

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER II - GENERAL POWERS AND DUTIES
Part D - Primary Health Care
subpart i - health centers

-HEAD-

Sec. 254c-15. Rural emergency medical service training and
equipment assistance program

-STATUTE-

(a) Grants

The Secretary, acting through the Administrator of the Health Resources and Services Administration (referred to in this section as the "Secretary") shall award grants to eligible entities to enable such entities to provide for improved emergency medical services in rural areas.

(b) Eligibility

To be eligible to receive a grant under this section, an entity shall -

(1) be -

- (A) a State emergency medical services office;
 - (B) a State emergency medical services association;
 - (C) a State office of rural health;
 - (D) a local government entity;
 - (E) a State or local ambulance provider; or
 - (F) any other entity determined appropriate by the Secretary;
- and

(2) prepare and submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require, that includes -

- (A) a description of the activities to be carried out under the grant; and
- (B) an assurance that the eligible entity will comply with the matching requirement of subsection (e) of this section.

(c) Use of funds

An entity shall use amounts received under a grant made under subsection (a) of this section, either directly or through grants to emergency medical service squads that are located in, or that serve residents of, a nonmetropolitan statistical area, an area designated as a rural area by any law or regulation of a State, or a rural census tract of a metropolitan statistical area (as determined under the most recent Goldsmith Modification, originally published in a notice of availability of funds in the Federal Register on February 27, 1992, 57 Fed. Reg. 6725), to -

- (1) recruit emergency medical service personnel;
- (2) recruit volunteer emergency medical service personnel;
- (3) train emergency medical service personnel in emergency response, injury prevention, safety awareness, and other topics relevant to the delivery of emergency medical services;
- (4) fund specific training to meet Federal or State certification requirements;
- (5) develop new ways to educate emergency health care providers

through the use of technology-enhanced educational methods (such as distance learning);

(6) acquire emergency medical services equipment, including cardiac defibrillators;

(7) acquire personal protective equipment for emergency medical services personnel as required by the Occupational Safety and Health Administration; and

(8) educate the public concerning cardiopulmonary resuscitation, first aid, injury prevention, safety awareness, illness prevention, and other related emergency preparedness topics.

(d) Preference

In awarding grants under this section the Secretary shall give preference to -

(1) applications that reflect a collaborative effort by 2 or more of the entities described in subparagraphs (A) through (F) of subsection (b)(1) of this section; and

(2) applications submitted by entities that intend to use amounts provided under the grant to fund activities described in any of paragraphs (1) through (5) of subsection (c) of this section.

(e) Matching requirement

The Secretary may not award a grant under this section to an entity unless the entity agrees that the entity will make available (directly or through contributions from other public or private entities) non-Federal contributions toward the activities to be carried out under the grant in an amount equal to 25 percent of the amount received under the grant.

(f) Emergency medical services

In this section, the term "emergency medical services" -

(1) means resources used by a qualified public or private nonprofit entity, or by any other entity recognized as qualified by the State involved, to deliver medical care outside of a medical facility under emergency conditions that occur -

(A) as a result of the condition of the patient; or

(B) as a result of a natural disaster or similar situation;

and

(2) includes services delivered by an emergency medical services provider (either compensated or volunteer) or other provider recognized by the State involved that is licensed or certified by the State as an emergency medical technician or its equivalent (as determined by the State), a registered nurse, a physician assistant, or a physician that provides services similar to services provided by such an emergency medical services provider.

(g) Authorization of appropriations

(1) In general

There are authorized to be appropriated to carry out this section such sums as may be necessary for each of fiscal years 2002 through 2006.

(2) Administrative costs

The Secretary may use not more than 10 percent of the amount appropriated under paragraph (1) for a fiscal year for the administrative expenses of carrying out this section.

(July 1, 1944, ch. 373, title III, Sec. 330J, as added Pub. L. 107-251, title II, Sec. 221, Oct. 26, 2002, 116 Stat. 1638.)

-End-

PART A

-CITE-

42 USC Sec. 300d

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part A - General Authority and Duties of Secretary

-HEAD-

Sec. 300d. Establishment

-STATUTE-

(a) In general

The Secretary shall, with respect to trauma care -

(1) conduct and support research, training, evaluations, and demonstration projects;

(2) foster the development of appropriate, modern systems of such care through the sharing of information among agencies and individuals involved in the study and provision of such care;

(3) collect, compile, and disseminate information on the achievements of, and problems experienced by, State and local agencies and private entities in providing trauma care and emergency medical services and, in so doing, give special consideration to the unique needs of rural areas;

(4) provide to State and local agencies technical assistance to enhance each State's capability to develop, implement, and sustain the trauma care component of each State's plan for the provision of emergency medical services;

(5) sponsor workshops and conferences; and

(6) promote the collection and categorization of trauma data in a consistent and standardized manner.

(b) Grants, cooperative agreements, and contracts

The Secretary may make grants, and enter into cooperative agreements and contracts, for the purpose of carrying out subsection (a).

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1201, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2916; amended Pub. L. 103-183, title VI, Sec. 601(a), Dec. 14, 1993, 107 Stat. 2238; Pub. L. 104-146, Sec. 12(b), May 20, 1996, 110 Stat. 1373; Pub. L. 110-23, Sec. 2, May 3, 2007, 121 Stat. 90.)

PRIOR PROVISIONS

A prior section 300d, act July 1, 1944, ch. 373, title XII, Sec. 1201, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 594; amended Oct. 12, 1976, Pub. L. 94-484, title IX, Sec. 905(b)(1), 90 Stat. 2325; Oct. 21, 1976, Pub. L. 94-573, Secs. 2, 14(2), 90 Stat. 2709, 2718, defined terms applicable to this subchapter, prior to repeal by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

A prior section 1201 of act July 1, 1944, ch. 373, title XII, formerly Sec. 1205, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 597, was classified to section 300d-4 of this title prior to repeal by Pub. L. 99-117, Sec. 12(e), Oct. 7, 1985, 99 Stat. 495.

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section required the Secretary to provide support to trauma care, authorized the Secretary to make grants and enter into agreements for such support, and required the Administrator of the Health Resources and Services Administration to ensure that the Division of Trauma and Emergency Medical Systems administered this subchapter.

1996 - Subsec. (a). Pub. L. 104-146, in introductory provisions, substituted "The Secretary shall," for "The Secretary, acting through the Administrator of the Health Resources and Services Administration, shall,".

1993 - Subsec. (a). Pub. L. 103-183, Sec. 601(a)(1), in introductory provisions inserted ", acting through the Administrator of the Health Resources and Services Administration," after "Secretary".

Subsec. (c). Pub. L. 103-183, Sec. 601(a)(2), added subsec. (c).

EFFECTIVE DATE OF 1996 AMENDMENT

Amendment by Pub. L. 104-146 effective Oct. 1, 1996, see section 13 of Pub. L. 104-146, set out as a note under section 300ff-11 of this title.

CONGRESSIONAL STATEMENT OF FINDINGS

Section 2 of Pub. L. 101-590 provided that: "The Congress finds that -

"(1) the Federal Government and the governments of the States have established a history of cooperation in the development, implementation, and monitoring of integrated, comprehensive systems for the provision of emergency medical services throughout the United States;

"(2) physical trauma is the leading cause of death of Americans between the ages of 1 and 44 and is the third leading cause of death in the general population of the United States;

"(3) physical trauma in the United States results in an aggregate annual cost of \$180,000,000,000 in medical expenses, insurance, lost wages, and property damage;

"(4) barriers to the provision of prompt and appropriate emergency medical services exist in many areas of the United States;

"(5) few States and communities have developed and implemented

trauma care systems;

"(6) many trauma centers have incurred substantial uncompensated costs in providing trauma care, and such costs have caused many such centers to cease participation in trauma care systems; and

"(7) the number of incidents of physical trauma in the United States is a serious medical and social problem, and the number of deaths resulting from such incidents can be substantially reduced by improving the trauma-care components of the systems for the provision of emergency medical services in the United States."

