b–7. 1395b–8.
INCOME 1 1381.	FOR AGED, BLIND, AND DISABLED Statement of purpose; authorization of	1395b–9. 1395b–10.
1381a.	appropriations. Basic entitlement to benefits.	PART A-
	A—Determination of Benefits	
1382.		1395c.
1382a.	Eligibility for benefits. Income; earned and unearned income de- fined; exclusions from income.	1395d. 1395e. 1395f.
1382b.	Resources.	1005
1382c. 1382d.	Definitions. Rehabilitation services for blind and dis-	1395g. 1395h.
1382e.	abled individuals. Supplementary assistance by State or subdivision to needy individuals.	1395i. 1395i–1.
1382f. 1382g.	Cost-of-living adjustments in benefits. Payments to State for operation of sup-	1395i–1a. 1395i–2.
-	plementation program.	10001 2.
1382h.	Benefits for individuals who perform substantial gainful activity despite se-	1395i–2a.
1382i.	vere medical impairment. Medical and social services for certain	40051 0
1382j.	handicapped persons. Attribution of sponsor's income and re-	1395i–3.
1382k.	sources to aliens. Repealed.	1395i–3a.
	PROCEDURAL AND GENERAL PROVISIONS	1395i-4.
		1395i-5.
1383. 1383a.	Procedure for payment of benefits. Penalties for fraud.	10001 0.
1383b.	Administration.	
1383c.	Eligibility for medical assistance of aged, blind, or disabled individuals	PART
1383d.	under State's medical assistance plan. Outreach program for children.	1395j.
1383e.	Treatment referrals for individuals with alcoholism or drug addiction condi-	
10006	tion.	1395k.
1383f. 1384, 1385.	Annual report on program. Omitted.	1395 <i>l</i> . 1395m.
SUBCHAPTER COMPREHE RETARDAT	INSIVE ACTION TO COMBAT MENTAL	1395m–1.
1391.		1395n.
1391. 1392.	Authorization of appropriations. Availability of funds during certain fis- cal years; limitation on amount; utili-	1395 <i>0</i> . 1395p.
1393.	zation of grant. Applications; single State agency des-	1395q. 1395r.
	ignation; essential planning services; plans for expenditure; final activities report and other necessary reports;	1395s. 1395t.
	records; accounting.	-

1394.	Payments to States; adjustments; ad- vances or reimbursement; install- ments; conditions.
SUBCHAP	TER XVIII—HEALTH INSURANCE FOR AGED AND DISABLED
1395.	Prohibition against any Federal inter- ference.
1395a. 1395b.	Free choice by patient guaranteed. Option to individuals to obtain other
1395b–1.	health insurance protection. Incentives for economy while maintain- ing or improving quality in provision
1395b–2.	of health services. Notice of medicare benefits; medicare and medigap information.
1395b–3.	Health insurance advisory service for medicare beneficiaries.
1395b–4.	Health insurance information, counsel- ing, and assistance grants.
1395b–5. 1395b–6.	Beneficiary incentive programs. Medicare Payment Advisory Commis-
10051 7	sion.
1395b–7. 1395b–8.	Explanation of medicare benefits. Chronic care improvement.
1395b-9.	Provisions relating to administration.
1395b–10.	Addressing health care disparities.
Part A—1	HOSPITAL INSURANCE BENEFITS FOR AGED AND DISABLED
1395c.	Description of program.
1395d. 1395e.	Scope of benefits. Deductibles and coinsurance.
1395f.	Conditions of and limitations on pay- ment for services.
1395g.	Payments to providers of services.
1395h.	Provisions relating to the administra- tion of part A.
13951.	Federal Hospital Insurance Trust Fund.
1395i–1. 1395i–1a.	Authorization of appropriations. Repealed.
13951–1 <i>a</i> . 13951–2.	Hospital insurance benefits for unin- sured elderly individuals not otherwise eligible.
1395i–2a.	Hospital insurance benefits for disabled individuals who have exhausted other entitlement.
1395i-3.	Requirements for, and assuring quality of care in, skilled nursing facilities.
1395i–3a.	Protecting residents of long-term care facilities.
13951–4.	Medicare rural hospital flexibility pro- gram.
13951–5.	Conditions for coverage of religious non- medical health care institutional serv- ices.
	-Supplementary Medical Insurance enefits for Aged and Disabled
1395j.	Establishment of supplementary medical insurance program for aged and disabled.
1395k.	Scope of benefits; definitions.
1395 <i>l</i> . 1395m.	Payment of benefits.
1395111.	Special payment rules for particular items and services.
1395m–1.	Improving policies for clinical diagnostic laboratory tests.
1395n.	Procedure for payment of claims of pro- viders of services.
13950.	Eligible individuals.
1395p.	Enrollment periods.
1395q. 1395r.	Coverage period. Amount of premiums for individuals en-
10001.	rolled under this part.
1395s.	Payment of premiums.
1395t.	Federal Supplementary Medical Insur- ance Trust Fund.

