

Public Law 92-449

September 30, 1972
[S. 3442]

AN ACT

To amend the Public Health Service Act to extend and revise the program of assistance under that Act for the control and prevention of communicable diseases.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. This Act may be cited as the "Communicable Disease Control Amendments Act of 1972".

Communicable
Disease Control
Amendments Act
of 1972.

TITLE I—COMMUNICABLE DISEASE CONTROL
PROGRAMS

SEC. 101. Section 317 of the Public Health Service Act (42 U.S.C. 347b) is amended to read as follows:

84 Stat. 988.
42 USC 247b.

"GRANTS FOR VACCINATION PROGRAMS AND OTHER COMMUNICABLE
DISEASE CONTROL PROGRAMS

"SEC. 317. (a) The Secretary may make grants to States and, in consultation with the State health authority, to agencies and political subdivisions of States to assist in meeting the costs of communicable disease control programs. In making a grant under this section, the Secretary shall give consideration to (1) the relative extent, in the area served by the applicant for the grant, of the problems which relate to one or more of the communicable diseases referred to in subsection (h) (1), and (2) the design of the applicant's communicable disease program to determine its effectiveness.

Application
submission.

"(b) (1) No grant may be made under this section unless an application therefor has been submitted to, and approved by, the Secretary. Except as provided in paragraph (2), such application shall be in such form, submitted in such manner, and contain such information, as the Secretary shall by regulation prescribe.

Application
requirements.

"(2) An application for a grant for a fiscal year beginning after June 30, 1973, shall—

"(A) set forth with particularity the objectives (and their priorities, as determined in accordance with such regulations as the Secretary may prescribe) of the applicant for each of the programs he proposes to conduct with assistance from a grant under this section;

"(B) contain assurances satisfactory to the Secretary that, in the fiscal year for which a grant under this section is applied for, the applicant will conduct such programs as may be necessary to develop an awareness in those persons in the area served by the applicant who are most susceptible to the diseases referred to in subsection (h) (1) of the importance of immunization against such diseases, to encourage such persons to seek appropriate immunization, and to facilitate access by such persons to immunization services; and

"(C) provide for the reporting to the Secretary of such information as he may require concerning (i) the problems, in the area served by the applicant, which relate to any communicable disease referred to in subsection (h) (1), and (ii) the communicable disease control programs of the applicant.

"(3) Nothing in this section shall be construed to require any State or any agency or political subdivision of a State to have a communicable disease control program which would require any person, who objects to any treatment provided under such a program, to be treated

or to have any child or ward of his treated under such a program.

“(c) (1) Payments under grants under this section may be made in advance on the basis of estimates or by way of reimbursement, with necessary adjustments on account of underpayments or overpayments, and in such installments and on such terms and conditions as the Secretary finds necessary to carry out the purposes of this section.

Payments.

“(2) The Secretary, at the request of a recipient of a grant under this section, may reduce such grant by the fair market value of any supplies (including vaccines and other preventive agents) or equipment furnished to such recipient and by the amount of the pay, allowances, travel expenses, and any other costs in connection with the detail of an officer or employee of the Government to the recipient when the furnishing of such supplies or equipment or the detail of such an officer or employee is for the convenience of and at the request of such recipient and for the purpose of carrying out the program with respect to which the grant under this section is made. The amount by which any such grant is so reduced shall be available for payment by the Secretary of the costs incurred in furnishing the supplies or equipment, or in detailing the personnel, on which the reduction of such grant is based.

Grant reduction.

“(d) (1) There is authorized to be appropriated \$11,000,000 for the fiscal year ending June 30, 1973, \$11,000,000 for the fiscal year ending June 30, 1974, and \$11,000,000 for the fiscal year ending June 30, 1975, for grants under this section for communicable disease control programs for tuberculosis.

Appropriations.