-End-

-CITE-

42 USC Sec. 300d-1

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part A - General Authority and Duties of Secretary

-HEAD-

Sec. 300d-1. Repealed.

-MISC1-

Sec. 300d-1. Repealed. Pub. L. 103-183, title VI, Sec. 601(b)(1), Dec. 14, 1993, 107 Stat. 2238; Pub. L. 105-392, title IV, Sec. 401(a)(1)(A), Nov. 13, 1998, 112 Stat. 3587.

Section, act July 1, 1944, ch. 373, title XII, Sec. 1202, as added Nov. 16, 1990, Pub. L. 101-590, Sec. 3, 104 Stat. 2916, provided for establishment, membership, duties, etc., of Advisory Council on Trauma Care Systems.

A prior section 300d-1, act July 1, 1944, ch. 373, title XII, Sec. 1202, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 595; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 3, 90 Stat. 2709; Dec. 12, 1979, Pub. L. 96-142, title I, Sec. 103, 93 Stat. 1067, set forth provisions relating to grants and contracts for feasibility studies and planning, prior to repeal by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

-End-

-CITE-

42 USC Sec. 300d-2

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part A - General Authority and Duties of Secretary

-HEAD-

Sec. 300d-2. Repealed.

-MISC1-

Sec. 300d-2. Repealed. Pub. L. 110-23, Sec. 3(1), May 3, 2007, 121 Stat. 90.

Section, act July 1, 1944, ch. 373, title XII, Sec. 1202, formerly Sec. 1203, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2917; renumbered Sec. 1202, Pub. L. 103-183, title VI, Sec. 601(b)(2), Dec. 14, 1993, 107 Stat. 2238; amended Pub. L. 105-392, title IV, Sec. 401(a)(1)(A), Nov. 13, 1998, 112 Stat. 3587, required the Secretary to provide for the establishment and operation of a National Clearinghouse on Trauma Care and Emergency Medical Services.

A prior section 300d-2, act July 1, 1944, ch. 373, title XII, Sec. 1203, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 596; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 4, 90 Stat. 2710; Nov. 10, 1978, Pub. L. 95-626, title II, Sec. 210(a), 92 Stat. 3588; July 10, 1979, Pub. L. 96-32, Sec. 7(1), 93 Stat. 84, set forth provisions relating to grants and contracts for establishing and initial operation of emergency medical services systems, prior to repeal by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

-End-

-CITE-

42 USC Sec. 300d-3

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part A - General Authority and Duties of Secretary

-HEAD-

Sec. 300d-3. Establishment of programs for improving trauma care in rural areas

-STATUTE-

(a) In general

The Secretary may make grants to public and nonprofit private entities for the purpose of carrying out research and demonstration projects with respect to improving the availability and quality of emergency medical services in rural areas -

(1) by developing innovative uses of communications technologies and the use of new communications technology;

(2) by developing model curricula, such as advanced trauma life support, for training emergency medical services personnel, including first responders, emergency medical technicians, emergency nurses and physicians, and paramedics -

(A) in the assessment, stabilization, treatment, preparation for transport, and resuscitation of seriously injured patients, with special attention to problems that arise during long

transports and to methods of minimizing delays in transport to the appropriate facility; and

(B) in the management of the operation of the emergency medical services system;

(3) by making training for original certification, and continuing education, in the provision and management of emergency medical services more accessible to emergency medical personnel in rural areas through telecommunications, home studies, providing teachers and training at locations accessible to such personnel, and other methods;

(4) by developing innovative protocols and agreements to increase access to prehospital care and equipment necessary for the transportation of seriously injured patients to the appropriate facilities;

(5) by evaluating the effectiveness of protocols with respect to emergency medical services and systems; and

(6) by increasing communication and coordination with State trauma systems.

(b) Special consideration for certain rural areas

In making grants under subsection (a), the Secretary shall give special consideration to any applicant for the grant that will provide services under the grant in any rural area identified by a State under section 300d-14(d)(1) of this title.

(c) Requirement of application

The Secretary may not make a grant under subsection (a) unless an application for the grant is submitted to the Secretary and the application is in such form, is made in such manner, and contains such agreements, assurances, and information as the Secretary determines to be necessary to carry out this section.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1202, formerly Sec. 1204, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2918; renumbered Sec. 1203 and amended Pub. L. 103-183, title VI, Sec. 601(b)(2), (f)(1), Dec. 14, 1993, 107 Stat. 2238, 2239; Pub. L. 105-392, title IV, Sec. 401(a)(1), Nov. 13, 1998, 112 Stat. 3587; renumbered Sec. 1202 and amended Pub. L. 110-23, Secs. 3(2), 4, May 3, 2007, 121 Stat. 90, 91.)

-MISC1-

PRIOR PROVISIONS

A prior section 300d-3, act July 1, 1944, ch. 373, title XII, Sec. 1204, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 597; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 5, 90 Stat. 2711; Nov. 10, 1978, Pub. L. 95-626, title II, Sec. 210(b), 92 Stat. 3588; Dec. 12, 1979, Pub. L. 96-142, title I, Sec. 104(a), (b), 93 Stat. 1067, 1068, set forth provisions relating to grants and contracts for expansion and improvements, prior to repeal by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

A prior section 1202 of act July 1, 1944, was classified to section 300d-2 of this title prior to repeal by Pub. L. 110-23.

Another prior section 1202 of act July 1, 1944, was classified to section 300d-1 of this title prior to repeal by Pub. L. 103-183.

Another prior section 1202 of act July 1, 1944, was classified to

section 300d-6 of this title prior to repeal by Pub. L. 99-117.

AMENDMENTS

2007 - Pub. L. 110-23, Sec. 4, amended section generally. Prior to amendment, section provided for establishment of programs for improving trauma care in rural areas.

1998 - Pub. L. 105-392, Sec. 401(a)(1), made technical corrections to directory language of Pub. L. 103-183, Sec. 601(b)(2), which renumbered this section, and to directory language of Pub. L. 103-183, Sec. 601(f)(1). See 1993 Amendment note below.

1993 - Subsec. (c). Pub. L. 103-183, Sec. 601(f)(1), as amended by Pub. L. 105-392, Sec. 401(a)(1)(B), inserted "determines to be necessary to carry out this section" before period at end.

EFFECTIVE DATE OF 1998 AMENDMENT

Amendment by Pub. L. 105-392 deemed to have taken effect immediately after enactment of Pub. L. 103-183, see section 401(e) of Pub. L. 105-392, set out as a note under section 242m of this title.

-End-

-CITE-

42 USC Sec. 300d-4

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part A - General Authority and Duties of Secretary

-HEAD-

Sec. 300d-4. Emergency medical services

-STATUTE-

(a) (!1) Federal Interagency Committee on Emergency Medical Services

(1) Establishment

The Secretary of Transportation, the Secretary of Health and Human Services, and the Secretary of Homeland Security, acting through the Under Secretary for Emergency Preparedness and Response, shall establish a Federal Interagency Committee on Emergency Medical Services.