Page 1501	TITLE 42—THE PUBLIC	HEALTH A
Sec. 1395t-1, 1395t- 1395u.	2. Repealed. Provisions relating to the administra-	Sec. 1395w–133.
1395v.	tion of part B. Agreements with States.	1395w–134.
1395w. 1395w-1.	Appropriations to cover Government contributions and contingency reserve. Repealed.	SUBPART CARD
1395w-2.	Intermediate sanctions for providers or suppliers of clinical diagnostic labora- tory tests.	1395w–141.
1395w–3.	Competitive acquisition of certain items and services.	SUBPA
1395w–3a.	Use of average sales price payment methodology.	1395w–151.
1395w–3b.	Competitive acquisition of outpatient drugs and biologicals.	1395w–152. 1395w–153.
1395w–4. 1395w–5.	Payment for physicians' services. Public reporting of performance infor- mation.	1395w–154.
1395w–6.	Empowering beneficiary choices through continued access to information on physicians' services.	P.
PAD	T C-MEDICARE+CHOICE PROGRAM	1395x.
1395w-21.	Eligibility, election, and enrollment.	1395y.
1395w-22.	Benefits and beneficiary protections.	1395z.
1395w–23.	Payments to Medicare+Choice organiza- tions.	
1395w-24.	Premiums and bid amounts.	
1395w–25.	Organizational and financial require- ments for Medicare+Choice organiza- tions; provider-sponsored organiza- tions.	1395aa. 1395bb. 1395cc.
1395w–26. 1395w–27.	Establishment of standards. Contracts with Medicare+Choice organi- zations.	1395cc-1.
1395w–27a. 1395w–28.	Special rules for MA regional plans. Definitions; miscellaneous provisions.	1395cc-2.
1395w–29.	Repealed.	1395cc-3.
Part D—V	OLUNTARY PRESCRIPTION DRUG BENEFIT PROGRAM	1395cc-4.
	1—PART D ELIGIBLE INDIVIDUALS AND PRESCRIPTION DRUG BENEFITS	1395cc-5.
1395w-101.	Eligibility, enrollment, and information.	1395dd.
1395w–102. 1395w–103.	Prescription drug benefits. Access to a choice of qualified prescrip- tion drug coverage.	1395ee.
1395w–104.	Beneficiary protections for qualified pre- scription drug coverage.	1395ff.
SUBPART 2—F	PRESCRIPTION DRUG PLANS; PDP SPONSORS; FINANCING	1395gg.
1395w–111. 1396w–112.	PDP regions; submission of bids; plan ap- proval. Requirements for and contracts with	1395hh. 1395ii.
1395w-112.	prescription drug plan (PDP) sponsors. Premiums; late enrollment penalty.	1395jj.
1395w–114.	Premium and cost-sharing subsidies for low-income individuals.	1395kk. 1395kk–1.
1395w–114a.	Medicare coverage gap discount pro- gram.	1395kk-2.
1395w–115.	Subsidies for part D eligible individuals for qualified prescription drug cov- erage.	1395 <i>ll</i> . 1395mm.
1395w–116.	Medicare Prescription Drug Account in the Federal Supplementary Medical In-	1395nn.
	surance Trust Fund. PPLICATION TO MEDICARE ADVANTAGE PRO-	1395 <i>00</i> . 1395pp.
GRAMS AND	TREATMENT OF EMPLOYER-SPONSORED PRO- OTHER PRESCRIPTION DRUG PLANS	1395qq. 1395rr.
1395w–131.	Application to Medicare Advantage pro- gram and related managed care pro- grams.	1395rr-1. 1395ss.
1395w–132.	Special rules for employer-sponsored programs.	1395ss-1.

HEALTH AN	D WELFARE
Sec. 1395w–133.	State Pharmaceutical Assistance Pro-
1395w–134.	grams. Coordination requirements for plans pro- viding prescription drug coverage.
	-MEDICARE PRESCRIPTION DRUG DISCOUNT D TRANSITIONAL ASSISTANCE PROGRAM
1395w–141.	Medicare prescription drug discount card and transitional assistance program.
SUBPAR'	F 5—DEFINITIONS AND MISCELLANEOUS PROVISIONS
1395w–151.	Definitions; treatment of references to provisions in part C.
1395w–152. 1395w–153.	Miscellaneous provisions. Condition for coverage of drugs under
1395w–154.	this part. Improved Medicare prescription drug plan and MA-PD plan complaint sys- tem.
PAR	T E-MISCELLANEOUS PROVISIONS
1395x. 1395y.	Definitions. Exclusions from coverage and medicare
1395z.	as secondary payer. Consultation with State agencies and other organizations to develop condi- tions of participation for providers of
1395aa.	services. Agreements with States.
1395bb. 1395cc.	Effect of accreditation. Agreements with providers of services;
1395cc-1.	enrollment processes. Demonstration of application of physi- cian volume increases to group prac-
1395cc-2.	tices. Provisions for administration of dem-
1395cc-3.	onstration program. Health care quality demonstration pro- gram.
1395cc-4.	National pilot program on payment bun- dling.
1395cc-5.	Independence at home medical practice
1395dd.	demonstration program. Examination and treatment for emer- gency medical conditions and women
1395ee.	in labor. Practicing Physicians Advisory Council; Council for Technology and Innova- tion.
1395ff.	Determinations; appeals. Overpayment on behalf of individuals
1395gg.	and settlement of claims for benefits on behalf of deceased individuals.
1395hh. 1395ii.	Regulations. Application of certain provisions of sub-
1395jj.	chapter II. Designation of organization or publica- tion by name.
1395kk. 1395kk–1.	Administration of insurance programs. Contracts with medicare administrative
1395kk-2.	contractors. Expanding availability of Medicare data.
1395 <i>ll</i> . 1395mm.	Studies and recommendations. Payments to health maintenance organi-
1395nn.	zations and competitive medical plans. Limitation on certain physician refer-
1395 <i>00</i> . 1395pp.	rals. Provider Reimbursement Review Board. Limitation on liability where claims are
1395qq.	disallowed. Indian Health Service facilities.
1395rr. 1395rr–1.	End stage renal disease program. Medicare coverage for individuals ex-
1395rr-1. 1395ss.	posed to environmental health hazards. Certification of medicare supplemental
1395ss–1.	health insurance policies. Clarification.

