Public Law 96-538 96th Congress

### An Act

To amend the Public Health Service Act to revise and extend the authorities under that Act relating to national research institutes, and for other purposes.

Dec. 17, 1980 [S. 988]

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That (a) this Act may be cited as the "Health Programs Extension Act of 1980".

(b) Except as otherwise specifically provided, whenever in this Act an amendment or repeal is expressed in terms of an amendment to, or repeal of, a section or other provision, the reference shall be considered to be made to a section or other provision of the Public Health Service Act.

Health Programs Extension Act of 1980. 42 USC 201 note.

# TITLE I—NATIONAL CANCER INSTITUTE AND NATIONAL HEART, LUNG, AND BLOOD INSTITUTE AUTHORIZATIONS

Sec. 101. (a) Section 410(a) (42 U.S.C. 286e(a)) is amended—

(1) by striking out "and" after "1979;"; and

(2) by inserting the following before the period at the end thereof: "; \$1,015,700,000 for the fiscal year ending September 30, 1981; and \$1,109,000,000 for the fiscal year ending September 30, 1982".

(b) Section 410(b) is amended-

(1) by striking out "and" after "1979;"; and

(2) by inserting the following before the period at the end thereof: "; \$112,900,000 for the fiscal year ending September 30, 1981; and \$123,200,000 for the fiscal year ending September 30, 1982".

(c) Section 414(b) (42 U.S.C. 287c(b)) is amended— (1) by striking out "and" after "1979,"; and

(2) by inserting the following before the period at the end thereof: ", \$49,300,000 for the fiscal year ending September 30, 1981, and \$53,800,000 for the fiscal year ending September 30, 1982".

(d) The first sentence of section 419B (42 U.S.C. 287i) is amended—

(1) by striking out "and" after "1979,"; and

(2) by inserting the following before the period at the end thereof: ", \$564,300,000 for the fiscal year ending September 30, 1981, and \$616,100,000 for the fiscal year ending September 30, 1982".

## TITLE II—AMENDMENTS RELATING TO ARTHRITIS, DIABETES, DIGESTIVE DISEASES, AND KIDNEY DISEASES

Sec. 201. (a) The heading of part D of title IV is amended to read as follows:

"PART D—NATIONAL INSTITUTE OF ARTHRITIS, DIABETES, AND DIGES-TIVE AND KIDNEY DISEASES, NATIONAL INSTITUTE OF NEUROLOGI-CAL DISEASES AND STROKE, AND OTHER INSTITUTES".

Repeal.

Sec. 202. Section 431(c) (42 U.S.C. 289a(c)) is repealed. Sec. 203. (a) The heading of section 434 is amended to read as follows:

"NATIONAL INSTITUTE OF ARTHRITIS, DIABETES, AND DIGESTIVE AND KIDNEY DISEASES".

(b) Subsection (a) of section 434 (42 U.S.C. 289c-1(a)) is amended— (1) by striking out "National Institute of Arthritis, Metabolism, and Digestive Diseases" and inserting in lieu thereof "National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases";

(2) by striking out "National Arthritis, Metabolism, and Digestive Diseases Advisory Council" and inserting in lieu thereof "National Arthritis, Diabetes, and Digestive and Kidney Dis-

eases Advisory Council"; and

(3) by striking out the last sentence.(c) Section 434 is amended by striking out subsections (b) through

(e) and inserting in lieu thereof the following:

"(b) In the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases (hereinafter referred to in this section as the 'Institute') there shall be an Associate Director for Arthritis and Musculoskeletal and Skin Diseases, an Associate Director for Diabetes, Endocrinology, and Metabolic Diseases, an Associate Director for Digestive Diseases, and an Associate Director for Kidney, Urologic, and Hematologic Diseases who, under the supervision of the Director of the Institute, shall be responsible for—

"(1) developing a coordinated plan (including recommendations for expenditures) for each of the national research institutes within the National Institutes of Health with respect to research and training concerning the diseases for which the

positions of the Associate Directors were created;

"(2) assessing the adequacy of management approaches for the activities within such institutes concerning such diseases and developing improved approaches if needed;

"(3) monitoring and reviewing expenditures by such institutes

concerning such diseases; and

"(4) identifying research opportunities concerning such diseases and recommending ways to utilize such opportunities. The Director of the Institute shall transmit to the Director of the National Institutes of Health the plans, recommendations, and reviews of the Associate Directors under paragraphs (1) through (4) together with such comments and recommendations as the Director

of the Institute determines appropriate.

