

Subsec. (j)(2) to (4). Pub. L. 115-123, § 50901(d)(5), added par. (2) and redesignated former pars. (2) and (3) as (3) and (4), respectively.

2017—Subsec. (g). Pub. L. 115-96 designated existing provisions as par. (1), inserted heading, substituted “and \$30,000,000 for the period of the first and second quarters of fiscal year 2018, to remain available until expended” for “and \$15,000,000 for the first quarter of fiscal year 2018”, and added par. (2).

Pub. L. 115-63 substituted “2015, \$60,000,000” for “2015 and \$60,000,000” and inserted “, and \$15,000,000 for the first quarter of fiscal year 2018” before period at end.

2015—Subsec. (g). Pub. L. 114-10 inserted “and \$60,000,000 for each of fiscal years 2016 and 2017” before period at end.

#### Statutory Notes and Related Subsidiaries

##### FUNDING FOR TEACHING HEALTH CENTERS THAT OPERATE GRADUATE MEDICAL EDUCATION

Pub. L. 117-2, title II, § 2604, Mar. 11, 2021, 135 Stat. 44, provided that:

“(a) IN GENERAL.—In addition to amounts otherwise available, and notwithstanding the capped amount referenced in sections 340H(b)(2) and 340H(d)(2) of the Public Health Service Act (42 U.S.C. 256h(b)(2) and (d)(2)), there is appropriated to the Secretary [of Health and Human Services] for fiscal year 2021, out of any money in the Treasury not otherwise appropriated, \$330,000,000, to remain available until September 30, 2023, for the program of payments to teaching health centers that operate graduate medical education under section 340H of the Public Health Service Act (42 U.S.C. 256h) and for teaching health center development grants authorized under section 749A of the Public Health Service Act (42 U.S.C. 293f-1).

“(b) USE OF FUNDS.—Amounts made available pursuant to subsection (a) shall be used for the following activities:

“(1) For making payments to establish new approved graduate medical residency training programs pursuant to section 340H(a)(1)(C) of the Public Health Service Act (42 U.S.C. 256h(a)(1)(C)).

“(2) To provide an increase to the per resident amount described in section 340H(a)(2) of the Public Health Service Act (42 U.S.C. 256h(a)(2)) of \$10,000.

“(3) For making payments under section 340H(a)(1)(A) of the Public Health Service Act (42 U.S.C. 256h(a)(1)(A)) [sic] to qualified teaching health centers for maintenance of filled positions at existing approved graduate medical residency training programs.

“(4) For making payments under section 340H(a)(1)(B) of the Public Health Service Act (42 U.S.C. 256h(a)(1)(B)) for the expansion of existing approved graduate medical residency training programs.

“(5) For making awards under section 749A of the Public Health Service Act (42 U.S.C. 293f-1) to teaching health centers for the purpose of establishing new accredited or expanded primary care residency programs.

“(6) To cover administrative costs and activities necessary for qualified teaching health centers receiving payments under section 340H of the Public Health Service Act (42 U.S.C. 256h) to carry out activities under such section.”

##### PAYMENTS FOR PREVIOUS FISCAL YEARS

Pub. L. 115-123, div. E, title IX, § 50901(d)(7), Feb. 9, 2018, 132 Stat. 289, provided that: “The provisions of section 340H of the Public Health Service Act (42 U.S.C. 256h), as in effect on the day before the date of enactment of Public Law 115-96 [Dec. 22, 2017], shall continue to apply with respect to payments under such section for fiscal years before fiscal year 2018.”

#### SUBPART XII—COMMUNITY-BASED COLLABORATIVE CARE NETWORK PROGRAM

##### Editorial Notes

###### CODIFICATION

Pub. L. 115-63, title III, § 301(c)(1), Sept. 29, 2017, 131 Stat. 1172, redesignated this subpart, which was formerly subpart XI of part D of title III of act July 1, 1944, as subpart XII. Another subpart XI of part D of title III of the Act is classified to subpart XI (§ 256h) of this part.

#### § 256i. Community-based collaborative care network program

##### (a) In general

The Secretary may award grants to eligible entities to support community-based collaborative care networks that meet the requirements of subsection (b).