 Hosgital providers of extended care services. Hosgital providers of extended care services. Hosgital providers of extended care services. Hosgital providers. Hosgital	Sec.		Sec.	
 Jašou., Paymente to promote to losing or convergence of the sector of the		Hospital providers of extended care serv-		Compliance with State plan and pay-
 1395vr. Witholding payments from certain faster the medical pryviders. Second se	1395uu.	Payments to promote closing or conver-	13960.	Use of enrollment fees, premiums, deduc-
 Haw and payment of provider based physicians and payment of provider based physicians and payment of provider based physicians and payment of providers of subchapter properestilos. 13966. 13966. <li< td=""><td>1395vv.</td><td></td><td>13960-1.</td><td></td></li<>	1395vv.		13960-1.	
 1385az. Payment of provider-based physicians and payments under certain percentage arrangements. 1385ay. Payment to kulled marging facilities for metagements. 1385a. Provider education and technical assistance. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Contract with a consensus-based entity regarding performance measurement. 1385aa. Prospective obligations relation to regarding performance measurement. 1385aa. Prospective payments for home health a services. 1385aa. Prospective payment for home health generity Program. 1385bill. Shared savings program. 1386bill. Medical and CHIP Payment and active payment and sevences. 1386c. Operation of State pars. 1386c. Operation of states. 1386c. Contract with a consection of the savings of adminis. 1	1395ww.		1396p.	
 arrangements. J39572. Prownett schilde aursing fucilities. J39572. Presumptive eligibility for certain vormen. J395602. Conditions of participation for home health agencies: home health agencies: home health agencies in home health agencin health agencies in home health agencies in home health agen	1395xx.	Payment of provider-based physicians	1396q.	Application of provisions of subchapter
 Fourdine service costs. Fourdine state in a consensus-based entity. Jassaa-1. Gontract with a consensus-based entity. Jassaa-1. Gontract with a consensus-based entity. Jassaa-1. Gontract with a consensus-based entity. Jassaa-1. Jasse-5. Greet of particle only independent for independent for particulation. Jasser and implementation of parment and coverage of particle. Jasser and implementation. Jasser and	1005	arrangements.		Requirements for nursing facilities.
 ance. ance. Contract with a consensus-based entity regarding performance measurement. Sibstaal. Quality and efficiency measurement. Sibstaal. Conditions of participation for home health genetics, nome health quality. Sibstaal. Medicare Integrity Program. Sibstad. Sibstaal. Medicare Integrity Program. Sibstad. Sibstad. Sibstad. Presentited. Sibstad. Medicare Integrity Program. Sibstad. Sibstad. Medicare Integrity Program. Sibstad. Sibstad. Medicare Integrity Program. Sibstad. Sibstad. Sibstad. Shared savings program. Sibstad. Sibstad. Sibstad. Medicare Infrastructure improvement program. Sibstad. Sibstad savings program. Sibstad. Sibstad savings program. Sibstad savings program. Sibstad savings program. Sibstad savings program. Sibstad post could care (PAC) as sessment data for quality, payment, and discharge planning. Suballed addent program. Sibsta plans for medical assistance. Sibsta Payment of stating of payment and commassion. Sibsta Payment of States Sibsta Payment of States Sibsta Payment of stating of payment and commassion. Sibsta Payment of stating of payment and and discharge planning. Sibsta Payment of stating for medical assistance. Sibsta Payment of stating of medical care ato in with state part of medical care est balabance. Sibsta Payment of stating plan. Sibsta Payment of stating of medical care assistance. Sibsta Payment of stating		routine service costs.		women.
 recarding performance measurement. 1395aa-1. Quality and efficiency measurement. 1395abbb. Conditions of participation for home health accession of the constraints of the constraint on the constraint of the constraint on the constress formatio		ance.		Presumptive eligibility for certain
 13950bb. Conditions of participation for home health agenetics: none health quality. 13950cc. Offset of payments to individuals to collision of the contract. 13950cd. Medicare Integrity Program. 13950cd. Medicare Integrity Program. 13950cff. Prospective payment for home health safety from the contract. 13950cff. Prospective payment for home health safety from the services. 13950cff. Shared safety and report on the elementation concentration concentrations. 13950cff. Prospective payment for home health safety (PACD). 13950cff. Shared safety and report on the elementation concentration concentrations. 13950cff. Shared safety and report on home health safety (PACD). 13950cff. Shared safety and report on the elementation concentration concentration concentrations. 13950cff. Shared safety and provement Fund. 13950cff. Shared safety and report on determination concentration concentratin concentration concentration concentration concentration con		regarding performance measurement.	1396r–1c.	Presumptive eligibility for family plan-
 lect past-due obligations arising from breach of scholarship and loan contract. ligs6id. Medicare Integrity Program. ligs6id. Omitted. ligs6iff. Medicare Integrity Program. ligs6iff. Medicare Integrity Program. ligs6iff. Prospective payment for home health astroice for integrity. ligs6iff. Medicare Improvement Fund. ligs6iff. GAO study and report on determination and implementation of payment and coverage policies under the Medicare lines. ligs6iff. GAO study and report on determination and discharge planning. ligs6iff. State glang policies under the Medicare lines. ligs6iff. Appropriations. ligs6iff. Payment for batte for health care-composition. ligs6iff. Payment for batte plans. ligs6iff. Payment for batte plans. ligs6iff. Payment for batte plans. ligs6iff. Payment for health care-composition. ligs6iff. Opervation of state plans. ligs6iff. Opervation of state plans. ligs6iff. Opervation of state plans. ligs6iff. Opervation of Individuals under grouphealth glass. ligs6iff. Opervation of and approval of ruration health plans. ligs6iff. Opervation of and paproval of ruration health plans. ligs6iff. Opervation of and paproval of ruration health plans. ligs6iff. Assignment, enforcement, and collection for medical chroupha access to laws directly affecting medicad provilation to receive relevant information. ligs6iff. Assignment, enforcement, and collection for medical chroupha access to laws directly affecting medicad provilation to receive relevant information. ligs6iff. Opervame of r	1395bbb.	Conditions of participation for home health agencies; home health quality.	1396r-2.	Information concerning sanctions taken by State licensing authorities against