"(c) There are established within the Advisory Council of the Institute a subcommittee on diabetes and endocrine and metabolic diseases, a subcommittee on arthritis and musculoskeletal and skin diseases, a subcommittee on digestive diseases, and a subcommittee on kidney, urologic, and hematologic diseases. The subcommittees shall be composed of members of the Advisory Council who are outstanding in the diagnosis, prevention, and treatment of the diseases for which the subcommittees are established and members of the Advisory Council who are leaders in the fields of education and public affairs. The subcommittees are authorized to review applications made to the Director for grants for research and training

Comments and recommendations, transmittal to NIH.

Subcommittees, establishment.

projects relating to the diagnosis, prevention, and treatment of the diseases for which the subcommittees are established and shall recommend to the Advisory Council those applications and contracts that the subcommittees determine will best carry out the purposes of this part. The subcommittees shall also review and evaluate the and endocrine and metabolic diseases, arthritis, musculoskeletal and skin diseases, digestive diseases, and kidney, urologic, and hematologic diseases programs under this part and recommend to the Advisory Council such changes in the administration of such programs as the subcommittees determine are necessary.

"(d) The Director of the Institute, acting through the Associate Director for Arthritis and Musculoskeletal and Skin Diseases, the Associate Director for Kidney, Urologic, and Hematologic Diseases, the Associate Director for Digestive Diseases, and the Associate Director for Diabetes, Endocrinology, and Metabolic Diseases, shall-

"(1) carry out programs of support for research and training (other than training for which National Research Service Awards may be made under section 472) in the diagnosis, 42 USC 2891-1. prevention, and treatment of arthritis, digestive diseases, diabetes mellitus, and endocrine and metabolic, kidney, urologic, and hematologic diseases, including support for training in medical schools, graduate clinical training, graduate training in epidemiology, epidemiology studies, clinical trials, and interdisciplinary research programs; and

"(2) establish programs of evaluation, planning, and dissemination of knowledge related to such research and training." (d) Subsection (f) of section 434 is redesignated as subsection (e) and 42 USC 289c-1. is amended (1) by striking out "a report" in the first sentence and inserting in lieu thereof "an annual report", and (2) by amending the second sentence to read as follows: "The annual report shall include a

description of the Institute's activities-

'(1) under the current Arthritis Plan prepared under the

National Arthritis Act of 1974,

"(2) under the current diabetes plan prepared under the National Diabetes Mellitus Research and Education Act, and "(3) under the current digestive diseases plan prepared under the Arthritis, Diabetes, and Digestive Diseases Amendments of

Sec. 204. (a) The heading of section 435 is amended to read as follows:

"DIABETES RESEARCH AND TRAINING CENTERS; DIABETES DATA GROUP AND CLEARINGHOUSE".

(b) The first sentence of subsection (a) of section 435 (42 U.S.C. 289c-2(a)) is amended by striking out "National Commission on Diabetes" and inserting in lieu thereof "the current diabetes plan under the National Diabetes Mellitus Research and Education Act".

(c) Subsection (a) of section 435 is amended by adding at the end the following: "A center may use funds provided under this subsection to provide stipends for health professionals enrolled in training programs described in clause (2)(B)."

(d) Subsection (b) of section 435 is amended by striking out "September 30" and inserting in lieu thereof "November 30".

(e) Subsection (c) of section 435 is redesignated as subsection (d) and

the following new subsection is inserted after subsection (b):

"(c)(1) The Secretary, with the Associate Director for Diabetes, Endocrinology, and Metabolic Diseases, shall (A) establish the

42 USC 201 note.

42 USC 201 note.

42 USC 201 note.

Diabetes Data Group and the Diabetes Information Clearinghouse. and (B) through such entities, establish the diabetes data system for the collection, storage, analysis, retrieval, and dissemination of data concerning diabetes, including, where possible, data involving general populations for the purpose of detecting individuals with a risk of developing diabetes.

Appropriation authorization.

"(2) There is authorized to be appropriated to carry out this subsection \$2,000,000 for the fiscal year ending September 30, 1981; \$2,000,000 for the fiscal year ending September 30, 1982; and \$2,000,000 for the fiscal year ending September 30, 1983.".