##### (b) Community-based collaborative care networks

###### (1) Description

A community-based collaborative care network (referred to in this section as a “network”) shall be a consortium of health care providers with a joint governance structure (including providers within a single entity) that provides comprehensive coordinated and integrated health care services (as defined by the Secretary) for low-income populations.

###### (2) Required inclusion

A network shall include the following providers (unless such provider does not exist within the community, declines or refuses to participate, or places unreasonable conditions on their participation):

(A) A hospital that meets the criteria in section 1396r-4(b)(1) of this title; and

(B) All Federally qualified health centers (as defined in section 1395x(aa) of this title<sup>1</sup> located in the community.

###### (3) Priority

In awarding grants, the Secretary shall give priority to networks that include—

(A) the capability to provide the broadest range of services to low-income individuals;

(B) the broadest range of providers that currently serve a high volume of low-income individuals; and

(C) a county or municipal department of health.

##### (c) Application

###### (1) Application

A network described in subsection (b) shall submit an application to the Secretary.

###### (2) Renewal

In subsequent years, based on the performance of grantees, the Secretary may provide renewal grants to prior year grant recipients.

##### (d) Use of funds

###### (1) Use by grantees

Grant funds may be used for the following activities:

<sup>1</sup> So in original. A closing parenthesis probably should appear.

(A) Assist low-income individuals to—

(i) access and appropriately use health services;

(ii) enroll in health coverage programs; and

(iii) obtain a regular primary care provider or a medical home.

(B) Provide case management and care management.

(C) Perform health outreach using neighborhood health workers or through other means.

(D) Provide transportation.

(E) Expand capacity, including through telehealth, after-hours services or urgent care.

(F) Provide direct patient care services.

## (2) Grant funds to HRSA grantees

The Secretary may limit the percent of grant funding that may be spent on direct care services provided by grantees of programs administered by the Health Resources and Services Administration or impose other requirements on such grantees deemed necessary.

## (e) Authorization of appropriations

There are authorized to be appropriated to carry out this section such sums as may be necessary for each of fiscal years 2011 through 2015.

(July 1, 1944, ch. 373, title III, §340I, formerly §340H, as added Pub. L. 111-148, title X, §10333, Mar. 23, 2010, 124 Stat. 970; renumbered §340I, Pub. L. 115-63, title III, §301(c)(2), Sept. 29, 2017, 131 Stat. 1172.)

## PART E—NARCOTIC ADDICTS AND OTHER DRUG ABUSERS

### § 257. Repealed. Pub. L. 106-310, div. B, title XXXIV, § 3405(a), Oct. 17, 2000, 114 Stat. 1221, as amended by Pub. L. 114-198, title I, § 110(b), July 22, 2016, 130 Stat. 710

Section, acts July 1, 1944, ch. 373, title III, §341, 58 Stat. 698; May 8, 1954, ch. 195, §3, 68 Stat. 80; July 24, 1956, ch. 676, title III, §302(a), 70 Stat. 622; Pub. L. 89-793, title VI, §601, Nov. 8, 1966, 80 Stat. 1449; 1967 Reorg. Plan No. 3, §401, eff. Nov. 3, 1967 (in part), 32 F.R. 11669, 81 Stat. 951; Pub. L. 91-513, title I, §2(a)(1), Oct. 27, 1970, 84 Stat. 1240; Pub. L. 92-255, title IV, §402, Mar. 21, 1972, 86 Stat. 77; Pub. L. 93-198, title IV, §421, Dec. 24, 1973, 87 Stat. 789; Pub. L. 98-473, title II, §232(a), Oct. 12, 1984, 98 Stat. 2031; Pub. L. 99-646, §22(a), Nov. 10, 1986, 100 Stat. 3597; Pub. L. 102-54, §13(q)(1)(B)(i), June 13, 1991, 105 Stat. 278, related to care and treatment of narcotic addicts.

#### Statutory Notes and Related Subsidiaries

##### EFFECTIVE DATE OF 2016 AMENDMENT

Pub. L. 114-198, title I, §110(b), July 22, 2016, 130 Stat. 710, provided that the amendment made by section 110(b) (amending directory language of section 3405(a) of Pub. L. 106-310, which repealed this section) is effective as if included in the enactment of Pub. L. 106-310.