“(2) There is authorized to be appropriated \$6,000,000 for the fiscal year ending June 30, 1973, \$6,000,000 for the fiscal year ending June 30, 1974, and \$6,000,000 for the fiscal year ending June 30, 1975, for grants under this section for communicable disease control programs for measles.

“(3) There is authorized to be appropriated \$23,000,000 for the fiscal year ending June 30, 1973, \$23,000,000 for the fiscal year ending June 30, 1974, and \$23,000,000 for the fiscal year ending June 30, 1975, for grants under this section for communicable disease control programs other than communicable disease control programs for which appropriations are authorized by paragraph (1) or (2).

“(4) Not to exceed 50 per centum of the amount appropriated for any fiscal year under any of the preceding paragraphs of this subsection may be used by the Secretary for grants for such fiscal year under (A) programs for which appropriations are authorized under any one or more of the other paragraphs of this subsection if the Secretary determines that such use will better carry out the purposes of this section, and (B) section 318.

Limitation.

“(e) The Secretary shall develop a plan under which personnel, equipment, medical supplies, and other resources of the Service and other agencies under his jurisdiction may be effectively utilized to meet epidemics of, or other health emergencies involving, any disease referred to in subsection (h) (1). There is authorized to be appropriated to the Secretary \$5,000,000 for the fiscal year ending June 30, 1973, \$5,000,000 for the fiscal year ending June 30, 1974, and \$5,000,000 for the fiscal year ending June 30, 1975, for costs incurred in utilizing such resources in accordance with such plan.

Post, p. 751.
Emergency plan
development.

“(f) (1) Except as provided in section 318(g), no funds appropriated under any provision of this Act other than subsection (d) may be used to make grants in any fiscal year for communicable disease control programs if (A) grants for such programs are authorized by this section, and (B) all the funds authorized to be appropriated under that subsection for that fiscal year have not been appropriated for that fiscal year and obligated in that fiscal year.

Appropriation.

Post, p. 754.

"(2) No funds appropriated under any provision of this Act other than subsection (e) may be used in any fiscal year for costs incurred in utilizing resources of the Service in accordance with a plan developed in accordance with that subsection if all the funds authorized to be appropriated under that subsection for that fiscal year have not been appropriated for that fiscal year and obligated in that fiscal year.

Annual report to President, submission to Congress.

"(g) The Secretary shall submit to the President for submission to the Congress on January 1 of each year a report (1) on the effectiveness of all Federal and other public and private activities in preventing and controlling the diseases referred to in subsection (h) (1), (2) on the extent of the problems presented by such diseases, (3) on the effectiveness of the activities, assisted under grants under this section, in preventing and controlling such diseases, and (4) setting forth a plan for the coming year for the prevention and control of such diseases.

Definitions.

"(h) For the purposes of this section:

"(1) The term 'communicable disease control program' means a program which is designed and conducted so as to contribute to national protection against tuberculosis, rubella, measles, Rh disease, poliomyelitis, diphtheria, tetanus, whooping cough, or other communicable diseases (other than venereal disease) which are transmitted from State to State, are amenable to reduction, and are determined by the Secretary to be of national significance. Such term includes vaccination programs, laboratory services, and studies to determine the communicable disease control needs of States and political subdivisions of States and the means of best meeting such needs.

"(2) The term 'State' includes the Commonwealth of Puerto Rico, Guam, American Samoa, the Trust Territory of the Pacific Islands, the Virgin Islands, and the District of Columbia.

"(i) Nothing in this section shall limit or otherwise restrict the use of funds which are granted to a State or to an agency or a political subdivision of a State under provisions of Federal law (other than this Act) and which are available for the conduct of communicable disease control programs from being used in connection with programs assisted through grants under this section."

Effective date.

SEC. 102. The amendment made by section 101 of this title shall apply to grants made under section 317 of the Public Health Service Act after June 30, 1972, except that subsection (d) of such section as amended by section 101 shall take effect on the date of enactment of this Act.