 1386dad. Medicare Integrity Program. 1386ee. Payments to, and coverage of benefits under, programs of all-inclusive care for elderly (PACE). 1386fff. Prospective payment for home health services. 1386fff. Beatte care infrastructure improvement Fund. 1386ff. Independent Payment Advisory Board. 1386kkk-1. GAO study and report on determination and implementation of payment advisory Board. 1386kkk-1. GAO study and report on determination and discharge planning. 1386ff. State program. for STATES FOR MEDICAL ASSISTANCE PROGRAMS 13866. Operation of State plans. 13866. Payment to States. 13866. Payment adjustment for health care-acture donditions. 13866. Operation of State plans. 13866. Payment adjustment for health care-acture donditions. 13866. Payment adjustment for health care-acture for officiation and approval of runk adjustment for medical existance. 13866. Certification and approval of runk health Services of recoveries pursuant to state plan, amounts retained for ordigina services. 13866. Assignment, enforcement, and collection of fights of payments for medical care payments for medical care for ediversion to receive relevant information to functional for medical care for edividual swith chronic conditions. 13866. Assignment, enforc	1395000.	lect past-due obligations arising from breach of scholarship and loan con-	1396r-3.	ers.
 under, programs of all-inclusive care for elderly (PACE). 1396fff. Prospective payment for home health services. 1396fff. Prospective payment for home health services. 1396fff. Medicare improvement Fund. 1396ff. Medicare Improvement Favment Advisory Board. 1396kkk-1. 1396kkk-1. 1396kkk-1. 1396ff. Standardized post-acute care (PAC) as sessment data for quality, payment, and discharge planning. 1396f. Standardized post-acute care (PAC) as sessment data for quality, payment, and discharge planning. 13966. Medicaid and CHIP Payment and Access Commission. 13966. Operation of State plans. 13966. Operation of State plans. 13966. Payment adjustment for health care- dured conditions. 13966. A equired laws relating to medical care for elderly (PACE). 13966. State plans for licensing of daminis- trators of nursing homes. 13966. State false claims act requirements for increased State share of recoveries establishment of procedures pursuant to State plan, amounts retained for medical crea- trocrease fate share of recoveries establishment of procedures pursuant to State plan, amounts retained fore medical crea- trocrease for elderly retained for medical c	1395ddd.			
 1385fff. Prospective payment for home health services. 1385fff. Prospective payment for home health services. 1385fff. Health care infrastructure improvement Fund. 1385fff. Medicare improvement Fund. 1385kkk-1. GAO study and report on determination and implementation of payment for coverage policies under the Medicare program. 1395kkk-1. GAO study and report on determination and implementation of payment and coverage policies under the Medicare program. 1395klf. Standardized post-acute care (PAC) assessement data for quality, payment and discharge planning. SUBCHAPTER XIX-GRANTS TO STATES FOR Medicaid and CHIP Payment and Access Commission. 13966. Medicaid and CHIP Payment and Access Commission. 13966. Payment for states. 13966. Payment to States. 13966. Payment to findividuals under group faitions. 13966. Definitions. 13966. Definitions. 13966. Payment of individuals under group faitions. 13966. Definitions. 13966. Payment of individuals under group faiting. 13966. State plans. 13966. Certification and approval of rurai health plans. 13966. State programs for licensing of administ rators of nursing facility. 13966. Certification and approval of rurai health forms facilities for mentially retarded. 13968. Assignment, enforcement, and collection of rights of payments for medical care retares facilities for mentally retarded. 13968. Assignment, enforcement, and collection of rights of payments for medical care resultishment of procedures pursuant to State plan; amounts retation for groed retares facilities for mentally retarded. 13968. Assignment, enforcement, and collection of rights of payments for medical care resultishment of procedures pursuant to State plan; amounts retation for mediscin are procession and paproval of rurai health forme for medical care rethrough a health home for individuals wi	1395eee.	under, programs of all-inclusive care	1396r-4.	hospital services furnished by dis-
 13365 M. Health care infrastructure improvement program. program. 13365 M. Medicare Improvement Fund. 13365 K. Independent Payment Advisory Board. 13365 K. Assistrance Commission. 13366. Medicaid and CHIP Payment and Access Commission. 13366. Payment to States. 1366. Payment to for health care-accuration of state plans. 1366. Definitions. 1366. Certification and approval of rural for medical care for eligious beliefs. 1366. State plagi amouts retailing to medical child and portunity acceed state share of recoveries. 1366. Certification and approval of rural health Sorie facilities of nuraling to medical care istabilishment of procedures pursuant to State plagi, amounts retained by State. 1366. Acate pai, amounts retained by State plagi, amounts retained by State. 1366. Assignment, enforcement, and collection of right of payments for medical care istabilishment of procedures pursuant to State plagi, amounts retained by State. 1366. Assignment, enforcement, and collection of right of payments for medical care istabilishment of procedures pursuant to State plagi, amounts retained by State.	1395fff.		1396r-5.	Treatment of income and resources for