### § 257a. Transferred

#### Editorial Notes

##### CODIFICATION

Section, Pub. L. 91-513, title I, §4, Oct. 27, 1970, 84 Stat. 1241; Pub. L. 96-88, title V, §509(b), Oct. 17, 1979, 93

Stat. 695, which related to medical treatment of narcotics addiction, was transferred to section 290bb-2a of this title.

### § 258. Repealed. Pub. L. 106-310, div. B, title XXXIV, § 3405(a), Oct. 17, 2000, 114 Stat. 1221, as amended by Pub. L. 114-198, title I, § 110(b), July 22, 2016, 130 Stat. 710

Section, acts July 1, 1944, ch. 373, title III, §342, 58 Stat. 699; 1953 Reorg. Plan No. 1, §§5, 8, eff. Apr. 11, 1953, 18 F.R. 2053, 67 Stat. 631; Pub. L. 91-513, title I, §2(a)(2)(A), Oct. 27, 1970, 84 Stat. 1240; Pub. L. 96-88, title V, §509(b), Oct. 17, 1979, 93 Stat. 695, related to employment, establishment of industries, plants, etc., sale of commodities, and disposition of proceeds.

#### Statutory Notes and Related Subsidiaries

##### EFFECTIVE DATE OF 2016 AMENDMENT

Pub. L. 114-198, title I, §110(b), July 22, 2016, 130 Stat. 710, provided that the amendment made by section 110(b) (amending directory language of section 3405(a) of Pub. L. 106-310, which repealed this section) is effective as if included in the enactment of Pub. L. 106-310.

### § 258a. Transferred

#### Editorial Notes

##### CODIFICATION

Section, act July 8, 1947, ch. 210, title II, §201, 61 Stat. 269, which related to transfer of balances in working capital fund, narcotic hospitals, to surplus fund, was transferred and is set out as a note under section 290aa of this title.

### §§ 259 to 261a. Repealed. Pub. L. 106-310, div. B, title XXXIV, § 3405(a), Oct. 17, 2000, 114 Stat. 1221, as amended by Pub. L. 114-198, title I, § 110(b), July 22, 2016, 130 Stat. 710

Section 259, acts July 1, 1944, ch. 373, title III, §343, 58 Stat. 699; Pub. L. 91-513, title I, §2(a)(2)(A), (3), (4), Oct. 27, 1970, 84 Stat. 1240; Pub. L. 92-293, §3, May 11, 1972, 86 Stat. 136; Pub. L. 98-473, title II, §232(b), Oct. 12, 1984, 98 Stat. 2031, related to convict addicts or other persons with drug abuse or drug dependence problems.

Section 260, acts July 1, 1944, ch. 373, title III, §344, 58 Stat. 701; June 25, 1948, ch. 654, §5, 62 Stat. 1018; July 24, 1956, ch. 676, title III, §302(b), 70 Stat. 622; Pub. L. 91-513, title I, §2(a)(2)(A), (3), (4), Oct. 27, 1970, 84 Stat. 1240, related to addicts and persons with drug abuse or drug dependence problems.

Section 260a, act July 1, 1944, ch. 373, title III, §345, as added May 8, 1954, ch. 195, §2, 68 Stat. 79; amended July 24, 1956, ch. 676, title III, §302(c), 70 Stat. 622; Pub. L. 91-358, title I, §155(c)(32), July 29, 1970, 84 Stat. 572, related to admission of addicts committed from District of Columbia.

Section 261, acts July 1, 1944, ch. 373, title III, §346, formerly §345, 58 Stat. 701; renumbered §346, May 8, 1954, ch. 195, §2, 68 Stat. 79; amended Pub. L. 91-513, title I, §2(a)(2)(A), (5), Oct. 27, 1970, 84 Stat. 1240, related to penalties for introducing prohibited articles and substances into hospitals and escaping from, or aiding and abetting escape from hospitals.

Section 261a, act July 1, 1944, ch. 373, title III, §347, as added May 8, 1954, ch. 195, §4, 68 Stat. 80; amended Pub. L. 91-513, title I, §2(a)(4), Oct. 27, 1970, 84 Stat. 1240, related to release of patients and determination by Surgeon General.

#### Statutory Notes and Related Subsidiaries

##### EFFECTIVE DATE OF 2016 AMENDMENT

Pub. L. 114-198, title I, §110(b), July 22, 2016, 130 Stat. 710, provided that the amendment made by section