

this chapter, chapter 314 (§4251 et seq.) of Title 18, Crimes and Criminal Procedure, and chapter 175 (§2901 et seq.) of Title 28, Judiciary and Judicial Procedure, amending section 257 of this title and section 7237 of Title 26, Internal Revenue Code, and enacting provisions set out as notes under this section and section 4202 of Title 18] shall be subject to the provisions of Reorganization Plan No. 3 of 1966 [set out as a note under section 202 of this title].”

**§ 3402. State facilities and personnel for care and treatment; encouragement of adequate provision; benefit of experience of Surgeon General and Attorney General**

The Surgeon General and the Attorney General are authorized to give representatives of States and local subdivisions thereof the benefit of their experience in the care, treatment, and rehabilitation of narcotic addicts so that each State may be encouraged to provide adequate facilities and personnel for the care and treatment of narcotic addicts in its jurisdiction.

(Pub. L. 89-793, title VI, §602, Nov. 8, 1966, 80 Stat. 1450.)

**Editorial Notes**

**CODIFICATION**

Section was not enacted as part of the Narcotic Addict Rehabilitation Act of 1966, which is classified to subchapters II and III of this chapter, chapter 314 (§4251 et seq.) of Title 18, Crimes and Criminal Procedure, and chapter 175 (§2901 et seq.) of Title 28, Judiciary and Judicial Procedure.

**Statutory Notes and Related Subsidiaries**

**CHANGE OF NAME**

“Secretary of Health and Human Services” substituted for “Secretary of Health, Education, and Welfare” pursuant to section 509(b) of Pub. L. 96-88, which is classified to section 3508(b) of Title 20, Education.

**Executive Documents**

**TRANSFER OF FUNCTIONS**

Functions of Public Health Service, Surgeon General of Public Health Service, and all other officers and employees of Public Health Service, and functions of all agencies of or in Public Health Service transferred to Secretary of Health, Education, and Welfare by Reorg. Plan No. 3 of 1966, eff. June 25, 1956, 31 F.R. 8855, 80 Stat. 1610, set out as a note under section 202 of this title.

**SUBCHAPTER II—CIVIL COMMITMENT OF PERSONS NOT CHARGED WITH ANY CRIMINAL OFFENSE**

**§§ 3411 to 3426. Repealed. Pub. L. 106-310, div. B, title XXXIV, §3405(b), Oct. 17, 2000, 114 Stat. 1221**

Section 3411, Pub. L. 89-793, title III, §301, Nov. 8, 1966, 80 Stat. 1444; Pub. L. 91-513, title III, §1102(p), Oct. 27, 1970, 84 Stat. 1293; Pub. L. 92-420, §4, Sept. 16, 1972, 86 Stat. 677, defined terms used in this subchapter.

Section 3412, Pub. L. 89-793, title III, §302, Nov. 8, 1966, 80 Stat. 1444, related to preliminary proceedings.

Section 3413, Pub. L. 89-793, title III, §303, Nov. 8, 1966, 80 Stat. 1445, related to judicial proceedings, advisement of patient, appointment of physicians, examination of patient, conduct and report of examination, and return of patient for further proceedings.

Section 3414, Pub. L. 89-793, title III, §304, Nov. 8, 1966, 80 Stat. 1446, related to hearings.

Section 3415, Pub. L. 89-793, title III, §305, Nov. 8, 1966, 80 Stat. 1446, related to order of commitment for treatment to care and custody of Surgeon General and reports of Surgeon General.

Section 3416, Pub. L. 89-793, title III, §306, Nov. 8, 1966, 80 Stat. 1446, related to period of commitment to care and custody of Surgeon General, patient subject to posthospitalization program, and release from confinement.

Section 3417, Pub. L. 89-793, title III, §307, Nov. 8, 1966, 80 Stat. 1446, related to release from confinement.

Section 3418, Pub. L. 89-793, title III, §308, Nov. 8, 1966, 80 Stat. 1447, related to petition for inquiry into health and general condition and necessity for continuation of confinement, order for release from confinement and return to court, and placing patient under posthospitalization treatment.

Section 3419, Pub. L. 89-793, title III, §309, Nov. 8, 1966, 80 Stat. 1447, related to criminal conviction or criminal appellation from determination of being narcotic addict and criminal proceedings prohibited from using information gained in addiction inquiry.

Section 3420, Pub. L. 89-793, title III, §310, Nov. 8, 1966, 80 Stat. 1447, related to evidence, examining physician as a competent and compellable witness, and physician-patient privilege.

Section 3421, Pub. L. 89-793, title III, §311, Nov. 8, 1966, 80 Stat. 1447, related to inapplicability of subchapter to persons with criminal charge pending, on probation, or with sentence unserved and consent to commitment of such persons by authority with power over their custody.

Section 3422, Pub. L. 89-793, title III, §312, Nov. 8, 1966, 80 Stat. 1447, related to commitment to hospital of the Service being dependent upon certification of availability of facilities or personnel for treatment.

Section 3423, Pub. L. 89-793, title III, §313, Nov. 8, 1966, 80 Stat. 1447, related to compensation of physicians and counsel and source of funds.

Section 3424, Pub. L. 89-793, title III, §314, Nov. 8, 1966, 80 Stat. 1448, related to authority of Surgeon General.

