

Subsec. (d). Pub. L. 115-271, §7064(3), (5), redesignated subsec. (c) as (d) and substituted “2019 through 2023” for “2001 through 2005”.

IMPROVING DATA AND THE PUBLIC HEALTH RESPONSE

Pub. L. 114-91, §4, Nov. 25, 2015, 129 Stat. 725, provided that: “The Secretary [of Health and Human Services] may continue activities, as appropriate, related to—

“(1) providing technical assistance to support States and Federally recognized Indian Tribes in collecting information on neonatal abstinence syndrome through the utilization of existing surveillance systems and collaborating with States and Federally recognized Indian Tribes to improve the quality, consistency, and collection of such data; and

“(2) providing technical assistance to support States in implementing effective public health measures, such as disseminating information to educate the public, health care providers, and other stakeholders on prenatal opioid use and neonatal abstinence syndrome.”

§ 247b-13a. Screening and treatment for maternal depression

(a) Grants

The Secretary shall make grants to States to establish, improve, or maintain programs for screening, assessment, and treatment services, including culturally and linguistically appropriate services, as appropriate, for women who are pregnant, or who have given birth within the preceding 12 months, for maternal depression.

(b) Application

To seek a grant under this section, a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require. At a minimum, any such application shall include explanations of—

(1) how a program, or programs, will increase the percentage of women screened and treated, as appropriate, for maternal depression in 1 or more communities; and

(2) how a program, or programs, if expanded, would increase access to screening and treatment services for maternal depression.

(c) Priority

In awarding grants under this section, the Secretary may give priority to States proposing to improve or enhance access to screening services for maternal depression in primary care settings.

(d) Use of funds

The activities eligible for funding through a grant under subsection (a)—

(1) shall include—

(A) providing appropriate training to health care providers; and

(B) providing information to health care providers, including information on maternal depression screening, treatment, and followup support services, and linkages to community-based resources; and

(2) may include—

(A) enabling health care providers (including obstetrician-gynecologists, pediatricians, psychiatrists, mental health care providers, and adult primary care clinicians) to provide or receive real-time psychiatric consultation (in-person or remotely) to aid in

the treatment of pregnant and parenting women;

(B) establishing linkages with and among community-based resources, including mental health resources, primary care resources, and support groups; and

(C) utilizing telehealth services for rural areas and medically underserved areas (as defined in section 254c-14(a) of this title).

(e) Authorization of appropriations

To carry out this section, there are authorized to be appropriated \$5,000,000 for each of fiscal years 2018 through 2022.

(July 1, 1944, ch. 373, title III, §317L-1, as added Pub. L. 114-255, div. B, title X, §10005, Dec. 13, 2016, 130 Stat. 1266.)

§ 247b-14. Oral health promotion and disease prevention

(a) Grants to increase resources for community water fluoridation

(1) In general

The Secretary, acting through the Director of the Centers for Disease Control and Prevention, may make grants to States and Indian tribes for the purpose of increasing the resources available for community water fluoridation.

(2) Use of funds

A State shall use amounts provided under a grant under paragraph (1)—

(A) to purchase fluoridation equipment;

(B) to train fluoridation engineers;

(C) to develop educational materials on the benefits of fluoridation; or

(D) to support the infrastructure necessary to monitor and maintain the quality of water fluoridation.

(b) Community water fluoridation

(1) In general

The Secretary, acting through the Director of the Centers for Disease Control and Prevention and in collaboration with the Director of the Indian Health Service, shall establish a demonstration project that is designed to assist rural water systems in successfully implementing the water fluoridation guidelines of the Centers for Disease Control and Prevention that are entitled “Engineering and Administrative Recommendations for Water Fluoridation, 1995” (referred to in this subsection as the “EARWF”).

(2) Requirements

(A) Collaboration

In collaborating under paragraph (1), the Directors referred to in such paragraph shall ensure that technical assistance and training are provided to tribal programs located in each of the 12 areas of the Indian Health Service. The Director of the Indian Health Service shall provide coordination and administrative support to tribes under this section.

(B) General use of funds

Amounts made available under paragraph (1) shall be used to assist small water sys-