(2) Membership

The Interagency Committee shall consist of the following officials, or their designees:

(A) The Administrator, National Highway Traffic Safety Administration.

(B) The Director, Preparedness Division, Directorate of Emergency Preparedness and Response of the Department of Homeland Security.

(C) The Administrator, Health Resources and Services Administration, Department of Health and Human Services.

(D) The Director, Centers for Disease Control and Prevention,

Department of Health and Human Services.

(E) The Administrator, United States Fire Administration, Directorate of Emergency Preparedness and Response of the Department of Homeland Security.

(F) The Administrator, Centers for Medicare and Medicaid Services, Department of Health and Human Services.

(G) The Under Secretary of Defense for Personnel and Readiness.

(H) The Director, Indian Health Service, Department of Health and Human Services.

(I) The Chief, Wireless Telecommunications Bureau, Federal Communications Commission.

(J) A representative of any other Federal agency appointed by the Secretary of Transportation or the Secretary of Homeland Security through the Under Secretary for Emergency Preparedness and Response, in consultation with the Secretary of Health and Human Services, as having a significant role in relation to the purposes of the Interagency Committee.

(K) A State emergency medical services director appointed by the Secretary.

(3) Purposes

The purposes of the Interagency Committee are as follows:

(A) To ensure coordination among the Federal agencies involved with State, local, tribal, or regional emergency medical services and 9-1-1 systems.

(B) To identify State, local, tribal, or regional emergency medical services and 9-1-1 needs.

(C) To recommend new or expanded programs, including grant programs, for improving State, local, tribal, or regional emergency medical services and implementing improved emergency medical services communications technologies, including wireless 9-1-1.

(D) To identify ways to streamline the process through which Federal agencies support State, local, tribal or regional emergency medical services.

(E) To assist State, local, tribal or regional emergency medical services in setting priorities based on identified needs.

(F) To advise, consult, and make recommendations on matters relating to the implementation of the coordinated State emergency medical services programs.

(4) Administration

The Administrator of the National Highway Traffic Safety Administration, in cooperation with the Administrator of the Health Resources and Services Administration of the Department of Health and Human Services and the Director of the Preparedness Division, Directorate of Emergency Preparedness and Response of the Department of Homeland Security, shall provide administrative support to the Interagency Committee, including scheduling meetings, setting agendas, keeping minutes and records, and producing reports.

(5) Leadership

The members of the Interagency Committee shall select a chairperson of the Committee each year.

(6) Meetings

The Interagency Committee shall meet as frequently as is determined necessary by the chairperson of the Committee.

(7) Annual reports

The Interagency Committee shall prepare an annual report to Congress regarding the Committee's activities, actions, and recommendations.

-SOURCE-

(Pub. L. 109-59, title X, Sec. 10202, Aug. 10, 2005, 119 Stat. 1932.)

-COD-

CODIFICATION

Section was enacted as part of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users or SAFETEA-LU, and not as part of the Public Health Service Act which comprises this chapter.

-MISC1-

PRIOR PROVISIONS

A prior section 300d-4, act July 1, 1944, ch. 373, title XII, Sec. 1201, formerly Sec. 1205, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 597; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 6, 90 Stat. 2713, renumbered Sec. 1201 and amended Aug. 13, 1981, Pub. L. 97-35, title IX, Sec. 902(d)(1), (3), 95 Stat. 560, authorized Secretary to make grants and enter into contracts to support research in emergency medical techniques, methods, devices, and delivery, prior to repeal by Pub. L. 99-117, Sec. 12(e), Oct. 7, 1985, 99 Stat. 495.

-FOOTNOTE-

(!1) So in original. No subsec. (b) has been enacted.

-End-

-CITE-

42 USC Sec. 300d-5

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part A - General Authority and Duties of Secretary

-HEAD-

Sec. 300d-5. Competitive grants for the improvement of trauma care

-STATUTE-

(a) In general

The Secretary, acting through the Administrator of the Health Resources and Services Administration, may make grants to States, political subdivisions, or consortia of States or political subdivisions for the purpose of improving access to and enhancing the development of trauma care systems.

(b) Use of funds

The Secretary may make a grant under this section only if the applicant agrees to use the grant -

(1) to integrate and broaden the reach of a trauma care system, such as by developing innovative protocols to increase access to prehospital care;

(2) to strengthen, develop, and improve an existing trauma care system;

(3) to expand communications between the trauma care system and emergency medical services through improved equipment or a telemedicine system;

(4) to improve data collection and retention; or

(5) to increase education, training, and technical assistance opportunities, such as training and continuing education in the management of emergency medical services accessible to emergency medical personnel in rural areas through telehealth, home studies, and other methods.

(c) Preference

In selecting among States, political subdivisions, and consortia of States or political subdivisions for purposes of making grants under this section, the Secretary shall give preference to applicants that -

(1) have developed a process, using national standards, for designating trauma centers;

(2) recognize protocols for the delivery of seriously injured patients to trauma centers;

(3) implement a process for evaluating the performance of the trauma system; and

(4) agree to participate in information systems described in section 300d-3 of this title by collecting, providing, and sharing information.

(d) Priority

In making grants under this section, the Secretary shall give priority to applicants that will use the grants to focus on improving access to trauma care systems.

(e) Special consideration

In awarding grants under this section, the Secretary shall give special consideration to projects that demonstrate strong State or local support, including availability of non-Federal contributions.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1203, as added Pub. L. 110-23, Sec. 5, May 3, 2007, 121 Stat. 91.)

-MISC1-

PRIOR PROVISIONS

A prior section 300d-5, act July 1, 1944, ch. 373, title XII, Sec. 1206, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 598; amended Oct. 21, 1976, Pub. L. 94-573, Secs. 7, 14(2), 90 Stat. 2713, 2718; Nov. 10, 1978, Pub. L. 95-626, title II, Sec. 210(c), 92 Stat. 3588; Dec. 12, 1979, Pub. L. 96-142, title I, Sec. 104(c), 93 Stat. 1068, set forth general provisions respecting grants and contracts, prior to repeal by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

A prior section 1203 of act July 1, 1994, was renumbered section 1202 and is classified to section 300d-3 of this title.

Another prior section 1203 of act July 1, 1994, was renumbered section 1202 and was classified to section 300d-2 of this title prior to repeal by Pub. L. 110-23.

A prior section 300d-6, act July 1, 1944, ch. 373, title XII, Sec. 1202, formerly Sec. 1207, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 602; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 8, 90 Stat. 2714; Nov. 10, 1978, Pub. L. 95-626, title II, Sec. 210(d), 92 Stat. 3588; Dec. 12, 1979, Pub. L. 96-142, title I, Sec. 105, 93 Stat. 1068; renumbered Sec. 1202 and amended Aug. 13, 1981, Pub. L. 97-35, title IX, Sec. 902(d)(1), (4), 95 Stat. 560, authorized appropriations for purposes of this subchapter, prior to repeal by Pub. L. 99-117, Sec. 12(e), Oct. 7, 1985, 99 Stat. 495.

Prior sections 300d-7 to 300d-9 were repealed by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

Section 300d-7, act July 1, 1944, ch. 373, title XII, Sec. 1208, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 602; amended Oct. 12, 1976, Pub. L. 94-484, title VIII, Sec. 801(b), 90 Stat. 2322; Oct. 21, 1976, Pub. L. 94-573, Sec. 9, 90 Stat. 2715, set forth provisions relating to administration of emergency medical services administrative unit.