 1385iii. Medicare Improvement Fund. 1395ixi. Shared savings program. 1395ixi. Medicare Improvement Fund. 1395ixi. Shared savings program. 1395ixi. GAO study and report on determination and implementation of payment and coverage policies under the Medicare program. 1395ixi. Standardized post-acute care (PAC) as sessment data for quality, payment, and discharge planning. 1396i. Standardized post-acute care (PAC) as sessment data for quality, payment, and discharge planning. 1396i. Medicaid and CHIP Payment and Access Commission. 13966. Medicaid and CHIP Payment and Access Commission. 13966. Payment to States. 13966. Operation of State plans. 13966. Operation of State plans. 13966. Operation of State plans. 13966. Operation of individuals under group healt h plans. 13966. Operation of State plans. 13966. Indian Health Service facilities. 13968. Kate programs for licensing of administrators of nursing homes. 13969. State false claims act requirements for increased State share of recoveries. 13964. Medicaid and provider of recoveries. 13964. Required laws relating to medical care targoram. 13964. Assignment, enforcement, and collection of rights of payments for medical care tare disparities. 13964. Assignment, enforcement, and collection of rights of payments for medical care tare tare disparities. 13964. Assignment, enforcement, and collection of rights of payments for medical care tare disparities. 13964. Medicaid providers of nursing facility services. 13967. Withholding of Federal share of pay. 13968. Withholding of Federal share of pay. 13969. Withholding of Federal share of pay. 13960. Medicaid providers of nursing facility services. 13961. Indian Health Service facilities. 13962. Medicaid providers of nursing facility services. 13964.			1396r-6.	Extension of eligibility for medical as-
 1395iji. Shared savings program. 1395iki. Independent Payment advisory Board. 1395iki. A spropriations. 1396. Medicaid and CHIP Payment and Access Commission. 1396. Payment to States. 1396. Operation of State plans. 1396. Operation of fidividuals under group health plans. 1396. Operations. 1396. Coperation of state plans. 1396. Definitions. 1396. Required laws relating to medical child support. 1396. State false claims act requirements for increased State share of recoveries. 1396. Required laws relating to medical child support. 1396. State false claims act requirements for increased State share of recoveries. 1396. Assignment, enforcement, and collection of rights of payments for medical care establishment of procedures pursuant to State plan and approval of rura health clinics and intermediate care facilities for mentally retarded. 1396. Indian Health Service facilities. 1396. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan anounts retained by State. 1396. Hospital providers of nursing facility services. 1396. Certification and approval for medical care establishment of procedures pursuant to State plan anounts retained by State. 1396. Hospital providers of nursing facility services. 1396. Hospital providers of nursing facility services.<!--</td--><td></td><td>1 0 0 0</td><td>1396r-7.</td><td>Repealed.</td>		1 0 0 0	1396r-7.	Repealed.
 1395kkk. Independent Payment Advisory Board. 1395kkk. GAO study and report on determination and implementation of payment and coverage policies under the Medicare program. 1395011. Standardized post-acute care (PAC) assessment data for quality, payment, and discharge planning. 139601. Standardized post-acute care (PAC) assessment data for quality, payment, and discharge planning. 13960. State PATER XLX-GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS 13960. Medicaid and CHIP Payment and Access Commission. 13960. Medicaid and CHIP Payment and Access Commission. 13960. Appropriations. 13960. Payment to States. 13960. Operation of State plans. 13960. Operation of individuals under group health plans. 13960. Operation of individuals under group health plans. 13960. Operation of State plans. 13960. Operation of individuals under group health plans. 13960. Operation of state plans. 13960. Operation of individuals under group health plans. 13960. Observance of religous beliefs. 13960. State programs for licensing of administration traces of turing homes. 13960. Medicaid name requirements for increased State share of recoveries. 13961. Indian Health Service facilities for mentially retarded. 13961. Indian Health Service facilities for mentially retarded. 13961. Indian Health Service facilities for mentially retarded. 13962. Hospital providers of nursing facility services. 13964. Assignment, enforement, and collection of rights of payments for medical care establishment of procedures pursuant to State plan, amounts retained by State. 13964. Health colp			1396r-8.	Payment for covered outpatient drugs.
 1395kkk-1. GAO study and report on determination of payment and coverage policies under the Medicare program. 1395011. Standardized post-acute care (PAC) assessment data for quality, payment, and discharge planning. 1395012. Standardized post-acute care (PAC) assessment data for quality, payment, and discharge planning. 13960. State plans for medical and CHIP Payment and Access Commission. 13960. Medicaid and CHIP Payment and Access Commission. 13960. Appropriations. 13960. Payment to States. 13960. Payment to States. 13960. Definitions. 13966. Payment to States plans. 13966. Definitions. 13966. Definitions. 13966. The lath plans. 13960. Berrollment of individuals under group health plans. 13960. Berrollment of individuals under group health plans. 13960. State programs for licensing of administrators of nursing homes. 13966. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 13961. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 13961. Indian Health Service facilities. 13964. Definitions and intermediate care facilities for mentally retarded. 13964. State false claims act requirements for increased State share of recoveries. 13964. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 13965. Indian Health Service facilities. 13964. State plan; amounts retained by State. 13964. Certification for medical care isparities. 13964. State			1396s.	
 and implementation of payment and coverage policies under the Medicare program. 1395///. Standardized post-acute care (PAC) assessment data for quality, payment, and discharge planning. SUBCHAPTER XIX—GRAMS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS 1396. Medicaid and CHIP Payment and Access Commission. 1396. Appropriations. 1396. Payment to States. 1396. Operation of State plans. 1396. Definitions. 1396. State false claims act requirements for increased State share of recoveries. 1396. Assignment, enforcement, and collection of procedures pursuant to State plan, amounts retailed by State. 1396. State programs for medical care estability in back thealth insurance exchanges. 1396. Assignment, enforcement, a				
