

Pub. L. 111-3, set out as a note under section 1396 of this title.

DEFINITION OF “SECRETARY”

“Secretary” as meaning the Secretary of Health and Human Services, see section 1(c)(3) of Pub. L. 111-3, set out as a note under section 1396 of this title.

**§ 247d-10. Pilot program for public health laboratories to detect fentanyl and other synthetic opioids**

**(a) Grants**

The Secretary of Health and Human Services (referred to in this section as the “Secretary”) shall award grants to, or enter into cooperative agreements with, Federal, State, and local agencies to improve coordination between public health laboratories and laboratories operated by law enforcement agencies, such as Customs and Border Protection and the Drug Enforcement Administration, to improve detection of synthetic opioids, including fentanyl and its analogues, as described in subsection (b).

**(b) Detection activities**

The Secretary, in consultation with the Director of the National Institute of Standards and Technology, the Director of the Centers for Disease Control and Prevention, the Attorney General of the United States, and the Administrator of the Drug Enforcement Administration, shall, for purposes of this section, develop or identify—

- (1) best practices for safely handling and testing synthetic opioids, including fentanyl and its analogues, including with respect to reference materials, instrument calibration, and quality control protocols;
- (2) reference materials and quality control standards related to synthetic opioids, including fentanyl and its analogues, to enhance—
  - (A) clinical diagnostics;
  - (B) postmortem data collection; and
  - (C) portable testing equipment utilized by law enforcement and public health officials; and
- (3) procedures for the identification of new and emerging synthetic opioid formulations and procedures for reporting those findings to appropriate law enforcement agencies and Federal, State, and local public health laboratories and health departments, as appropriate.

**(c) Laboratories**

The Secretary shall require recipients of grants or cooperative agreements under subsection (a) to—

- (1) follow the best practices established under subsection (b) and have the appropriate capabilities to provide laboratory testing of controlled substances, such as synthetic fentanyl, and biospecimens for the purposes of aggregating and reporting public health information to Federal, State, and local public health officials, laboratories, and other entities the Secretary deems appropriate;
- (2) work with law enforcement agencies and public health authorities, as practicable;
- (3) provide early warning information to Federal, State, and local law enforcement agencies and public health authorities regard-

ing trends or other data related to the supply of synthetic opioids, including fentanyl and its analogues;

(4) provide biosurveillance capabilities with respect to identifying trends in adverse health outcomes associated with non-fatal exposures; and

(5) provide diagnostic testing, as appropriate and practicable, for non-fatal exposures of emergency personnel, first responders, and other individuals.

**(d) Authorization of appropriations**

To carry out this section, there is authorized to be appropriated \$15,000,000 for each of fiscal years 2019 through 2023.

(Pub. L. 115-271, title VII, § 7011, Oct. 24, 2018, 132 Stat. 4008.)

CODIFICATION

Section was enacted as part of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act, also known as the SUPPORT for Patients and Communities Act, and not as part of the Public Health Service Act which comprises this chapter.

PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND MEDICAL CARE

CODIFICATION

Pub. L. 95-626, title I, § 113(a)(1), Nov. 10, 1978, 92 Stat. 3562, struck out heading “Subpart I—General Provisions”.

Pub. L. 94-484, title IV, § 407(a), Oct. 12, 1976, 90 Stat. 2268, added heading “Subpart I—General Provisions”.

**§ 247e. National Hansen’s Disease Programs Center**

**(a) Care and treatment**

(1) At or through the National Hansen’s Disease Programs Center (located in the State of Louisiana), the Secretary shall without charge provide short-term care and treatment, including outpatient care, for Hansen’s disease and related complications to any person determined by the Secretary to be in need of such care and treatment. The Secretary may not at or through such Center provide long-term care for any such disease or complication.

(2) The Center referred to in paragraph (1) shall conduct training in the diagnosis and management of Hansen’s disease and related complications, and shall conduct and promote the coordination of research (including clinical research), investigations, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of Hansen’s disease and other mycobacterial diseases and complications related to such diseases.

(3) Paragraph (1) is subject to section 211 of the Department of Health and Human Services Appropriations Act, 1998.

**(b) Additional sites authorized**

In addition to the Center referred to in subsection (a), the Secretary may establish sites regarding persons with Hansen’s disease. Each such site shall provide for the outpatient care and treatment for Hansen’s disease and related complications to any person determined by the Secretary to be in need of such care and treatment.