Ante, p. 3185.

(f) Subsection (d) of section 435 (as so redesignated) is amended (1) by striking out "this section" and inserting in lieu thereof "this section (other than subsection (c))", (2) by striking out "and" after "1979,", and (3) by inserting before the period a comma and the following: "\$14,000,000 for the fiscal year ending September 30, 1981, \$17,000,000 for the fiscal year ending September 30, 1982, and \$20,000,000 for the fiscal year ending September 30, 1983"

Repeals.

SEC. 205. Sections 436, 437, and 440A (42 U.S.C. 289c-3, 289c-4, and 289c-8) are repealed, and the following section is inserted after section 435:

"INTERAGENCY COORDINATING COMMITTEES

42 USC 289c-3.

"Sec. 436. (a) For the purpose of-

"(1) better coordinating the research activities of all the national research institutes relating to arthritis, diabetes melli-

tus, and digestive diseases; and

(2) coordinating those aspects of all Federal health programs and activities relating to such diseases to assure the adequacy and technical soundness of such programs and activities and to provide for the full communication and exchange of information necessary to maintain adequate coordination of such programs

and activities,

Establishment.

the Secretary shall establish an Arthritis Interagency Coordinating Committee, a Diabetes Mellitus Interagency Coordinating Committee, and a Digestive Diseases Interagency Coordinating Committee (hereinafter in this section individually referred to as a 'Committee').

Membership.

"(b) Each Committee shall be composed of the Directors (or their designees) of each of the national research institutes and divisions involved in research regarding the diseases with respect to which the Committee is established, the Associate Director of the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases for the diseases for which the Committee is established, the chief medical director (or the director's designee) of the Veterans' Administration, and a medical officer designated by the Department of Defense, and shall include representation from all other Federal departments and agencies whose programs involve health functions or responsibilities relevant to such diseases, as determined by the Secretary. Each Committee shall be chaired by the Director of the National Institutes of Health (or the Director's designee). Each Committee shall meet at the call of the chairman, but not less often than four times a year.

"(c) Each Committee shall prepare an annual report for—

"(1) the Secretary,

"(2) the Director of the National Institutes of Health, and "(3) the Advisory Board established under section 437 for the

disease for which the Committee was established, detailing the work of the Committee in the fiscal year for which the report was prepared in carrying out the coordinating activities

Report.

Supra.

described in paragraphs (1) and (2) of subsection (a). Such report shall be submitted not later than the sixtieth day after the end of each fiscal year."

SEC. 206, Sections 436A and 440 (42 U.S.C. 289c-3a and 289c-7) are Repeals. repealed, and the following new section is inserted after the section added by section 205 of this title:

42 USC 289c-4.

"DIABETES, ARTHRITIS, AND DIGESTIVE DISEASES ADVISORY BOARDS

"Sec. 437. (a) The Secretary shall establish the National Arthritis Establishment. Advisory Board, the National Diabetes Advisory Board, and the National Digestive Diseases Advisory Board (hereinafter in this section individually referred to as an 'Advisory Board').

"(b) Each Advisory Board shall be composed of eighteen appointed

members and nonvoting, ex officio members as follows:

"(1) The Secretary shall appoint—
"(A) twelve members from individuals who are scientists, physicians, and other health professionals, who are not officers or employees of the United States, and who represent the specialities and disciplines relevant to the diseases with respect to which the Advisory Board is established; and

"(B) six members from the general public who are knowledgeable with respect to such diseases, including at least one member who is a person who suffers from the disease and one member who is a parent of a person who suffers from the disease.

Of the appointed members, at least five shall by virtue of training or experience be knowledgeable in health education, nursing, data systems, public information, or community pro-

gram development.

"(2) The following shall be ex officio members of each Advisory Board: The Assistant Secretary for Health, the Director of the National Institutes of Health, the Director of the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases, the Director of the Center for Disease Control, the chief medical director of the Veterans' Administration, a medical officer designated by the Department of Defense (or the designees of such ex officio members), the Associate Director of the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases for the diseases for which the Board is established, and such other officers and employees of the United States as the Secretary deems necessary for the Advisory Board to carry out its functions. In the case of the National Diabetes Advisory Board, the following shall also be ex officio members: The Director of the National Heart, Lung, and Blood Institute, the Director of the National Eye Institute, the Director of the National Eye Institute, the Director of the National Institute of Child Health and Human Development, the Administrators of the Health Boscources Administrators and the Administrator of the Health Resources Administration, and the Administrator of the Health Services Administration (or their designees of such ex officio members).