program.Discrete1395///.Standardized post-acute care (PAC) assessment data for quality, payment, and discharge planning.139601.Assuring coverage for certain low-in- cometamilies.1396.SUBCHAPTER XIX-GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS139602.Provisions relating to managed care.1396.Medicaid and CHIP Payment and Access Commission.139603.State coverage of medicare cost-sharing for additional low-income medicare beneficiaries.1396.Payment to States.139604.Program of all-inclusive care for elderly (PACE).1396b1.Payment to States.139605.Special provisions relating to medicare prescription drug benefit.1396b1.Payment adjustment for health care-ac- quired conditions.139606.Medicaid Integrity Program.1396e.Definitions.139608.Health opportunity accounts.1396e.Enrollment of individuals under group health plans.1396w7.State flexibility in benefit packages.1396g.Observance of religious beliefs.1396w1.Medicaid Imegrity Program.1396g.Required laws relating to medical child support.1396w1.Medicaid Imegrity affecting medicaid program.1396i.Certification and approval of rural health clinics and intermediate care facilities for mentally retarded.1396w5.Addressing health care disparities.1396i.Indian Health Service facilities.1396w5.Addressing health care disparities.1396i.Indian Health Service facilities.1396w5.Addressing health care d	1395KKK-1.	and implementation of payment and		ally disabled elderly individuals.
sessment data for quality, payment, and discharge planning. SUBCHAPTER XIX—GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS 1396. 140. 140. 140. 140. 140. 140. 140. 140. 140	1395///	program.		ments services.
SUBCHAPTER XIX—GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMSNotice to Main State coverage of medicare cost-sharing for additional low-income medicare beneficiaries.1396.Medicaid and CHIP Payment and Access Commission.1396u-3.State coverage of medicare cost-sharing for additional low-income medicare beneficiaries.1396.1.Appropriations.1396u-4.Program of all-inclusive care for elderly (PACE).1396.1.Payment to States.1396u-5.Special provisions relating to medicare prescription drug benefit.1396b-1.Payment adjustment for health care-ac- quired conditions.1396u-8.Health opportunity accounts.1396c.Operation of State plans.1396u-8.Health opportunity accounts.1396e-1.Premium assistance.1396w.References to laws directly affecting medicaid program.1396g.State programs for licensing of adminis- tractors of nursing homes.1396w.Medicaid Intervity Program.1396g1.Required laws relating to medical child support.1396w.Medicaid Improvement Fund.1396g3.State false claims act requirements for increased State share of recoveries.1396w-4.State option to provide coordinated care through a health home for individuals with chronic conditions.1396k.Assignment, enforcement, and collection of rights of payments for medical care establishment of procedures pursuant to State plan; amounts retained by services.Suberla Providers of nursing facility services.1396M.Weithholding of Federal share of pay- ropriations.Suberla Providers of nurs	10000000	sessment data for quality, payment,		come families.
1396.Medicaid and CHIP Payment and Access Commission.1396u-4.Program of all-inclusive care for elderly (PACE).1396.1.Appropriations.1396u-4.Program of all-inclusive care for elderly (PACE).1396a.State plans for medical assistance.1396u-6.Medicaid Integrity Program.1396b-1.Payment to States.1396u-8.1396u-8.1396d.Operation of State plans.1396u-8.Health opportunity accounts.1396e.1.Enrollment of individuals under group health plans.1396w.References to laws directly affecting medicaid program.1396e-1.Premium assistance.1396w.Asset verification through access to in- formation held by financial institu- tions.1396b.State programs for licensing of adminis- trators of nursing homes.1396w-1.Medicaid Improvement Fund.1396b.Required laws relating to medical child support.1396w-2.Authorization to receive relevant infor- mation.1396i.Certification and approval of rural health clinics and intermediate care facilities for medical care; establishment of procedures pursuant to State plan; amounts retained by State.1396w-4.State option to provide coordinated care through a health home for individuals with chronic conditions.1396i.Indian Health Service facilities.1396w-5.Addressing health care disparities.1396i.Indian Health Service facilities.1396w-5.State option to provide coordinated care through a health home for individuals with chronic conditions.1396i.Indian Health Service facilities.1		PTER XIX-GRANTS TO STATES FOR		State coverage of medicare cost-sharing for additional low-income medicare
 Happopriations. Happopriatio	1396.		1396u–4.	Program of all-inclusive care for elderly
1396b.State plans for medical assistance.prescription drug benefit.1396b-1.Payment to States.integrity Program.1396b-1.Payment of state plans.1396u-6.13960.Operation of State plans.1396u-8.1396e.Enrollment of individuals under group health plans.Health opportunity accounts.1396e-1.Premium assistance.1396w.1396g.Observance of religious beliefs.1396w.1396g.State programs for licensing of adminis- trators of nursing homes.1396w-1.1396j.Required laws relating to medical child support.1396w-2.1396i.Certification and approval of rights of payments for for gights of payments for medical care; establishment of procedures pursuant to State.1396w-3.1396J.Indian Health Service facilities.1396w-4.1396J.Hospital providers of nursing facility services.1396w-1.1396J.Hospital providers of nursing facility services.1396w-2.1396J.Hospital providers of nursing facility services.1396w-3.1396M.Withholding of Federal share of pay-1397a.1396M.Withholding of Federal share of pay-1397a.1396M.Withholding of Federal share of pay-1397a.			1396u–5.	
 1396b-1. Payment adjustment for health care-acquired conditions. 1396c. Operation of State plans. 1396d. Definitions. 1396e. Enrollment of individuals under group health plans. 1396e. Premium assistance. 1396f. Observance of religious beliefs. 1396g. State programs for licensing of administrators of nursing homes. 1396g. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health Claims and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 1396d. Hospital providers of nursing facility services. 1396M. Withholding of Federal share of pay- 				