TITLE II—VENEREAL DISEASE PREVENTION AND CONTROL

Citation of title.

SEC. 201. This title may be cited as the "National Venereal Disease Prevention and Control Act".

Congressional findings.

SEC. 202. (a) The Congress finds and declares that—

(1) the number of reported cases of venereal disease has reached epidemic proportions in the United States;

(2) the number of patients with venereal disease reported to public health authorities is only a fraction of those treated by physicians;

(3) the incidence of venereal disease is particularly high among individuals in the 20-24 age group, and in metropolitan areas;

(4) venereal disease accounts for needless deaths and leads to such severe disabilities as sterility, insanity, blindness, and crippling conditions:

(5) the number of cases of congenital syphilis, a preventable disease, in infants under one year of age increased by 33½ per centum between 1970 and 1971;

(6) health education programs in schools and through the mass media may prevent a substantial portion of the venereal disease problem; and

(7) medical authorities have no successful vaccine for syphilis or gonorrhea and no blood test for the detection of gonorrhea among the large reservoir of asymptomatic females.

(b) In order to preserve and protect the health and welfare of all citizens, it is the purpose of this Act to establish a national program for the prevention and control of venereal disease.

SEC. 203. Part B of title III of the Public Health Service Act is amended by adding immediately after section 317 thereof the following new section:

58 Stat. 693.
42 USC 243.
Ante, p. 748.

“PROJECTS AND PROGRAMS FOR THE PREVENTION AND CONTROL OF
VENEREAL DISEASE

“SEC. 318. (a) The Secretary may provide technical assistance to appropriate public authorities and scientific institutions for their research, training, and public health programs for the prevention and control of venereal disease.

Technical
assistance.

“(b) (1) The Secretary is authorized to make grants to States, political subdivisions of States, and any other public or nonprofit private entity for projects for the conduct of research, demonstrations, and training for the prevention and control of venereal disease.

Grants.

“(2) For the purpose of carrying out this subsection, there is authorized to be appropriated \$7,500,000 for the fiscal year ending June 30, 1973, and for each of the next two fiscal years.

Appropriations.

“(c) (1) There is authorized to be appropriated \$25,000,000 for the fiscal year ending June 30, 1973, and for each of the next two fiscal years, to enable the Secretary to make grants to State health authorities to assist the States in establishing and maintaining adequate public health programs for the diagnosis and treatment of venereal disease. For purposes of this subsection, the term ‘State’ means each of the several States of the United States, the District of Columbia, the Virgin Islands, Guam, American Samoa, the Trust Territory of the Pacific Islands, and the Commonwealth of Puerto Rico.

“State.”

“(2) Any State desiring to receive a grant under this subsection shall submit to the Secretary a State plan for a public health program for the diagnosis and treatment of venereal disease. Each State plan shall—

State plan re-
quirements.

“(A) provide for the administration or supervision of administration of the State plan by the State health authority;

“(B) set forth the policies and procedures to be followed in the expenditure of the funds paid to the State under this subsection;

“(C) provide that the public health services furnished under the State plan will include the provision of Statewide laboratory services (including dark field microscope techniques for the diagnosis of both gonorrhea and syphilis), which services will be provided in accordance with standards prescribed by regulations, including standards as to the scope and quality of such services;

“(D) contain or be supported by assurances satisfactory to the Secretary that (i) not less than 70 per centum of the funds paid to the State under this subsection will be used to provide and strengthen public health services in its political subdivisions for the diagnosis and treatment of venereal disease; (ii) such funds

will be used to supplement and, to the extent practical, to increase the level of funds that would otherwise be made available for the purposes for which the Federal funds are provided under this subsection and will not supplant any non-Federal funds which would otherwise be available for such purposes; and (iii) the plan is compatible with the total health program of the State;

Review.

“(E) provide that the State health authority will from time to time, but not less often than annually, review and evaluate its State plan approved under this subsection, and submit to the Secretary appropriate modifications thereof;

Reports.