"(c) Members of an Advisory Board who are officers or employees of the Federal Government shall serve as members of the Advisory Board without compensation in addition to that received in their regular public employment. Other members of the Board shall receive compensation at rates not to exceed the daily equivalent of the annual rate in effect for grade GS-18 of the General Schedule for each day (including traveltime) they are engaged in the performance

of their duties as members of the Board.

Compensation.

5 USC 5332 note.

"(d) The term of office of an appointed member of an Advisory Board is three years, except that no term of office may extend beyond the expiration of the Advisory Board. Any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of such term. A member may serve after the expiration of the member's term until a successor has taken office. If a vacancy occurs in an Advisory Board, the Secretary shall make an appointment to fill the vacancy not later than ninety days from the date the vacancy occurs. In the case of the National Diabetes Advisory Board and the National Arthritis Advisory Board, six of the members of each such Advisory Board whose terms expired on September 30, 1980, shall be reappointed for a term of three years.

"(e) The members of each Advisory Board shall select a chairman

from among the appointed members.

"(f) The Secretary shall, after consultation with and consideration of the recommendations of an Advisory Board, provide the Advisory Board with an executive director and one other professional staff member. In addition, the Secretary shall, after consultation with and consideration of the recommendations of the Advisory Board, provide the Advisory Board with such additional professional staff members, such clerical staff members, and (through contracts or other arrangements) with such administrative support services and facilities, such information, and such services of consultants, as the Secretary determines are necessary for the Advisory Board to carry out its functions.

"(g) Each Advisory Board shall meet at the call of the chairman or upon request of the Director of the National Institute for Arthritis, Diabetes, and Digestive and Kidney Diseases, but not less often than four times a year.

"(h) Each Advisory Board shall-

"(1) review and evaluate the implementation of the plan referred to in section 434(e) regarding the diseases with respect to which the Advisory Board was established;

"(2) periodically update the plan referred to in paragraph (1) to

ensure its continuing relevance;

"(3) for the purpose of assuring the most effective use and organization of resources respecting such diseases, advise and make recommendations to Congress, the Secretary, the Director of the National Institutes of Health, the Director of the National Institute for Arthritis, Diabetes, and Digestive and Kidney Diseases, and the heads of other appropriate Federal agencies for the implementation of such plan; and

"(4) maintain liaison with other advisory bodies related to Federal agencies involved in the implementation of such plan, the Coordinating Committee for such diseases, and with key non-Federal entities involved in activities affecting the control of such diseases.

"(i) In carrying out its functions, the Advisory Board may establish subcommittees, convene workshops and conferences, and collect data. Such subcommittees may be composed of Advisory Board members and nonmember consultants with expertise in the particular area addressed by such subcommittees. The subcommittees may hold such

meetings as are necessary to enable them to carry out their activities.

"(j) Each Advisory Board shall submit to the Secretary and Con-

gress an annual report which-

"(1) describes the Advisory Board's activities in the fiscal year for which the report is made;

Meetings.

Ante, p. 3185.

Report.

"(2) describes and evaluates the progress made during such year in research, treatment, education, and training with respect to the diseases with respect to which the Advisory Board was established:

"(3) summarizes and analyzes expenditures made by the Federal Government for activities respecting such diseases in the

fiscal year for which the report is made; and

"(4) contains the Advisory Board's recommendations, if any,

for changes in the plan referred to in subsection (h)(1).

"(k) For each Advisory Board there is authorized to be appropriated Appropriation \$300,000 for the fiscal year ending September 30, 1981; \$300,000 for the fiscal year ending September 30, 1982; and \$300,000 for the fiscal year ending September 30, 1983.

"(1) Each Advisory Board shall expire on September 30, 1983.".

Sec. 207. (a) Subsection (a) of section 438 (42 U.S.C. 289c-5a(a)) is 42 USC 289c-5. amended by striking out ", acting through the Assistant Secretary for Health,".

(b) Subsection (b) of such section is amended (1) by striking out "and" at the end of paragraph (4), (2) by striking out the period at the end of paragraph (5) and inserting in lieu thereof "; and", and (3) by adding after paragraph (5) the following:

'(6) projects for the investigation into the epidemiology of all forms and aspects of arthritis, including investigations into the social, environmental, behavioral, nutritional, and genetic determinants and influences involved in the epidemiology of

arthritis."