quired conditions.13961-7.State flexibility in benefit packages.1396c.Operation of State plans.1396u-7.State flexibility in benefit packages.1396d.Definitions.1396u-8.Health opportunity accounts.1396e.Enrollment of individuals under group health plans.1396w.References to laws directly affecting medicaid program.1396e.Dremium assistance.1396w.Asset verification through access to in- formation held by financial institu- tions.1396g.State programs for licensing of adminis- trators of nursing homes.1396w-2.Authorization to receive relevant infor- mation.1396h.State false claims act requirements for increased State share of recoveries.1396w-3.Enrollment simplification and coordina- to with State health insurance ex- changes.1396i.Certification and approval of rural health clinics and intermediate care facilities for mentally retarded.1396w-4.State option to provide coordinated care through a health home for individuals with chonic conditions.1396k.Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State.SuBCHAPTER XX—BLOCK GRANTS TO STATES FOR SOCIAL SERVICES13967.Hospital providers of nursing facility services.1397.Purposes of division; authorization of ap- propriations.13967.Withholding of Federal share of pay- propriations.1397a.Payments to States.			1396u–6.	Medicaid Integrity Program.
 1396c. Operation of State plans. 1396d. Definitions. 1396e. Enrollment of individuals under group health plans. 1396e. Premium assistance. 1396f. Observance of religious beliefs. 1396g. State programs for licensing of administrators of nursing homes. 1396g. Required laws relating to medical child support. 1396i. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 1396/. 1396/.<td>15500-1.</td><td></td><td></td><td></td>	15500-1.			
 1396d. Definitions. 1396e. Enrollment of individuals under group health plans. 1396e-1. Premium assistance. 1396f. Observance of religious beliefs. 1396g. State programs for licensing of administrators of nursing homes. 1396g. Required laws relating to medical child support. 1396h. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 1396M. Withholding of Federal share of pay- 1396M. Withholding of Federal share of pay- 	1396c			
 1396e. Enrollment of individuals under group health plans. 1396e-1. Premium assistance. 1396g. State programs for licensing of administrators of nursing homes. 1396g. Required laws relating to medical child support. 1396h. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 1396M. Withholding of Federal share of pay- 1396m. Withholding of Federal share of pay- 			1396v.	
 1396e-1. 1396f. Observance of religious beliefs. 1396g. State programs for licensing of administrators of nursing homes. 1396g-1. Required laws relating to medical child support. 1396h. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 1396a. 1396a. Withholding of Federal share of pay- 1396a. 1396b. 	1396e.	health plans.	1396w.	Asset verification through access to in-
 13961. Observance of reingious beliefs. 13962. State programs for licensing of administrators of nursing homes. 13969. Required laws relating to medical child support. 13964. State false claims act requirements for increased State share of recoveries. 13965. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 13965. Indian Health Service facilities. 13964. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 13967. Withholding of Federal share of pay- 13967. Withholding of Federal share of pay- 13967. State plan; amounts retained by services. 13968. Withholding of Federal share of pay- 13969. Withholding of Federal share of pay- 				
 trators of nursing homes. 13969–1. Required laws relating to medical child support. 1396h. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 				Medicaid Improvement Fund.
 support. 1396h. State false claims act requirements for increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 1396. State false claims act requirements for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Withholding of Federal share of pay- 	-	trators of nursing homes.		mation.
 increased State share of recoveries. 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 1396/. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 1396 and the state state share of pay- 1396 and the state state	-	support.	1396W-3.	tion with State health insurance ex-
 1396i. Certification and approval of rural health clinics and intermediate care facilities for mentally retarded. 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 13968. Withholding of Federal share of pay- 13964. State option to provide coordinated care through a health home for individuals with chronic conditions. 13964. Indian Health Service facilities. 13964. Assignment of procedures pursuant to State plan; amounts retained by state. 13967. Hospital providers of nursing facility services. 13968. Withholding of Federal share of pay- 13964. Hospital providers of payments to States. 	··· ·		1906 4	
 1396j. Indian Health Service facilities. 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 1396/. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 1396m. Hasin Health Service facility retarded. 1396w-5. Addressing health care disparities. SUBCHAPTER XX—BLOCK GRANTS TO STATES FOR SOCIAL SERVICES AND ELDER JUSTICE DIVISION A—BLOCK GRANTS TO STATES FOR SOCIAL SERVICES 1396/. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 	1396i.	Certification and approval of rural health clinics and intermediate care	1396w–4.	through a health home for individuals
 1396k. Assignment, enforcement, and collection of rights of payments for medical care; establishment of procedures pursuant to State plan; amounts retained by State. 1396l. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- SUBCHAPTER XX—BLOCK GRANTS TO STATES FOR SOCIAL SERVICES AND ELDER JUSTICE DIVISION A—BLOCK GRANTS TO STATES FOR SOCIAL SERVICES SUBCHAPTER XX—BLOCK GRANTS TO STATES FOR SOCIAL SERVICES 	13061		1396w-5.	
establishment of procedures pursuant to State plan; amounts retained by State. 13967. Hospital providers of nursing facility services. 1396m. Withholding of Federal share of pay- 1397. BIOCK GRANTS TO STATES FOR SOCIAL SERVICES 1397. Purposes of division; authorization of ap- propriations.		Assignment, enforcement, and collection		
1396/.Hospital providers of nursing facility1397.Purposes of division; authorization of appropriations.1396m.Withholding of Federal share of pay-1397a.Payments to States.		establishment of procedures pursuant to State plan; amounts retained by	DIVISION A	
1396m. Withholding of Federal share of pay- 1397a. Payments to States.	13961.	Hospital providers of nursing facility	1397.	
	1396m.	Withholding of Federal share of pay-		Payments to States.