“(F) provide that the State health authority will make such reports, in such form and containing such information, as the Secretary may from time to time reasonably require, and will keep such records and afford such access thereto as the Secretary finds necessary to assure the correctness and verification of such reports;

Recordkeeping.

“(G) provide for such fiscal control and fund accounting procedures as may be necessary to assure the proper disbursement of and accounting for funds paid to the State under this subsection; and

“(H) contain such additional information and assurances as the Secretary may find necessary to carry out the purposes of this subsection.

Approval.

The Secretary shall approve any State plan and any modification thereof which meets the requirements of this paragraph.

State allotments.

“(3) (A) Grants under this subsection shall be made from allotments to States made in accordance with this paragraph. For each fiscal year the Secretary shall, in accordance with regulations, allot the sums appropriated under paragraph (1) for such year among the States on the basis of the incidence of venereal disease in, and the population of, the respective States; except that no State's allotment shall be less than \$75,000 for any fiscal year.

Limitation.**Unobligated funds.**

“(B) Any amount allotted to a State (other than the Virgin Islands, American Samoa, Guam, the Trust Territory of the Pacific Islands, and the Commonwealth of Puerto Rico) under subparagraph (A) for a fiscal year and remaining unobligated at the end of such year shall remain available to such State, for the purposes for which made, for the next fiscal year (and for such year only), and any such amount shall be in addition to the amounts allotted to such State for such purpose for such next fiscal year; except that any such amount, remaining unobligated at the end of the sixth month following the end of such year for which it was allotted, which the Secretary determines will remain unobligated by the close of such next fiscal year, may be reallocated by the Secretary, to be available for the purposes for which made until the close of such next fiscal year, to other States which have need therefor, on such basis as the Secretary deems equitable and consistent with the purposes of this subsection, and any amount so reallocated to a State shall be in addition to the amounts allotted and available to the States for the same period. Any amount allotted under subparagraph (A) to the Virgin Islands, American Samoa, Guam, the Trust Territory of the Pacific Islands, or the Commonwealth of Puerto Rico for a fiscal year and remaining unobligated at the end of such year shall remain available to it for the purposes for which made, for the next two fiscal years (and for such years only), and any such amount shall be in addition to the amounts allotted to it for such purposes for each of such next two fiscal years; except that any such amount, remaining unobligated at the end of the first of such next two years, which the Secretary determines will remain unobligated at the close of the second of such next two years, may be reallocated by the Secretary, to be available for the purposes for which made until the

Reallotment.

close of the second of such next two years, to any other of such named States which have need therefor, on such basis as the Secretary deems equitable and consistent with the purposes of this subsection, and any amount so reallocated to any such named State shall be in addition to any other amounts allotted and available to it for the same period.

“(4) The amount of any grant under this subsection for public health programs under an approved State plan shall be determined by the Secretary, except that no grant for any such program may exceed 90 per centum of its cost (as determined under regulations of the Secretary). Payments under grants under this subsection shall be made from time to time in advance on the basis of estimates by the Secretary or by way of reimbursement, with necessary adjustments on account of previous underpayments or overpayments.

“(d) (1) The Secretary is authorized to make project grants to States and, in consultation with the State health authority, to political subdivisions of States, for—

“(A) venereal disease surveillance activities, including the reporting, screening, and followup of diagnostic tests for, and diagnosed cases of, venereal disease;

“(B) casefinding and case followup activities respecting venereal disease, including contact tracing of infectious cases of venereal disease;

“(C) interstate epidemiologic referral and followup activities respecting venereal disease;

“(D) professional and public venereal disease education activities; and

“(E) such special studies or demonstrations to evaluate or test venereal disease control as may be prescribed by the Secretary.

“(2) For the purpose of carrying out this subsection, there is authorized to be appropriated \$30,000,000 for the fiscal year ending June 30, 1973, and for each of the next two succeeding fiscal years.