(c) Paragraphs (2) and (3) of subsection (d) of such section are each amended by inserting before the period a comma and the following: 'and for each of the next 3 fiscal years".

Sec. 208. (a) Subsection (a) of section 439 (289c-6(a)) is amended by 42 USC 289c-6.

striking out ", acting through the Assistant Secretary for Health".

(b) Subsection (b) of such section is amended by adding after and below paragraph (2) the following: "A center may use funds provided under this subsection to provide stipends for health professionals enrolled in training programs described in paragraph (2)(B).".

(c) Subsection (e) of such section is amended by striking out "not later than four months after the end of each fiscal year" and inserting in lieu thereof "on or before November 30 of each year".

(d) Subsection (f) of such section is repealed and subsection (g) is redesignated as subsection (f) and amended (1) by striking out "and" after "1979,"; and (2) by inserting before the period a comma and the following: "\$14,000,000 for the fiscal year ending September 30, 1981, \$17,000,000 for the fiscal year ending September 30, 1982, and \$20,000,000 for the fiscal year ending September 30, 1983"

SEC. 209. The following section is inserted after section 439:

#### "INFORMATION AND EDUCATION CENTER FOR DIGESTIVE DISEASES

"SEC. 440. The Secretary, acting through the Director of the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases, shall establish an information and education center for digestive diseases (1) to identify, collect, analyze, and disseminate information respecting the diseases, and (2) to serve as a national educational resource for patients with such diseases and their families, physicians, and other health professionals.".

authorization.

Establishment. 42 USC 289c-7.

#### TITLE III—HEALTH PLANNING AMENDMENTS

SEC. 301. The second sentence of section 1501(b)(1) (42 U.S.C. 300k-1(b)(1)) is amended by striking out "in" and inserting in lieu thereof "including those in"

SEC. 302. Effective with respect to fiscal years beginning after September 30, 1981, section 1516(d)(3) (42 U.S.C. 3001-5(d)(3)) is amended to read as follows:

"(3) Notwithstanding subsection (c)(1), if the total of the amounts appropriated under paragraph (1) for any fiscal year (reduced by the amount to be retained by the Secretary for use under paragraph (2)) is less than the amount required to make grants to each health systems agency designated under section 1515(c) in the amount prescribed for such agency by subsection (c)(1), the Secretary shall make a pro rata reduction in the amount of the grant to each such agency as follows:

"(A) The Secretary shall compute the amount of the grant each such agency would be entitled to receive under such subsection if the dollar limit prescribed by subparagraph (A)(ii) of such subsec-

tion did not apply.

"(B) The Secretary shall reduce on a pro rata basis the amount of the grant to each such agency computed under subparagraph (A) of this paragraph so that the total amount of such grants equals the total of the amounts appropriated for such fiscal year (as so reduced), except that—

"(i) the amount of the grant to any such agency may not

exceed \$3,750,000,

"(ii) to the extent of available appropriations, no such agency shall receive a grant in an amount less than the amount prescribed by subparagraph (C) of subsection (c)(1) for such fiscal year, and

"(iii) if the total of the appropriations for the fiscal year

ending September 30, 1982, for such grants—
"(I) is equal to or greater than t "(I) is equal to or greater than the total of the appropriations for such grants for the preceding fiscal year, no such agency shall receive a grant in an amount less than the amount of the grant it received in such preceding fiscal year unless the population of the area for which it is designated has decreased, unless the level of non-Federal funds on which its grant is computed had decreased, or unless the amount available for its grant is decreased because of an increase in the minimum grant prescribed by subsection (c)(1)(C), or

"(II) is less than the total of the appropriations for such grants for the preceding fiscal year, no such agency shall receive a grant in an amount greater than the amount of the grant it received in such preceding fiscal year unless the population of the area for which it is designated has increased, unless the level of non-Federal funds on which its grant is computed has increased, or unless the amount of its grant is increased under

subsection (c)(1)(C)."