Section 300d-8, act July 1, 1944, ch. 373, title XII, Sec. 1209, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 602; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 10, 90 Stat. 2716; Oct. 17, 1979, Pub. L. 96-88, title V, Sec. 509(b), 93 Stat. 695; Dec. 12, 1979, Pub. L. 96-142, title I, Sec. 106, 93 Stat. 1069, related to Interagency Committee on Emergency Medical Services.

Section 300d-9, act July 1, 1944, ch. 373, title XII, Sec. 1210, as added Nov. 16, 1973, Pub. L. 93-154, Sec. 2(a), 87 Stat. 603; amended Oct. 21, 1976, Pub. L. 94-573, Sec. 11, 90 Stat. 2717, related to annual report to Congress.

-End-

PART B

-CITE-

42 USC Part B - Formula Grants With Respect to
Modifications of State Plans

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

PART B - FORMULA GRANTS WITH RESPECT TO MODIFICATIONS OF STATE
PLANS

-End-

-CITE-

42 USC Sec. 300d-11

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-11. Establishment of program

-STATUTE-

(a) Requirement of allotments for States

The Secretary shall for each fiscal year make an allotment for each State in an amount determined in accordance with section 300d-18 of this title. The Secretary shall make payments, as grants, each fiscal year to each State from the allotment for the State if the Secretary approves for the fiscal year involved an application submitted by the State pursuant to section 300d-17 of this title.

(b) Purpose

Except as provided in section 300d-33 (!1) of this title, the Secretary may not make payments under this part for a fiscal year unless the State involved agrees that, with respect to the trauma care component of the State plan for the provision of emergency medical services, the payments will be expended only for the purpose of developing, implementing, and monitoring the modifications to such component described in section 300d-13 of this title.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1211, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2919.)

-REFTEXT-

REFERENCES IN TEXT

Section 300d-33 of this title, referred to in subsec. (b), was repealed by Pub. L. 103-183, title VI, Sec. 601(e), Dec. 14, 1993, 107 Stat. 2239.

-FOOTNOTE-

(!1) See References in Text note below.

-End-

-CITE-

42 USC Sec. 300d-12

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-12. Requirement of matching funds for fiscal years subsequent to first fiscal year of payments

-STATUTE-

(a) Non-Federal contributions

(1) In general

The Secretary may not make payments under section 300d-11(a) of this title unless the State involved agrees, with respect to the costs described in paragraph (2), to make available non-Federal contributions (in cash or in kind under subsection (b)(1)) toward such costs in an amount that -

(A) for the second and third fiscal years of such payments to the State, is not less than \$1 for each \$1 of Federal funds provided in such payments for such fiscal years; and

(B) for the fourth and subsequent fiscal years of such payments to the State, is not less than \$2 for each \$1 of Federal funds provided in such payments for such fiscal years.

(2) Program costs

The costs referred to in paragraph (1) are -

(A) the costs to be incurred by the State in carrying out the purpose described in section 300d-11(b) of this title; or

(B) the costs of improving the quality and availability of emergency medical services in rural areas of the State.

(3) Initial year of payments

The Secretary may not require a State to make non-Federal contributions as a condition of receiving payments under section 300d-11(a) of this title for the first fiscal year of such payments to the State.

(b) Determination of amount of non-Federal contribution

With respect to compliance with subsection (a) as a condition of receiving payments under section 300d-11(a) of this title -

(1) a State may make the non-Federal contributions required in such subsection in cash or in kind, fairly evaluated, including plant, equipment, or services; and

(2) the Secretary may not, in making a determination of the amount of non-Federal contributions, include amounts provided by the Federal Government or services assisted or subsidized to any significant extent by the Federal Government.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1212, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2919; amended Pub. L. 103-183, title VI, Sec. 601(f)(2), Dec. 14, 1993, 107 Stat. 2239; Pub. L. 110-23, Sec. 6, May 3, 2007, 121 Stat. 92.)

-MISC1-

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section related to requirement of matching funds for fiscal years subsequent to first fiscal year of payments.

1993 - Subsec. (a)(2)(A). Pub. L. 103-183 substituted "section 300d-11(b)" for "section 300d-11(c)".

-End-

-CITE-

42 USC Sec. 300d-13

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-13. Requirements with respect to carrying out purpose of allotments

-STATUTE-

(a) Trauma care modifications to State plan for emergency medical services

With respect to the trauma care component of a State plan for the provision of emergency medical services, the modifications referred to in section 300d-11(b) of this title are such modifications to the State plan as may be necessary for the State involved to ensure that the plan provides for access to the highest possible quality of trauma care, and that the plan -

(1) specifies that the modifications required pursuant to paragraphs (2) through (11) will be implemented by the principal State agency with respect to emergency medical services or by the designee of such agency;

(2) specifies a public or private entity that will designate trauma care regions and trauma centers in the State;

(3) subject to subsection (b), contains national standards and requirements of the American College of Surgeons or another appropriate entity for the designation of level I and level II trauma centers, and in the case of rural areas level III trauma centers (including trauma centers with specified capabilities and expertise in the care of pediatric trauma patients), by such entity, including standards and requirements for -

(A) the number and types of trauma patients for whom such centers must provide care in order to ensure that such centers will have sufficient experience and expertise to be able to provide quality care for victims of injury;

(B) the resources and equipment needed by such centers; and

(C) the availability of rehabilitation services for trauma patients;

(4) contains standards and requirements for the implementation of regional trauma care systems, including standards and guidelines (consistent with the provisions of section 1395dd of this title) for medically directed triage and transportation of trauma patients (including patients injured in rural areas) prior to care in designated trauma centers;

(5) subject to subsection (b), contains national standards and requirements, including those of the American Academy of Pediatrics and the American College of Emergency Physicians, for medically directed triage and transport of severely injured

children to designated trauma centers with specified capabilities and expertise in the care of pediatric trauma patients;

(6) utilizes a program with procedures for the evaluation of designated trauma centers (including trauma centers described in paragraph (5)) and trauma care systems;

(7) provides for the establishment and collection of data in accordance with data collection requirements developed in consultation with surgical, medical, and nursing specialty groups, State and local emergency medical services directors, and other trained professionals in trauma care, from each designated trauma center in the State of a central data reporting and analysis system -

(A) to identify the number of severely injured trauma patients and the number of deaths from trauma within trauma care systems in the State;

(B) to identify the cause of the injury and any factors contributing to the injury;

(C) to identify the nature and severity of the injury;

(D) to monitor trauma patient care (including prehospital care) in each designated trauma center within regional trauma care systems in the State (including relevant emergency-department discharges and rehabilitation information) for the purpose of evaluating the diagnosis, treatment, and treatment outcome of such trauma patients;

(E) to identify the total amount of uncompensated trauma care expenditures for each fiscal year by each designated trauma center in the State; and

(F) to identify patients transferred within a regional trauma system, including reasons for such transfer and the outcomes of such patients;

(8) provides for the use of procedures by paramedics and emergency medical technicians to assess the severity of the injuries incurred by trauma patients;

(9) provides for appropriate transportation and transfer policies to ensure the delivery of patients to designated trauma centers and other facilities within and outside of the jurisdiction of such system, including policies to ensure that only individuals appropriately identified as trauma patients are transferred to designated trauma centers, and to provide periodic reviews of the transfers and the auditing of such transfers that are determined to be appropriate;

(10) conducts public education activities concerning injury prevention and obtaining access to trauma care;

(11) coordinates planning for trauma systems with State disaster emergency planning and bioterrorism hospital preparedness planning; and

(12) with respect to the requirements established in this subsection, provides for coordination and cooperation between the State and any other State with which the State shares any standard metropolitan statistical area.

