

ties and individuals, and may enter into cooperative agreements or contracts with public and private entities and individuals.

**(d) Utilization of certain personnel and resources**

**(1) Department of Health and Human Services**

The Director, in carrying out this subchapter, may utilize personnel and equipment, facilities, and other physical resources of the Department of Health and Human Services, permit appropriate (as determined by the Secretary) entities and individuals to utilize the physical resources of such Department, and provide technical assistance and advice.

**(2) Other agencies**

The Director, in carrying out this subchapter, may use, with their consent, the services, equipment, personnel, information, and facilities of other Federal, State, or local public agencies, or of any foreign government, with or without reimbursement of such agencies.

**(e) Consultants**

The Secretary, in carrying out this subchapter, may secure, from time to time and for such periods as the Director deems advisable but in accordance with section 3109 of title 5, the assistance and advice of consultants from the United States or abroad.

**(f) Experts**

**(1) In general**

The Secretary may, in carrying out this subchapter, obtain the services of not more than 50 experts or consultants who have appropriate scientific or professional qualifications. Such experts or consultants shall be obtained in accordance with section 3109 of title 5, except that the limitation in such section on the duration of service shall not apply.

**(2) Travel expenses**

**(A) In general**

Experts and consultants whose services are obtained under paragraph (1) shall be paid or reimbursed for their expenses associated with traveling to and from their assignment location in accordance with sections 5724, 5724a(a), 5724a(c), and 5726(c) of title 5.

**(B) Limitation**

Expenses specified in subparagraph (A) may not be allowed in connection with the assignment of an expert or consultant whose services are obtained under paragraph (1) unless and until the expert agrees in writing to complete the entire period of assignment, or 1 year, whichever is shorter, unless separated or reassigned for reasons that are beyond the control of the expert or consultant and that are acceptable to the Secretary. If the expert or consultant violates the agreement, the money spent by the United States for the expenses specified in subparagraph (A) is recoverable from the expert or consultant as a statutory obligation owed to the United States. The Secretary may waive in whole or in part a right of recovery under this subparagraph.

**(g) Voluntary and uncompensated services**

The Director, in carrying out this subchapter, may accept voluntary and uncompensated services.

(July 1, 1944, ch. 373, title IX, § 946, formerly § 926, as added Pub. L. 106-129, § 2(a), Dec. 6, 1999, 113 Stat. 1668; renumbered § 936, Pub. L. 109-41, § 2(a)(3), July 29, 2005, 119 Stat. 424; renumbered § 946, Pub. L. 111-148, title III, § 3013(a)(2), Mar. 23, 2010, 124 Stat. 381.)

CODIFICATION

In subsec. (b)(1), “section 8141 of title 40” substituted for “the Act of March 3, 1877 (40 U.S.C. 34)” on authority of Pub. L. 107-217, § 5(c), Aug. 21, 2002, 116 Stat. 1303, the first section of which enacted Title 40, Public Buildings, Property, and Works.

PRIOR PROVISIONS

A prior section 299c-5, act July 1, 1944, ch. 373, title IX, § 926, as added Pub. L. 101-239, title VI, § 6103(c), Dec. 19, 1989, 103 Stat. 2204; amended Pub. L. 101-381, title I, § 102(7), Aug. 18, 1990, 104 Stat. 586; Pub. L. 102-410, § 10, Oct. 13, 1992, 106 Stat. 2101; Pub. L. 103-43, title XX, § 2010(b)(8), June 10, 1993, 107 Stat. 214, authorized appropriations to carry out this subchapter, prior to the general amendment of this subchapter by Pub. L. 106-129. See section 299c-6 of this title.

**§ 299c-6. Funding**

**(a) Intent**

To ensure that the United States investment in biomedical research is rapidly translated into improvements in the quality of patient care, there must be a corresponding investment in research on the most effective clinical and organizational strategies for use of these findings in daily practice. The authorization levels in subsections (b) and (c) provide for a proportionate increase in health care research as the United States investment in biomedical research increases.

**(b) Authorization of appropriations**

For the purpose of carrying out this subchapter, there are authorized to be appropriated \$250,000,000 for fiscal year 2000, and such sums as may be necessary for each of the fiscal years 2001 through 2005.

**(c) Evaluations**

In addition to amounts available pursuant to subsection (b) for carrying out this subchapter, there shall be made available for such purpose, from the amounts made available pursuant to section 238j of this title (relating to evaluations), an amount equal to 40 percent of the maximum amount authorized in such section 238j of this title to be made available for a fiscal year.

**(d) Health disparities research**

For the purpose of carrying out the activities under section 299a-1 of this title, there are authorized to be appropriated \$50,000,000 for fiscal year 2001, and such sums as may be necessary for each of the fiscal years 2002 through 2005.

**(e) Patient safety and quality improvement**

For the purpose of carrying out part C, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 2006 through 2010.

(July 1, 1944, ch. 373, title IX, §947, formerly §927, as added Pub. L. 106-129, §2(a), Dec. 6, 1999, 113 Stat. 1670; amended Pub. L. 106-525, title II, §201(b), Nov. 22, 2000, 114 Stat. 2507; renumbered §937 and amended Pub. L. 109-41, §2(a)(3), (b), July 29, 2005, 119 Stat. 424, 434; renumbered §947, Pub. L. 111-148, title III, §3013(a)(2), Mar. 23, 2010, 124 Stat. 381.)

#### PRIOR PROVISIONS

A prior section 299c-6, act July 1, 1944, ch. 373, title IX, §927, as added Pub. L. 101-239, title VI, §6103(c), Dec. 19, 1989, 103 Stat. 2204, set out definitions, prior to the general amendment of this subchapter by Pub. L. 106-129. See section 299c-7 of this title.