Sec. 303. (a) Section 129(b)(2)(A) of Public Law 96-79 (93 Stat. 630) is amended by striking out "Health Planning and Resources Development Amendments of 1979" and inserting in lieu thereof "Health Programs Extension Act of 1980"

(b) Section 1521(d)(1)(B)(i) (42 U.S.C. 300m(d)(1)(B)(i)) is amended by striking out "Health Planning and Resources Development Amendments of 1979" and inserting in lieu thereof "Health Programs

Extension Act of 1980"

(c) Section 117(c) of the Health Planning and Resources Development Amendments of 1979 (93 Stat. 620) is amended by striking out

42 USC 3001-4.

Grant, prorata reduction.

42 USC 300n-6 note.

Ante, p. 3183.

Ante, p. 3183.

42 USC 300m-6 note.

"February 1, 1982" and inserting in lieu thereof "February 1, 1983".

Sec. 304. Section 124(c) of Public Law 96-79 (93 Stat. 627) is 42 USC 300m-3. amended to read as follows:

"(c)(1) Section 1524(b)(1)(C) is amended by striking out 'one-third' 42 USC 300m-3.

and inserting in lieu thereof 'one-half'.

"(2) Section 1524(b)(1)(D) is amended (A) by striking out 'two' and inserting in lieu thereof 'one', and (B) by striking out 'an ex officio' and inserting in lieu thereof 'a nonvoting, ex officio'.'

SEC. 305. The first sentence of section 1524(c)(6) (42 U.S.C. 300m-3(c)(6)) is amended by striking out "section 409" and inserting

in lieu thereof "section 409 or 410"

SEC. 306. Section 1527(b)(3)(B) (42 U.S.C. 300m-6(b)(3)(B)) is Certificate of amended (1) by striking out "that (i)" and inserting in lieu thereof need program. "that", (2) by striking out ", which intends to acquire the controlling interest or which intends to use the facility is" and inserting in lieu thereof "which intends to acquire the controlling interest in or use the facility is (i)", (3) by striking out "and (ii)" and inserting in lieu thereof "and", and (4) by striking out "or the requirements of clauses (i) and (ii) of subparagraph (B) of paragraph (1)" and inserting in lieu thereof ", or (ii) a health care facility which meets the requirements of clauses (i), (ii), and (iii) of subparagraph (B) of paragraph (1) and with respect to its patients meets the requirements of clause (iv) of such subparagraph".

SEC. 307. Section 1527 (42 U.S.C. 300m-6) is amended by adding at

the end the following new subsection:

"(h)(1) Subsection (a) does not require a certificate of need program to require a health care facility to obtain a certificate of need for the acquisition of major medical equipment to be used solely for research, institutional health services to be offered solely for research, or the obligation of a capital expenditure to be made solely for research if the acquisition, offering, or obligation does not-

(A) affect the charges of the facility for the provision of medical or other patient care services other than the services

which are included in the research:

"(B) substantially change the bed capacity of the facility; or "(C) substantially change the medical or other patient care services of the facility which were offered before the acquisition,

offering, or obligation.

"(2)(A) Before a health care facility acquires major medical equipment to be used solely for research, offers an institutional health service solely for research, or obligates a capital expenditure solely for research, such health care facility shall notify in writing the State Agency of the State in which such facility is located of such facility's intent and the use to be made of such medical equipment, institutional health service, or capital expenditure.

"(B) Paragraph (1) does not apply with respect to the acquisition of major medical equipment, the offering of institutional health serv-

ices, or the obligation of a capital expenditure if-

"(i) the notice required by subparagraph (A) is not filed with the State Agency with respect to such acquisition, offering, or

obligation, or

"(ii) the State Agency finds, within 60 days after the date it receives a notice in accordance with subparagraph (A) respecting the acquisition, offering, or obligation, that the acquisition, offering, or obligation will have the effect or make a change

described in subparagraph (A), (B), or (C) of paragraph (1). "(3) If major medical equipment is acquired, an institutional health service is offered, or a capital expenditure is obligated and a certificate of need is not required for such acquisition, offering, or obligation as provided in paragraph (1), such equipment or service or equipment or facilities acquired through the obligation of such capital expenditure may not be used in such a manner as to have the effect or to make a change described in subparagraph (A), (B), or (C)

Major medical equipment: acquisition, conditions.

State Agency of the State, notification.

of paragraph (1) unless the State Agency issues a certificate of need

approving such use.

"Solely for research.

'(4) For purposes of this subsection, the term 'solely for research' includes patient care provided on an occasional and irregular basis and not as part of a research program.".