(b) Certain standards with respect to trauma care centers and systems

(1) In general

The Secretary may not make payments under section 300d-11(a) of this title for a fiscal year unless the State involved agrees that, in carrying out paragraphs (3) through (5) of subsection

(a), the State will adopt standards for the designation of trauma centers, and for triage, transfer, and transportation policies, and that the State will, in adopting such standards -

(A) take into account national standards that outline resources for optimal care of injured patients;

(B) consult with medical, surgical, and nursing speciality groups, hospital associations, emergency medical services State and local directors, concerned advocates, and other interested parties;

(C) conduct hearings on the proposed standards after providing adequate notice to the public concerning such hearing; and

(D) beginning in fiscal year 2008, take into account the model plan described in subsection (c).

(2) Quality of trauma care

The highest quality of trauma care shall be the primary goal of State standards adopted under this subsection.

(3) Approval by the Secretary

The Secretary may not make payments under section 300d-11(a) of this title to a State if the Secretary determines that -

(A) in the case of payments for fiscal year 2008 and subsequent fiscal years, the State has not taken into account national standards, including those of the American College of Surgeons, the American College of Emergency Physicians, and the American Academy of Pediatrics, in adopting standards under this subsection; or

(B) in the case of payments for fiscal year 2008 and subsequent fiscal years, the State has not, in adopting such standards, taken into account the model plan developed under subsection (c).

(c) Model trauma care plan

(1) In general

Not later than 1 year after May 3, 2007, the Secretary shall update the model plan for the designation of trauma centers and for triage, transfer, and transportation policies that may be adopted for guidance by the State. Such plan shall -

(A) take into account national standards, including those of the American College of Surgeons, American College of Emergency Physicians, and the American Academy of Pediatrics;

(B) take into account existing State plans;

(C) be developed in consultation with medical, surgical, and nursing speciality groups, hospital associations, emergency medical services State directors and associations, and other interested parties; and

(D) include standards for the designation of rural health facilities and hospitals best able to receive, stabilize, and transfer trauma patients to the nearest appropriate designated trauma center, and for triage, transfer, and transportation policies as they relate to rural areas.

(2) Applicability

Standards described in paragraph (1)(D) shall be applicable to all rural areas in the State, including both non-metropolitan areas and frontier areas that have populations of less than 6,000 per square mile.

(d) Rule of construction with respect to number of designated trauma centers

With respect to compliance with subsection (a) as a condition of

the receipt of a grant under section 300d-11(a) of this title, such subsection may not be construed to specify the number of trauma care centers designated pursuant to such subsection.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1213, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2920; amended Pub. L. 103-183, title VI, Sec. 601(f)(3), Dec. 14, 1993, 107 Stat. 2239; Pub. L. 105-392, title IV, Sec. 401(b)(4), Nov. 13, 1998, 112 Stat. 3587; Pub. L. 110-23, Sec. 7, May 3, 2007, 121 Stat. 93.)

-MISC1-

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section related to requirements with respect to carrying out purpose of allotments.

1998 - Subsec. (a)(8). Pub. L. 105-392 substituted "provides for" for "provides for for".

1993 - Subsec. (a)(4). Pub. L. 103-183, Sec. 601(f)(3)(A), substituted "section 1395dd of this title)" for "section 1395dd of this title".

Subsec. (a)(8), (9). Pub. L. 103-183, Sec. 601(f)(3)(B), substituted "provides for" for "to provide" wherever appearing.

Subsec. (a)(10). Pub. L. 103-183, Sec. 601(f)(3)(C), substituted "conducts" for "to conduct".

EFFECTIVE DATE OF 1998 AMENDMENT

Amendment by Pub. L. 105-392 deemed to have taken effect immediately after enactment of Pub. L. 103-183, see section 401(e) of Pub. L. 105-392, set out as a note under section 242m of this title.

-End-

-CITE-

42 USC Sec. 300d-14

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-14. Requirement of submission to Secretary of trauma plan and certain information

-STATUTE-

(a) In general

For each fiscal year, the Secretary may not make payments to a State under section 300d-11(a) of this title unless, subject to subsection (b), the State submits to the Secretary the trauma care component of the State plan for the provision of emergency medical services, including any changes to the trauma care component and

any plans to address deficiencies in the trauma care component.

(b) Interim plan or description of efforts

For each fiscal year, if a State has not completed the trauma care component of the State plan described in subsection (a), the State may provide, in lieu of such completed component, an interim component or a description of efforts made toward the completion of the component.

(c) Information received by State reporting and analysis system

The Secretary may not make payments to a State under section 300d-11(a) of this title unless the State agrees that the State will, not less than once each year, provide to the Secretary the information received by the State pursuant to section 300d-13(a)(7) of this title.

(d) Availability of emergency medical services in rural areas

The Secretary may not make payments to a State under section 300d-11(a) of this title unless -

(1) the State identifies any rural area in the State for which -

(A) there is no system of access to emergency medical services through the telephone number 911;

(B) there is no basic life-support system; or

(C) there is no advanced life-support system; and

(2) the State submits to the Secretary a list of rural areas identified pursuant to paragraph (1) or, if there are no such areas, a statement that there are no such areas.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1214, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2922; amended Pub. L. 110-23, Sec. 8, May 3, 2007, 121 Stat. 96.)

-MISC1-

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section related to requirement of submission to Secretary of trauma plan and certain information for fiscal year 1991 and subsequent fiscal years.

-End-

-CITE-

42 USC Sec. 300d-15

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-15. Restrictions on use of payments

-STATUTE-

(a) In general

The Secretary may not, except as provided in subsection (b), make payments under section 300d-11(a) of this title for a fiscal year unless the State involved agrees that the payments will not be expended -

(1) for any purpose other than developing, implementing, and monitoring the modifications required by section 300d-11(b) of this title to be made to the State plan for the provision of emergency medical services;

(2) to make cash payments to intended recipients of services provided pursuant to this section;

(3) to purchase or improve real property (other than minor remodeling of existing improvements to real property);

(4) to satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds; or

(5) to provide financial assistance to any entity other than a public or nonprofit private entity.

(b) Waiver

The Secretary may waive a restriction under subsection (a) only if the Secretary determines that the activities outlined by the State plan submitted under section 300d-14(a) of this title by the State involved cannot otherwise be carried out.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1215, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2923; amended Pub. L. 110-23, Sec. 9, May 3, 2007, 121 Stat. 97.)

-MISC1-

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section related to restrictions on use of payments.

-End-

-CITE-

42 USC Sec. 300d-16

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-16. Repealed.

-MISC1-

Sec. 300d-16. Repealed. Pub. L. 110-23, Sec. 10, May 3, 2007, 121 Stat. 97.

Section, act July 1, 1944, ch. 373, title XII, Sec. 1216, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2923; amended Pub. L. 103-183, title VI, Sec. 601(c), Dec. 14, 1993, 107

Stat. 2238; Pub. L. 104-316, title I, Sec. 122(d), Oct. 19, 1996,
110 Stat. 3837, provided for requirement of reports by States.