#### AMENDMENTS

2005—Subsec. (e). Pub. L. 109-41, §2(b), added subsec. (e).

2000—Subsec. (d). Pub. L. 106-525 added subsec. (d).

### § 299c-7. Definitions

In this subchapter:

#### (1) Advisory Council

The term “Advisory Council” means the National Advisory Council on Healthcare Research and Quality established under section 299c of this title.

#### (2) Agency

The term “Agency” means the Agency for Healthcare Research and Quality.

#### (3) Director

The term “Director” means the Director of the Agency for Healthcare Research and Quality.

(July 1, 1944, ch. 373, title IX, §948, formerly §928, as added Pub. L. 106-129, §2(a), Dec. 6, 1999, 113 Stat. 1670; renumbered §938 and amended Pub. L. 109-41, §2(a)(3), (4), July 29, 2005, 119 Stat. 424; renumbered §948 and amended Pub. L. 111-148, title III, §3013(a)(2), (3), Mar. 23, 2010, 124 Stat. 381.)

#### PRIOR PROVISIONS

Prior sections 299d to 299j were repealed by Pub. L. 99-117, §12(d), Oct. 7, 1985, 99 Stat. 495.

Section 299d, act July 1, 1944, ch. 373, title IX, §904, as added Oct. 6, 1965, Pub. L. 89-239, §2, 79 Stat. 928; amended Oct. 15, 1968, Pub. L. 90-574, title I, §104, 82 Stat. 1005; Oct. 30, 1970, Pub. L. 91-515, title I, §§106, 111(b), 84 Stat. 1299, 1301, authorized Secretary to make grants for establishment and operation of regional medical programs and set forth requirements for grant applications.

Section 299e, act July 1, 1944, ch. 373, title IX, §905, as added Oct. 6, 1965, Pub. L. 89-239, §2, 79 Stat. 929; amended Oct. 15, 1968, Pub. L. 90-574, title I, §105, 82 Stat. 1005; Oct. 30, 1970, Pub. L. 91-515, title I, §§107(a), 111(b), title VI, §601(b)(2), (4), 84 Stat. 1299, 1301, 1311; Oct. 17, 1979, Pub. L. 96-88, title V, §509(b), 93 Stat. 695, provided for establishment of a National Advisory Council on Regional Medical Programs and its functions.

Section 299f, act July 1, 1944, ch. 373, title IX, §906, as added Oct. 6, 1965, Pub. L. 89-239, §2, 79 Stat. 930; amended Oct. 30, 1970, Pub. L. 91-515, title I, §111(b), 84 Stat. 1301, authorized Secretary to establish rules and regulations covering terms of approval of grant applications and coordination of programs.

Section 299g, act July 1, 1944, ch. 373, title IX, §907, as added Oct. 6, 1965, Pub. L. 89-239, §2, 79 Stat. 930; amended Oct. 30, 1970, Pub. L. 91-515, title I, §§108, 111(b), 84 Stat. 1300, 1301, directed Secretary to compile

a list of facilities equipped and staffed to provide most advanced methods for diagnosing and treating certain diseases and illnesses.

Section 299h, act July 1, 1944, ch. 373, title IX, §908, as added Oct. 6, 1965, Pub. L. 89-239, §2, 79 Stat. 930, called for a report to the President and the Congress on or before June 30, 1967, by Surgeon General concerning activities under this subchapter with required statements, appraisals, and recommendations.

Section 299i, act July 1, 1944, ch. 373, title IX, §909, as added Oct. 6, 1965, Pub. L. 89-239, §2, 79 Stat. 930; amended Oct. 30, 1970, Pub. L. 91-515, title I, §§109, 111(b), 84 Stat. 1300, 1301; Oct. 17, 1979, Pub. L. 96-88, title V, §509(b), 93 Stat. 695, provided for recordkeeping by grant recipients and for accessibility of records for audit and examination.

Section 299j, act July 1, 1944, ch. 373, title IX, §910, as added Oct. 15, 1968, Pub. L. 90-574, title I, §106, 82 Stat. 1005; amended Oct. 30, 1970, Pub. L. 91-515, title I, §110, 84 Stat. 1300, related to grants and contracts for multi-program services, costs of special projects, and support of research, studies, investigations, training, and demonstrations.

#### AMENDMENTS

2010—Par. (1). Pub. L. 111-148, §3013(a)(3), made technical amendment to reference in original act which appears in text as reference to section 299c of this title, requiring no change in text.

2005—Par. (1). Pub. L. 109-41, §2(a)(4), made technical amendment to reference in original act which appears in text as reference to section 299c of this title, requiring no change in text.

### SUBCHAPTER VIII—POPULATION RESEARCH AND VOLUNTARY FAMILY PLANNING PROGRAMS

#### § 300. Project grants and contracts for family planning services

##### (a) Authority of Secretary

The Secretary is authorized to make grants to and enter into contracts with public or non-profit private entities to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents). To the extent practical, entities which receive grants or contracts under this subsection shall encourage family<sup>1</sup> participation in projects assisted under this subsection.

##### (b) Factors determining awards; establishment and preservation of rights of local and regional entities

In making grants and contracts under this section the Secretary shall take into account the number of patients to be served, the extent to which family planning services are needed locally, the relative need of the applicant, and its capacity to make rapid and effective use of such assistance. Local and regional entities shall be assured the right to apply for direct grants and contracts under this section, and the Secretary shall by regulation fully provide for and protect such right.

##### (c) Reduction of grant amount

The Secretary, at the request of a recipient of a grant under subsection (a), may reduce the amount of such grant by the fair market value

<sup>1</sup> So in original. Probably should be “family”.