“(e) (1) Grants made under subsection (b) or (d) of this section shall be made on such terms and conditions as the Secretary finds necessary to carry out the purposes of such subsection, and payments under any such grants shall be made in advance or by way of reimbursement and in such installments as the Secretary finds necessary.

“(2) Each recipient of a grant under this section shall keep such records as the Secretary shall prescribe, including records which fully disclose the amount and disposition by such recipient of the proceeds of such grant, the total cost of the project or undertaking in connection with which such grant was given or used, and the amount of that portion of the cost of the project or undertaking supplied by other sources, and such other records as will facilitate an effective audit.

“(3) The Secretary and the Comptroller General of the United States, or any of their duly authorized representatives, shall have access for the purpose of audit and examination to any books, documents, papers, and records of the recipients of grants under this section that are pertinent to such grants.

“(4) The Secretary, at the request of a recipient of a grant under this section, may reduce such grant by the fair market value of any supplies or equipment furnished to such recipient and by the amount of pay, allowances, travel expenses, and any other costs in connection with the detail of an officer or employee of the United States to the recipient when the furnishing of such supplies or equipment or the detail of such an officer or employee is for the convenience of and at the request of such recipient and for the purpose of carrying out the program with respect to which the grant under this section is made. The amount by which any such grant is so reduced shall be available for

Amount, limitation.

Advance payments.

Project grants to States.

Appropriation.

Terms and conditions.

Recordkeeping.

Audit.

Grant reduction.

payment by the Secretary of the costs incurred in furnishing the supplies, equipment, or personal services on which the reduction of such grant is based; and, in the case of a grant under subsection (c), such amount shall be deemed a part of the grant to such recipient and shall, for the purposes of that subsection, be deemed to have been paid to such recipient.

Information disclosure.

“(5) All information obtained in connection with the examination, care, or treatment of any individual under any program which is being carried out with a grant made under this section shall not, without such individual’s consent, be disclosed except as may be necessary to provide service to him. Information derived from any such program may be disclosed—

“(A) in summary, statistical, or other form, or

“(B) for clinical or research purposes,

but only if the identity of the individuals diagnosed or provided care or treatment under such program is not disclosed.

Ante, p. 749.

“(f) Except as provided in section 317(d)(4), no funds appropriated under any provision of this Act other than this section may be used to make grants in any fiscal year for programs or projects respecting venereal disease if (1) grants for such programs or projects are authorized by this section, and (2) all the funds authorized to be appropriated under this section for that fiscal year have not been appropriated for that fiscal year and obligated in that fiscal year.

Limitation.

“(g) Not to exceed 50 per centum of the amounts appropriated for any fiscal year under subsections (b), (c), and (d) of this section may be used by the Secretary for grants for such fiscal year under section 317.

Ante, p. 748.

“(h) Nothing in this section shall be construed to require any State or any political subdivision of a State to have a venereal disease program which would require any person, who objects to any treatment provided under such a program, to be treated or to have any child or ward of his treated under such a program.”

TITLE III—PROJECT GRANTS AND CONTRACTS FOR FAMILY PLANNING SERVICES

84 Stat. 1506.
42 USC 300.

SEC. 301. Section 1001(c) of the Public Health Service Act is amended by striking out “\$90,000,000” and inserting “\$111,500,000” in lieu thereof.

Approved September 30, 1972.

Public Law 92-450

September 30, 1972
[H. J. Res. 1304]

JOINT RESOLUTION

Authorizing the President to proclaim October 1, 1972, as
“National Heritage Day”.

National Heritage Day.
Designation authorization.

Resolved by the Senate and House of Representatives of the United States of America in Congress assembled, That the President is hereby authorized and requested to issue a proclamation designating Sunday, October 1, 1972, as “National Heritage Day”, and calling upon the people of the United States, all of us immigrants, to observe such day with appropriate ceremonies and activities.

Approved September 30, 1972.