-End-

-CITE-

42 USC Sec. 300d-17

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-17. Requirement of submission of application containing
certain agreements and assurances

-STATUTE-

The Secretary may not make payments under section 300d-11(a) of
this title to a State for a fiscal year unless -

(1) the State submits to the Secretary an application for the
payments containing agreements in accordance with this part;

(2) the agreements are made through certification from the
chief executive officer of the State;

(3) with respect to such agreements, the application provides
assurances of compliance satisfactory to the Secretary;

(4) the application contains the plan provisions and the
information required to be submitted to the Secretary pursuant to
section 300d-14 of this title; and

(5) the application otherwise is in such form, is made in such
manner, and contains such agreements, assurances, and information
as the Secretary determines to be necessary to carry out this
part.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1217, as added Pub. L. 101-
590, Sec. 3, Nov. 16, 1990, 104 Stat. 2924.)

-End-

-CITE-

42 USC Sec. 300d-18

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-18. Determination of amount of allotment

-STATUTE-

(a) Minimum allotment

Subject to the extent of amounts made available in appropriations Acts, the amount of an allotment under section 300d-11(a) of this title for a State for a fiscal year shall be the greater of -

(1) the amount determined under subsection (b)(1) of this section; and

(2) \$250,000 in the case of each of the several States, the District of Columbia, and the Commonwealth of Puerto Rico, and \$50,000 in the case of each of the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(b) Determination under formula

(1) In general

The amount referred to in subsection (a)(1) of this section for a State for a fiscal year is the sum of -

(A) an amount determined under paragraph (2); and

(B) an amount determined under paragraph (3).

(2) Amount relating to population

The amount referred to in subparagraph (A) of paragraph (1) for a State for a fiscal year is the product of -

(A) an amount equal to 80 percent of the amounts appropriated under section 300d-32(a) of this title for the fiscal year and available for allotment under section 300d-11(a) of this title; and

(B) a percentage equal to the quotient of -

(i) an amount equal to the population of the State; divided by

(ii) an amount equal to the population of all States.

(3) Amount relating to square mileage

The amount referred to in subparagraph (B) of paragraph (1) for a State for a fiscal year is the product of -

(A) an amount equal to 20 percent of the amounts appropriated under section 300d-32(a) of this title for the fiscal year and available for allotment under section 300d-11(a) of this title; and

(B) a percentage equal to the quotient of -

(i) an amount equal to the lesser of 266,807 and the amount of the square mileage of the State; divided by

(ii) an amount equal to the sum of the respective amounts determined for the States under clause (i).

(c) Disposition of certain funds appropriated for allotments

(1) In general

Amounts described in paragraph (2) shall, in accordance with paragraph (3), be allotted by the Secretary to States receiving payments under section 300d-11(a) of this title for the fiscal year (other than any State referred to in paragraph (2)(C)).

(2) Type of amounts

The amounts referred to in paragraph (1) are any amounts made available pursuant to 300d-32(b)(3) of this title that are not paid under section 300d-11(a) of this title to a State as a result of -

(A) the failure of the State to submit an application under section 300d-17 of this title;

(B) the failure, in the determination of the Secretary, of the State to prepare within a reasonable period of time such application in compliance with such section; or

(C) the State informing the Secretary that the State does not

intend to expend the full amount of the allotment made for the State.

(3) Amount

The amount of an allotment under paragraph (1) for a State for a fiscal year shall be an amount equal to the product of -

(A) an amount equal to the amount described in paragraph (2) for the fiscal year involved; and

(B) the percentage determined under subsection (b)(2) of this section for the State.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1218, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2924.)

-End-

-CITE-

42 USC Sec. 300d-19

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-19. Failure to comply with agreements

-STATUTE-

(a) Repayment of payments

(1) Requirement

The Secretary may, in accordance with subsection (b) of this section, require a State to repay any payments received by the State pursuant to section 300d-11(a) of this title that the Secretary determines were not expended by the State in accordance with the agreements required to be made by the State as a condition of the receipt of payments under such section.

(2) Offset of amounts

If a State fails to make a repayment required in paragraph (1), the Secretary may offset the amount of the repayment against any amount due to be paid to the State under section 300d-11(a) of this title.

(b) Opportunity for hearing

Before requiring repayment of payments under subsection (a)(1) of this section, the Secretary shall provide to the State an opportunity for a hearing.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1219, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2925.)

-End-

-CITE-

42 USC Sec. 300d-20

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-20. Prohibition against certain false statements

-STATUTE-

(a) In general

(1) False statements or representations

A person may not knowingly and willfully make or cause to be made any false statement or representation of a material fact in connection with the furnishing of items or services for which payments may be made by a State from amounts paid to the State under section 300d-11(a) of this title.

(2) Concealing or failing to disclose information

A person with knowledge of the occurrence of any event affecting the right of the person to receive any payments from amounts paid to the State under section 300d-11(a) of this title may not conceal or fail to disclose any such event with the intent of fraudulently securing such amount.

(b) Criminal penalty for violation of prohibition

Any person who violates a prohibition established in subsection (a) of this section may for each violation be fined in accordance with title 18, or imprisoned for not more than 5 years, or both.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1220, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2925.)

-End-

-CITE-

42 USC Sec. 300d-21

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-21. Technical assistance and provision by Secretary of supplies and services in lieu of grant funds

-STATUTE-

(a) Technical assistance

The Secretary shall, without charge to a State receiving payments under section 300d-11(a) of this title, provide to the State (or to any public or nonprofit private entity designated by the State)

technical assistance with respect to the planning, development, and operation of any program carried out pursuant to section 300d-11(b) of this title. The Secretary may provide such technical assistance directly, through contract, or through grants.

(b) Provision by Secretary of supplies and services in lieu of grant funds

(1) In general

Upon the request of a State receiving payments under section 300d-11(a) of this title, the Secretary may, subject to paragraph (2), provide supplies, equipment, and services for the purpose of aiding the State in carrying out section 300d-11(b) of this title and, for such purpose, may detail to the State any officer or employee of the Department of Health and Human Services.

(2) Reduction in payments

With respect to a request described in paragraph (1), the Secretary shall reduce the amount of payments to the State under section 300d-11(a) of this title by an amount equal to the costs of detailing personnel and the fair market value of any supplies, equipment, or services provided by the Secretary. The Secretary shall, for the payment of expenses incurred in complying with such request, expend the amounts withheld.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1221, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2926.)

-MISC1-

PRIOR PROVISIONS

A prior section 300d-21, act July 1, 1944, ch. 373, title XII, Sec. 1221, as added Oct. 21, 1976, Pub. L. 94-573, Sec. 14(3), 90 Stat. 2718; amended Dec. 12, 1979, Pub. L. 96-142, title I, Sec. 107(a)-(c), 93 Stat. 1069, related to programs for burn, trauma, and poison injuries, prior to repeal by Pub. L. 97-35, title IX, Sec. 902(d)(1), (h), Aug. 13, 1981, 95 Stat. 560, 561, effective Oct. 1, 1981.

-End-

-CITE-

42 USC Sec. 300d-22

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part B - Formula Grants With Respect to Modifications of State Plans

-HEAD-

Sec. 300d-22. Report by Secretary

-STATUTE-

Not later than October 1, 2008, the Secretary shall report to the appropriate committees of Congress on the activities of the States carried out pursuant to section 300d-11 of this title. Such report

shall include an assessment of the extent to which Federal and State efforts to develop systems of trauma care and to designate trauma centers have reduced the incidence of mortality, and the incidence of permanent disability, resulting from trauma. Such report may include any recommendations of the Secretary for appropriate administrative and legislative initiatives with respect to trauma care.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1222, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2926; amended Pub. L. 103-183, title VI, Sec. 601(d), Dec. 14, 1993, 107 Stat. 2238; Pub. L. 110-23, Sec. 11, May 3, 2007, 121 Stat. 97.)