SEC. 308. The last sentence of section 1531(3) (42 U.S.C. 300n(3)) is amended (1) by striking out "An individual" and inserting in lieu thereof "Notwithstanding subparagraph (B), an individual", and (2)

by striking out "an entity" and inserting in lieu thereof "one or more entities"

Sec. 309. Section 1531(5) (42 U.S.C. 300n(5)) is amended by striking out "maintained or developed by the Department of Commerce and

Sec. 310. Section 1532(b)(12)(D) (42 U.S.C. 300n-l(b)(12)(D)) is amended by striking out "administratively".

#### TITLE IV—HEALTH PROFESSIONS PROGRAMS

SEC. 401. The first sentence of section 728(a) (42 U.S.C. 294a(a)) is amended by inserting a comma before the period and the following: "and for the next fiscal year".

SEC. 402. (a) Section 731(a)(1)(A) (42 U.S.C. 294d(a)(1)(A)) is amended (1) by inserting "and" at the end of clause (iv), and (2) by striking out

clause (v) and redesignating clause (vi) as clause (v).

(b) Section 731(b) is amended by striking out "12 percent per annum on the unpaid principal balance of the loan" and inserting in lieu thereof "the average of the bond equivalent rates of the 91-day Treasury bills auctioned for the previous quarter plus 31/2 percentage points, rounded to the next higher one-eighth of 1 percent"

SEC. 403. (a) Section 753(a)(2) (42 U.S.C. 294v(a)(2)) is amended— (1) by striking out "(A)" after "designated under section 332)

which"

(2) by striking out ", and" after "section 333(c)"; and

(3) by striking out subclause (B) thereof and inserting in lieu

thereof a period.

(b) Section 753(a) is amended by striking out the last sentence. Sec. 404. Section 212(j)(2)(A) of the Immigration and Nationality Act (8 U.S.C. 1182(j)(2)(A)) is amended by striking out "1980" and inserting in lieu thereof "1981".

### TITLE V—NEUROLOGICAL RESEARCH

42 USC 289 note.

Review.

SEC. 501. (a) The Secretary of Health and Human Services shall enter into a contract, in accordance with subsection (b), with a private, nonprofit entity pursuant to which such entity shall—
(1) conduct a general review of past and ongoing neurological

(2) include, in the review described in paragraph (1), a review of past and ongoing research regarding spinal cord regeneration following acute and chronic damage to the spinal cord;

(3) identify those areas of neurological research which appear

to be the most promising;

(4) prepare an outline of a 5-year plan for neurological research, including (A) recommendations regarding the resources needed to effectively implement such a plan, and (B) specific recommendations with respect to spinal cord regeneration research; and

(5) transmit to the Secretary a report summarizing its findings and recommendations.

care of need is not required for such acquisition, officing, or obligation as provided in paragraph (it such equipment or service or equipment or familias arguines through the obligation of such capital expenditure day and he used in such a mainer as to have the (D) or (d) (A) digargranders in budgeston as a same or to toolin

5-year plan out-

Report.

(b) The Secretary shall enter into the contract described in subsection (a) with the Institute of Medicine of the National Academy of Science, except that, if the Institute of Medicine of the National Academy of Science declines to enter into such contract after a reasonable period of time determined by the Secretary, the Secretary shall enter into such contract with any other private, nonprofit entity which the Secretary has determined is qualified to carry out the terms of such contract.

(c) The report described in subsection (a)(5) shall be transmitted to the Secretary no later than 12 months after the date of the enactment

(d) The authority of the Secretary to enter into a contract under this section shall be effective for any fiscal year only to such extent or in such amounts as are provided in advance by appropriation Acts.

Approved December 17, 1980. outer than members of the advisory panel, excitented receiving

#### LEGISLATIVE HISTORY:

HOUSE REPORTS: No. 96-997 accompanying H.R. 7036 (Comm. on Interstate and Foreign Commerce) and No. 96-1478 (Comm. of Conference).

SENATE REPORT No. 96-714 (Comm. on Labor and Human Resources).

CONGRESSIONAL RECORD, Vol. 126 (1980):

June 19, considered and passed Senate.

Aug. 28, H.R. 7036 considered and passed House; passage vacated and S. 988, accorded passed in light.

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Dec. 1, Senate agreed to conference report.

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Dec. 4, House agreed to conference report.