

Home Health Care and Alzheimer's Disease Amendments of 1990 - Title III

[Public Law 101-557]

[As Amended Through P.L. 108-173, Enacted December 8, 2003]

【Currency: This publication is a compilation of the text of Public Law 101-557. It was last amended by the public law listed in the As Amended Through note above and below at the bottom of each page of the pdf version and reflects current law through the date of the enactment of the public law listed at <https://www.govinfo.gov/app/collection/comps/>】

【Note: While this publication does not represent an official version of any Federal statute, substantial efforts have been made to ensure the accuracy of its contents. The official version of Federal law is found in the United States Statutes at Large and in the United States Code. The legal effect to be given to the Statutes at Large and the United States Code is established by statute (1 U.S.C. 112, 204).】

[(References in brackets **【** are to title 42, United States Code)]

TITLE III—TASK FORCE ON AGING RESEARCH

SEC. 301. [242q] ESTABLISHMENT AND DUTIES.

(a) ESTABLISHMENT.—The Secretary of Health and Human Services shall establish a Task Force on Aging Research.

(b) DUTIES.—With respect to aging research (as defined in section 305), the Task Force each fiscal year shall—

(1) make recommendations to the Secretary specifying the particular projects of research, or the particular categories of research, that should be conducted or supported by the Secretary;

(2) of the projects specified under paragraph (1), make recommendations to the Secretary of the projects that should be given priority in the provision of funds; and

(3) make recommendations to the Secretary of the amount of funds that should be appropriated for such research.

(c) PROVISION OF INFORMATION TO THE PUBLIC.—The Task Force may make available to health professionals, and to other members of the public, information regarding the research described in subsection (b).

SEC. 302. [242q-1] MEMBERSHIP.

(a) COMPOSITION.—The Task Force shall be composed of—

- (1) the Assistant Secretary for Health;
- (2) the Surgeon General of the Public Health Service;
- (3) the Assistant Secretary for Planning and Evaluation;

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(4) the Director of the National Institute on Aging, and the Directors of such other agencies of the National Institutes of Health as the Secretary determines to be appropriate;

(5) the Commissioner of the Administration on Aging;

(6) the Commissioner of Food and Drugs;

(7) the Chief Medical Director of the Department of Veterans Affairs;

(8) the Administrator of the the¹ Alcohol, Drug Abuse, and Mental Health Administration;²

(9) the Administrator of the Centers for Medicare & Medicaid Services;

(10) the Commissioner of Social Security;

(11) the Administrator for Health Care Policy and Research¹;

(12) two Members of the House of Representatives appointed by the Speaker of the House in consultation with the Minority Leader, and two members of the Senate appointed by the Majority Leader in consultation with the Minority Leader, not more than one of whom from each body shall be members of the same political party; and

(13) three members of the general public, to be appointed by the Secretary, that shall include one representative each from—

(A) a nonprofit group representing older Americans;

(B) a private voluntary health organization concerned with the health problems affecting older Americans; and

(C) a nonprofit organization concerned with research related to the health and independence of older Americans.

(b) CHAIR.—The Secretary, acting through either the Assistant Secretary for Health or the Director of the National Institute on Aging, shall serve as the Chair of the Task Force.

(c) QUORUM.—A majority of the members of the Task Force shall constitute a quorum, and a lesser number may hold hearings.

(d) MEETINGS.—The Task Force shall meet periodically at the call of the Chair, but in no event less than twice each year.

(e) COMPENSATION AND EXPENSES.—

(1) COMPENSATION.—Members of the Task Force who are not regular full-time employees of the United States Government shall, while attending meetings and conferences of the Task Force or otherwise engaged in the business of the Task Force (including traveltime), be entitled to receive compensation at a rate fixed by the Secretary, but not exceeding the rate specified at the time of such service under GS-18 of the General Schedules established under section 5332 of title 5, United States Code.

(2) EXPENSES.—While away from their homes or regular places of business on the business of the Task Force, members of such Task Force may be allowed travel expenses, including per diem in lieu of subsistence, as is authorized under section

¹So in law.

²Now the Substance Abuse and Mental Health Services Administration.

¹Section 2 of Public Law 106-129 (113 Stat. 1653) designated such Agency as the Agency for Healthcare Research and Quality.

5703 of title 5, United States Code, for persons employed intermittently in the Government service.

SEC. 303. [242q-2] ADMINISTRATIVE STAFF AND SUPPORT.

The Secretary, acting through either the Assistant Secretary for Health or the Director of the National Institute on Aging, shall appoint an Executive Secretary for the Task Force and shall provide the Task Force with such administrative staff and support as may be necessary to enable the Task Force to carry out subsections (b) and (c) of section 301.

SEC. 304. [242q-4] DEFINITIONS.

For purposes of this title:

(1) AGING RESEARCH.—

(A) The term “aging research” means research on the aging process and on the diagnosis and treatment of diseases, disorders, and complications related to aging, including menopause. Such research includes research on such treatments, and on medical devices and other medical interventions regarding such diseases, disorders, and complications, that can assist individuals in avoiding institutionalization and prolonged hospitalization and in otherwise increasing the independence of the individuals.

(B) For purposes of subparagraph (A), the term “independence”, with respect to diseases, disorders, and complications of aging, means the functional ability of individuals to perform activities of daily living or instrumental activities of daily living without assistance or supervision.

(2) SECRETARY.—The term “Secretary” means the Secretary of Health and Human Services.

(3) TASK FORCE.—The term “Task Force” means the Task Force on Aging Research established under section 301(a).

SEC. 305. [242q-5] AUTHORIZATION OF APPROPRIATIONS.

For the purpose of carrying out this title, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 1991 through 1993.