Section 3425, Pub. L. 89-793, title III, §315, Nov. 8, 1966, 80 Stat. 1448, related to penalties for escape or rescue from custody.

Section 3426, Pub. L. 89-793, title III, §316, Nov. 8, 1966, 80 Stat. 1448, related to penalties for false statements.

**SUBCHAPTER III—REHABILITATION AND POSTHOSPITALIZATION CARE PROGRAMS AND ASSISTANCE TO STATES AND LOCALITIES**

**§3441. Repealed. Pub. L. 106-310, div. B, title XXXIV, §3405(b), Oct. 17, 2000, 114 Stat. 1221**

Section, Pub. L. 89-793, title IV, §401, Nov. 8, 1966, 80 Stat. 1448, related to establishment of outpatient services.

**§3442. Repealed. Pub. L. 90-574, title III, §303(b), Oct. 15, 1968, 82 Stat. 1011**

Section, Pub. L. 89-793, title IV, §402, Nov. 8, 1966, 80 Stat. 1448, authorized appropriations for grants to States and political subdivisions thereof and to private organizations and institutions for development of narcotic addict rehabilitation and treatment programs.

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SUBCHAPTER I—GENERAL PROVISIONS

**§ 3501. Establishment of Department; effective date**

The provisions of Reorganization Plan Numbered 1 of 1953, submitted to the Congress on March 12, 1953, shall take effect ten days after April 1, 1953, and its approval by the President, notwithstanding the provisions of the Reorganization Act of 1949, as amended, except that section 9 of such Act shall apply to such reorganization plan and to the reorganization made thereby.

(Apr. 1, 1953, ch. 14, 67 Stat. 18.)

**Editorial Notes**

REFERENCES IN TEXT

Reorganization Plan Numbered 1 of 1953, referred to in text, is Reorg. Plan No. 1 of 1953, eff. Apr. 11, 1953, 18 F.R. 2053, 67 Stat. 631, which is set out as a note below and in the Appendix to Title 5, Government Organization and Employees.

The Reorganization Act of 1949, as amended, referred to in text, is act June 20, 1949, ch. 226, 63 Stat. 203,

which enacted sections 133z to 133z-15 of former Title 5, Executive Departments and Government Officers and Employees. Sections 133z to 133z-15 of former Title 5 were repealed and reenacted as sections 901 to 913 of Title 5, Government Organizations and Employees, by Pub. L. 89-554, Sept. 6, 1966, 80 Stat. 378. Section 913 of Title 5 has been omitted from the Code. Section 9 of the Reorganization Act of 1949, which enacted section 133z-7 of former Title 5, was also repealed and reenacted as section 907(a) to (c) of Title 5 by Pub. L. 89-554.

CODIFICATION

Section was formerly classified to section 623 of former Title 5, Executive Departments and Government Officers and Employees, prior to the general revision and enactment of Title 5, Government Organization and Employees, by Pub. L. 89-554, §1, Sept. 1, 1966, 80 Stat. 378.

**Statutory Notes and Related Subsidiaries**

TRANSFER OF FUNCTIONS

For transfer of functions, personnel, assets, and liabilities of the Department of Health and Human Services, including the functions of the Secretary of Health and Human Services and the Assistant Secretary for Public Health Emergency Preparedness [now Assistant Secretary for Preparedness and Response] relating thereto, to the Secretary of Homeland Security, and for treatment of related references, see former section 313(5) and (6), and sections 551(d), 552(d), and 557 of Title 6, Domestic Security, and the Department of Homeland Security Reorganization Plan of November 25, 2002, as modified, set out as a note under section 542 of Title 6.

REDUCING ADMINISTRATIVE BURDEN FOR RESEARCHERS

Pub. L. 114-255, div. A, title II, §2034, Dec. 13, 2016, 130 Stat. 1059, provided that:

“(a) PLAN PREPARATION AND IMPLEMENTATION OF MEASURES TO REDUCE ADMINISTRATIVE BURDENS.—

“(1) IN GENERAL.—Not later than 2 years after the date of enactment of this Act [Dec. 13, 2016], the Secretary of Health and Human Services (referred to in this section as the ‘Secretary’) shall—

“(A) lead a review by research funding agencies of all regulations and policies related to the disclosure of financial conflicts of interest, including the minimum threshold for reporting financial conflicts of interest;

“(B) make revisions, as appropriate, to harmonize existing policies and reduce administrative burden on researchers while maintaining the integrity and credibility of research findings and protections of human participants; and

“(C) confer with the Office of the Inspector General about the activities of such office related to financial conflicts of interest involving research funding agencies.

“(2) CONSIDERATIONS.—In updating policies under paragraph (1)(B), the Secretary shall consider—

“(A) modifying the timelines for the reporting of financial conflicts of interest to just-in-time information by institutions receiving grant or cooperative agreement funding from the National Institutes of Health;

“(B) ensuring that financial interest disclosure reporting requirements are appropriate for, and relevant to, awards that will directly fund research, which may include modification of the definition of the term ‘investigator’ for purposes of the regulations and policies described in subparagraphs (A) and (B) of paragraph (1); and

“(C) updating any applicable training modules of the National Institutes of Health related to Federal financial interest disclosure.

“(b) MONITORING OF SUBRECIPIENTS OF FUNDING FROM THE NATIONAL INSTITUTES OF HEALTH.—The Director of the National Institutes of Health (referred to in this section as the ‘Director of National Institutes of