-MISC1-

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section required Secretary to submit report no later than Oct. 1, 1995.

1993 - Pub. L. 103-183 substituted "1995" for "1992" and inserted after first sentence "Such report shall include an assessment of the extent to which Federal and State efforts to develop systems of trauma care and to designate trauma centers have reduced the incidence of mortality, and the incidence of permanent disability, resulting from trauma."

-End-

PART C

PART C - GENERAL PROVISIONS REGARDING PARTS A AND B

-End-

-CITE-

42 USC Sec. 300d-31

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part C - General Provisions Regarding Parts A and B

-HEAD-

Sec. 300d-31. Definitions

-STATUTE-

For purposes of this part and parts A and B of this subchapter:
(1) Designated trauma center

The term "designated trauma center" means a trauma center designated in accordance with the modifications to the State plan described in section 300d-13 of this title.

(2) State plan regarding emergency medical services

The term "State plan", with respect to the provision of emergency medical services, means a plan for a comprehensive, organized system to provide for the access, response, triage, field stabilization, transport, hospital stabilization, definitive care, and rehabilitation of patients of all ages with respect to emergency medical services.

(3) State

The term "State" means each of the several States, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(4) Trauma

The term "trauma" means an injury resulting from exposure to a mechanical force.

(5) Trauma care component of State plan

The term "trauma care component", with respect to components of the State plan for the provision of emergency medical services, means a plan for a comprehensive health care system, within rural and urban areas of the State, for the prompt recognition, prehospital care, emergency medical care, acute surgical and medical care, rehabilitation, and outcome evaluation of seriously injured patients.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1231, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2926; amended Pub. L. 102-321, title VI, Sec. 602(2), July 10, 1992, 106 Stat. 436; Pub. L. 103-183, title VI, Sec. 601(f)(4), Dec. 14, 1993, 107 Stat. 2239.)

-MISC1-

AMENDMENTS

1993 - Par. (3). Pub. L. 103-183 substituted "Puerto Rico," for "Puerto Rico;".

1992 - Pub. L. 102-321 substituted "this part and parts A and B of this subchapter" for "this subchapter" in introductory provisions.

EFFECTIVE DATE OF 1992 AMENDMENT

Amendment by Pub. L. 102-321 effective July 10, 1992, with provision for programs providing financial assistance, see section 801(b), (d) of Pub. L. 102-321, set out as a note under section 236 of this title.

-End-

-CITE-

42 USC Sec. 300d-32

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part C - General Provisions Regarding Parts A and B

-HEAD-

Sec. 300d-32. Funding

-STATUTE-

(a) Authorization of appropriations

For the purpose of carrying out parts A and B, subject to subsections (b) and (c), there are authorized to be appropriated \$12,000,000 for fiscal year 2008, \$10,000,000 for fiscal year 2009, and \$8,000,000 for each of the fiscal years 2010 through 2012.

(b) Reservation of funds

If the amount appropriated under subsection (a) for a fiscal year is equal to or less than \$1,000,000, such appropriation is available only for the purpose of carrying out part A. If the amount so appropriated is greater than \$1,000,000, 50 percent of such appropriation shall be made available for the purpose of carrying out part A and 50 percent shall be made available for the purpose of carrying out part B.

(c) Allocation of part A funds

Of the amounts appropriated under subsection (a) for a fiscal year to carry out part A -

(1) 10 percent of such amounts for such year shall be allocated for administrative purposes; and

(2) 10 percent of such amounts for such year shall be allocated for the purpose of carrying out section 300d-3 of this title.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1232, as added Pub. L. 101-590, Sec. 3, Nov. 16, 1990, 104 Stat. 2927; amended Pub. L. 102-321, title VI, Sec. 602(3), July 10, 1992, 106 Stat. 436; Pub. L. 103-183, title VI, Sec. 602, Dec. 14, 1993, 107 Stat. 2239; Pub. L. 105-392, title IV, Secs. 401(a)(2), 413, Nov. 13, 1998, 112 Stat. 3587, 3590; Pub. L. 110-23, Sec. 12, May 3, 2007, 121 Stat. 97.)

-MISC1-

AMENDMENTS

2007 - Pub. L. 110-23 amended section generally. Prior to amendment, section related to funding for fiscal years 1994 through 2002.

1998 - Subsec. (a). Pub. L. 105-392, Sec. 413, substituted "through 2002" for "and 1996".

Pub. L. 105-392, Sec. 401(a)(2), amended directory language of Pub. L. 103-183. See 1993 Amendment note below.

1993 - Subsec. (a). Pub. L. 103-183, as amended by Pub. L. 105-392, Sec. 401(a)(2), substituted "For the purpose of carrying out parts A and B of this subchapter, there are authorized to be appropriated \$6,000,000 for fiscal year 1994, and such sums as may be necessary for each of the fiscal years 1995 and 1996" for "For the purpose of carrying out parts A and B of this subchapter, there are authorized to be appropriated \$60,000,000 for fiscal year 1991 and such sums as may be necessary for each of the fiscal years 1992 and 1993".

1992 - Subsec. (a). Pub. L. 102-321 substituted "parts A and B of

this subchapter" for "this subchapter".

EFFECTIVE DATE OF 1998 AMENDMENT

Amendment by section 401(a)(2) of Pub. L. 105-392 deemed to have taken effect immediately after enactment of Pub. L. 103-183, see section 401(e) of Pub. L. 105-392, set out as a note under section 242m of this title.

EFFECTIVE DATE OF 1992 AMENDMENT

Amendment by Pub. L. 102-321 effective July 10, 1992, with provision for programs providing financial assistance, see section 801(b), (d) of Pub. L. 102-321, set out as a note under section 236 of this title.

-End-

-CITE-

42 USC Sec. 300d-33

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE
Part C - General Provisions Regarding Parts A and B

-HEAD-

Sec. 300d-33. Repealed.

-MISC1-

Sec. 300d-33. Repealed. Pub. L. 103-183, title VI, Sec. 601(e), Dec. 14, 1993, 107 Stat. 2239.

Section, act July 1, 1944, ch. 373, title XII, Sec. 1233, as added Nov. 16, 1990, Pub. L. 101-590, Sec. 3, 104 Stat. 2927, related to waiver of requirement regarding purpose of grants.

-End-

PART D

-CITE-

42 USC Part D - Trauma Centers Operating in Areas
Severely Affected by Drug-Related
Violence

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE

Part D - Trauma Centers Operating in Areas Severely Affected by
Drug-Related Violence

-HEAD-

PART D - TRAUMA CENTERS OPERATING IN AREAS SEVERELY AFFECTED BY
DRUG-RELATED VIOLENCE

-End-

-CITE-

42 USC Sec. 300d-41

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE

Part D - Trauma Centers Operating in Areas Severely Affected by
Drug-Related Violence

-HEAD-

Sec. 300d-41. Grants for certain trauma centers

-STATUTE-

(a) In general

The Secretary may make grants for the purpose of providing for the operating expenses of trauma centers that have incurred substantial uncompensated costs in providing trauma care in geographic areas with a significant incidence of violence arising directly or indirectly from illicit trafficking in drugs. Grants under this subsection may be made only to such trauma centers.