Sec.

	chapter is repealed effective January 1, 1974, ex-
	cept with respect to Puerto Rico, Guam, and the
er.	Virgin Islands.

CODIFICATION

Pub. L. 97-35, title XXI, §2184(a)(1), Aug. 13, 1981, 95 Stat. 816, struck out "AND MEDICAL ASSISTANCE" after "OLD-AGE ASSISTANCE" in subchapter heading. Words "FOR THE AGED" following "AND MEDICAL ASSISTANCE" were editorially struck out.

Pub. L. 86-778, title VI, §601(a), Sept. 13, 1960, 74 Stat. 987. inserted "AND MEDICAL ASSISTANCE FOR THE AGED" at end of subchapter heading.

§ 301. Authorization of appropriations

For the purpose of enabling each State, as far as practicable under the conditions in such State, to furnish financial assistance to aged needy individuals, there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this subchapter. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Secretary of Health and Human Services (hereinafter referred to as the "Secretary"), State plans for old-age assistance.

(Aug. 14, 1935, ch. 531, title I, §1, 49 Stat. 620; Aug. 28, 1950, ch. 809, title III, pt. 6, §361(a), 64 Stat. 558; Aug. 1, 1956, ch. 836, title III, §311(a), 70 Stat. 848; Pub. L. 86-778, title VI, §601(b), Sept. 13, 1960, 74 Stat. 987; Pub. L. 87-543, title I, §104(c)(1), July 25, 1962, 76 Stat. 185; Pub. L. 96-88, title V, §509(b), Oct. 17, 1979, 93 Stat. 695; Pub. L. 97-35, title XXI, §2184(a)(2), Aug. 13, 1981, 95 Stat. 816.)

REPEAL OF SECTION

Pub. L. 92-603, title III, §303(a), (b), Oct. 30, 1972, 86 Stat. 1484, provided that this section is repealed effective Jan. 1, 1974, except with respect to Puerto Rico, Guam, and the Virgin Islands.

AMENDMENTS

1981—Pub. L. 97-35 substituted "purpose of enabling" for "purpose (a) of enabling", struck out provisions designated as cls. (b) and (c) which authorized appropriations for the purpose of enabling each State to furnish medical assistance to aged individuals who are not recipients of old-age assistance but whose income and resources are insufficient to meet the cost of necessary medical care and of encouraging each State to furnish rehabilitation and other services to individuals to attain and retain capability for self-care, and struck out ", or for medical assistance for the aged, or for old-age assistance and medical assistance for the aged" after 'plans for old-age assistance''

1962—Pub. L. 87-543 amended first sentence generally, striking from cl. (a) provision relating to the purpose of encouraging each State, as far as practicable under the conditions in the State, to help aged needy individuals attain self-care, and adding cl. (c) incorporating the struck out provision.

1960-Pub. L. 86-778 amended section generally, authorizing appropriations for the purpose of enabling each State, as far as practicable under the conditions in such State, to furnish medical assistance on behalf of aged individuals who are not recipients of old-age assistance but whose income and resources are insufficient to meet the costs of necessary medical services.

1956—Act Aug. 1, 1956, struck out specific appropriation for fiscal year ending June 30, 1956, and inserted provisions relating to attainment of self-care by individuals.

1397c.	State reporting requirements.
1397d.	Limitation on use of grants; waiver.
1397e.	Administrative and fiscal accountabil- ity.
1397f.	Additional grants.
1397g.	Demonstration projects to address health professions workforce needs.
1397h.	Program for early detection of certain medical conditions related to environ- mental health hazards.
	DIVISION B-ELDER JUSTICE
1397j.	Definitions.
1397j–1.	General provisions.
Part I—N.	ATIONAL COORDINATION OF ELDER JUSTICE ACTIVITIES AND RESEARCH
	ELDER JUSTICE COORDINATING COUNCIL AND BOARD ON ELDER ABUSE, NEGLECT, AND EX-
1397k.	Elder Justice Coordinating Council.
1397k–1.	Advisory Board on Elder Abuse, Neglect, and Exploitation.
1397k–2.	Research protections.

1397k-3. Authorization of appropriations.

- SUBPART B-ELDER ABUSE, NEGLECT, AND EXPLOITATION FORENSIC CENTERS
- 13971. Establishment and support of elder abuse, neglect, and exploitation forensic centers.
 - PART II—PROGRAMS TO PROMOTE ELDER JUSTICE
- 1397m. Enhancement of long-term care.
- 1397m-1. Adult protective services functions and grant programs.
- 1397m-2. Long-term care ombudsman program grants and training.
- 1397m-3. Provision of information regarding, and evaluations of, elder justice programs.
- 1397m-4. Report.
- 1397m-5. Rule of construction.

SUBCHAPTER XXI—STATE CHILDREN'S HEALTH INSURANCE PROGRAM

- Purpose; State child health plans. 1397aa.
- 1397bb. General contents of State child health plan; eligibility; outreach. 1397cc. Coverage requirements for children's
- health insurance. 1397dd. Allotments.
- Payments to States. 1397ee.
- 1397ff. Process for submission, approval, and amendment of State child health plans.
- Strategic objectives and performance 1397gg. goals; plan administration. 1397hh. Annual reports: evaluations.
- Miscellaneous provisions. 1397ii.
- 1397ii. Definitions.
- 1397kk. Phase-out of coverage for nonpregnant
 - childless adults; conditions for coverage of parents.
- 139711 Optional coverage of targeted low-income pregnant women through a State plan amendment.
- 1397mm Grants to improve outreach and enrollment.

SUBCHAPTER I-GRANTS TO STATES FOR OLD-AGE ASSISTANCE

REPEAL OF SUBCHAPTER I OF THIS CHAPTER; INAP-PLICABILITY OF REPEAL TO PUERTO RICO, GUAM, AND VIRGIN ISLANDS

Pub. L. 92-603, title III, §303(a), (b), Oct. 30, 1972, 86 Stat. 1484, provided that this sub-