(b) Minimum qualifications of centers

(1) Significant incidence of treating certain patients

(A) The Secretary may not make a grant under subsection (a) of this section to a trauma center unless the population of patients that has been served by the center for the period specified in subparagraph (B) includes a significant number of patients who were treated for -

(i) trauma resulting from the penetration of the skin by knives, bullets, or any other implement that can be used as a weapon; or

(ii) trauma that the center reasonably believes results from violence arising directly or indirectly from illicit trafficking in drugs.

(B) The period specified in this subparagraph is the 2-year period preceding the fiscal year for which the trauma center involved is applying to receive a grant under subsection (a) of this section.

(2) Participation in trauma care system operating under certain professional guidelines

The Secretary may not make a grant under subsection (a) of this section unless the trauma center involved is a participant in a system that -

(A) provides comprehensive medical care to victims of trauma in the geographic area in which the trauma center is located;

(B) is established by the State or political subdivision in which such center is located; and

(C)(i) has adopted guidelines for the designation of trauma centers, and for triage, transfer, and transportation policies, equivalent to (or more protective than) the applicable guidelines developed by the American College of Surgeons or utilized in the model plan established under section 300d-13(c) of this title; or

(ii) agrees that such guidelines will be adopted by the system not later than 6 months after the date on which the trauma center submits to the Secretary the application for the grant.

(3) Submission and approval of long-term plan

The Secretary may not make a grant under subsection (a) of this section unless the trauma center involved -

(A) submits to the Secretary a plan satisfactory to the Secretary that -

(i) is developed on the assumption that the center will continue to incur substantial uncompensated costs in providing trauma care; and

(ii) provides for the long-term continued operation of the center with an acceptable standard of medical care, notwithstanding such uncompensated costs; and

(B) agrees to implement the plan according to a schedule approved by the Secretary.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1241, as added Pub. L. 102-321, title VI, Sec. 601, July 10, 1992, 106 Stat. 433.)

-MISC1-

EFFECTIVE DATE

Part effective July 10, 1992, with programs making awards providing financial assistance in fiscal year 1993 and subsequent years effective for awards made on or after Oct. 1, 1992, see section 801(b), (d)(1) of Pub. L. 102-321, set out as an Effective Date of 1992 Amendment note under section 236 of this title.

-End-

-CITE-

42 USC Sec. 300d-42

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE

Part D - Trauma Centers Operating in Areas Severely Affected by
Drug-Related Violence

-HEAD-

Sec. 300d-42. Preferences in making grants

-STATUTE-

(a) In general

In making grants under section 300d-41(a) of this title, the Secretary shall give preference to any application -

(1) made by a trauma center that, for the purpose specified in such section, will receive financial assistance from the State or political subdivision involved for each fiscal year during which payments are made to the center from the grant, which financial assistance is exclusive of any assistance provided by the State or political subdivision as a non-Federal contribution under any Federal program requiring such a contribution; or

(2) made by a trauma center that, with respect to the system described in section 300d-41(b)(2) of this title in which the center is a participant -

(A) is providing trauma care in a geographic area in which the availability of trauma care has significantly decreased as a result of a trauma center in the area permanently ceasing participation in such system as of a date occurring during the 2-year period specified in section 300d-41(b)(1)(B) of this title; or

(B) will, in providing trauma care during the 1-year period beginning on the date on which the application for the grant is submitted, incur uncompensated costs in an amount rendering the center unable to continue participation in such system, resulting in a significant decrease in the availability of trauma care in the geographic area.

(b) Further preference for certain applications

With respect to applications for grants under section 300d-41 of this title that are receiving preference for purposes of subsection (a) of this section, the Secretary shall give further preference to any such application made by a trauma center for which a disproportionate percentage of the uncompensated costs of the center result from the provision of trauma care to individuals who neither are citizens nor aliens lawfully admitted to the United States for permanent residence.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1242, as added Pub. L. 102-321, title VI, Sec. 601, July 10, 1992, 106 Stat. 434.)

-End-

-CITE-

42 USC Sec. 300d-43

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part D - Trauma Centers Operating in Areas Severely Affected by
Drug-Related Violence

-HEAD-

Sec. 300d-43. Certain agreements

-STATUTE-

(a) Commitment regarding continued participation in trauma care system

The Secretary may not make a grant under subsection (a) of section 300d-41 of this title unless the trauma center involved agrees that -

(1) the center will continue participation in the system described in subsection (b) of such section throughout the 3-year period beginning on the date that the center first receives payments under the grant; and

(2) if the agreement made pursuant to paragraph (1) is violated by the center, the center will be liable to the United States for an amount equal to the sum of -

(A) the amount of assistance provided to the center under subsection (a) of such section; and

(B) an amount representing interest on the amount specified in subparagraph (A).

(b) Maintenance of financial support

With respect to activities for which a grant under section 300d-41 of this title is authorized to be expended, the Secretary may not make such a grant unless the trauma center involved agrees that, during the period in which the center is receiving payments under the grant, the center will maintain expenditures for such activities at a level that is not less than the level maintained by the center during the fiscal year preceding the first fiscal year for which the center receives such payments.

(c) Trauma care registry

The Secretary may not make a grant under section 300d-41(a) of this title unless the trauma center involved agrees that -

(1) the center will operate a registry of trauma cases in accordance with the applicable guidelines described in section 300d-41(b)(2)(C) of this title, and will begin operation of the registry not later than 6 months after the date on which the center submits to the Secretary the application for the grant; and

(2) in carrying out paragraph (1), the center will maintain information on the number of trauma cases treated by the center and, for each such case, the extent to which the center incurs uncompensated costs in providing trauma care.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1243, as added Pub. L. 102-321, title VI, Sec. 601, July 10, 1992, 106 Stat. 434.)

-End-

-CITE-

42 USC Sec. 300d-44

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 6A - PUBLIC HEALTH SERVICE
SUBCHAPTER X - TRAUMA CARE

Part D - Trauma Centers Operating in Areas Severely Affected by
Drug-Related Violence

-HEAD-

Sec. 300d-44. General provisions

-STATUTE-

(a) Application

The Secretary may not make a grant under section 300d-41(a) of this title unless an application for the grant is submitted to the Secretary and the application is in such form, is made in such manner, and contains such agreements, assurances, and information as the Secretary determines to be necessary to carry out this part.

(b) Limitation on duration of support

The period during which a trauma center receives payments under section 300d-41(a) of this title may not exceed 3 fiscal years, except that the Secretary may waive such requirement for the center and authorize the center to receive such payments for 1 additional fiscal year.

(c) Limitation on amount of grant

A grant under section 300d-41 of this title may not be made in an amount exceeding \$2,000,000.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1244, as added Pub. L. 102-321, title VI, Sec. 601, July 10, 1992, 106 Stat. 435.)

-End-

-CITE-

42 USC Sec. 300d-45

02/01/2010

-EXPCITE-

TITLE 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER X - TRAUMA CARE

Part D - Trauma Centers Operating in Areas Severely Affected by
Drug-Related Violence

-HEAD-

Sec. 300d-45. Authorization of appropriations

-STATUTE-

For the purpose of carrying out this part, there are authorized to be appropriated \$100,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994. Such authorization of appropriations is in addition to any other authorization of appropriations or amounts that are available for such purpose.

-SOURCE-

(July 1, 1944, ch. 373, title XII, Sec. 1245, as added Pub. L. 102-321, title VI, Sec. 601, July 10, 1992, 106 Stat. 435.)

-End-

PART H

Doesn't Exist???