

ing individuals with Alzheimer's disease and related dementias and facing their families.

(Pub. L. 99-660, title IX, §934, as added Pub. L. 102-507, §7(b)(1)(B), Oct. 24, 1992, 106 Stat. 3285; amended Pub. L. 106-129, §2(b)(2), Dec. 6, 1999, 113 Stat. 1670.)

#### Editorial Notes

##### PRIOR PROVISIONS

A prior section 11261, Pub. L. 99-660, title IX, §934, formerly §947, Nov. 14, 1986, 100 Stat. 3811; renumbered §934, Pub. L. 100-607, title I, §142(c)(2)(B), Nov. 4, 1988, 102 Stat. 3057; Pub. L. 102-54, §13(q)(14)(B), June 13, 1991, 105 Stat. 282, related to research relevant to appropriate services for individuals with Alzheimer's disease and related dementias, prior to repeal by Pub. L. 102-507, §7(b)(1)(B).

##### AMENDMENTS

1999—Subsecs. (a), (b). Pub. L. 106-129 substituted “Director of the Agency for Healthcare Research and Quality” for “Administrator of the Agency for Health Care Policy and Research”.

#### § 11262. Dissemination

The Director of the National Center for Health Services Research and Health Care Technology Assessment shall disseminate the results of research conducted under this part to appropriate professional entities and to the public.

(Pub. L. 99-660, title IX, §935, formerly §948, Nov. 14, 1986, 100 Stat. 3812; renumbered §935, Pub. L. 100-607, title I, §142(c)(2)(B), Nov. 4, 1988, 102 Stat. 3057.)

#### § 11263. Authorization of appropriations

There are authorized to be appropriated to carry out this part such sums as may be necessary for each of the fiscal years 1992 through 1996.

(Pub. L. 99-660, title IX, §936, formerly §949, Nov. 14, 1986, 100 Stat. 3812; renumbered §936, Pub. L. 100-607, title I, §142(c)(2)(B), Nov. 4, 1988, 102 Stat. 3057; Pub. L. 102-507, §7(b)(2), Oct. 24, 1992, 106 Stat. 3286.)

#### Editorial Notes

##### AMENDMENTS

1992—Pub. L. 102-507 amended section generally. Prior to amendment, section read as follows: “To carry out this part, there are authorized to be appropriated \$2,000,000 for each of fiscal years 1988 through 1991.”

#### PART 3—RESPONSIBILITIES OF THE CENTERS FOR MEDICARE & MEDICAID SERVICES

#### Editorial Notes

##### CODIFICATION

Pub. L. 108-173, title IX, §900(e)(5)(A), Dec. 8, 2003, 117 Stat. 2373, amended heading generally. Prior to amendment, heading read as follows: “Responsibilities of Health Care Financing Administration”.

Pub. L. 100-607, title I, §142(c)(2)(D), Nov. 4, 1988, 102 Stat. 3057, redesignated part 4 as 3. Former part 3 redesignated 2.

#### § 11271. Research program and plan

##### (a) Grants for research

The Administrator of the Centers for Medicare & Medicaid Services shall conduct, or make

grants for the conduct of, research relevant to appropriate services for individuals with Alzheimer's disease and related dementias and their families.

##### (b) Preparation of plan; contents; revision

(1) Within 6 months after November 14, 1986, the Administrator of the Centers for Medicare & Medicaid Services shall prepare and transmit to the Chairman of the Council a plan for research to be conducted under (a).<sup>1</sup> The plan shall—

(A) provide for a determination of the types of services required by individuals with Alzheimer's disease and related dementias and their families to allow such individuals to remain living at home or in a community-based setting;

(B) provide for a determination of the costs of providing needed services to individuals with Alzheimer's disease and related dementias and their families, including the expenditures for institutional, home, and community-based services and the source of payment for such expenditures;

(C) provide for an assessment of the adequacy of benefits provided through the Medicare and Medicaid programs and through private health insurance for needed services for individuals with Alzheimer's disease and related dementias and their families; and

(D) provide for a determination of the costs to the Medicare and Medicaid programs and to private health insurers (if available) of providing covered benefits to individuals with Alzheimer's disease and related dementias and their families.

(2) Within one year after transmitting the plan required under paragraph (1), and annually thereafter, the Administrator of the Centers for Medicare & Medicaid Services shall prepare and transmit to the Chairman of the Council such revisions of such plan as the Administrator considers appropriate.

##### (c) Consultation for preparation and revision of plan

In preparing and revising the plan required by subsection (b), the Administrator of the Centers for Medicare & Medicaid Services shall consult with the Chairman of the Council and the heads of agencies within the Department.

(Pub. L. 99-660, title IX, §937, formerly §949A, Nov. 14, 1986, 100 Stat. 3812; renumbered §937, Pub. L. 100-607, title I, §142(c)(2)(B), Nov. 4, 1988, 102 Stat. 3057; amended Pub. L. 108-173, title IX, §900(e)(5)(B), Dec. 8, 2003, 117 Stat. 2373.)

#### Editorial Notes

##### AMENDMENTS

2003—Subsec. (a). Pub. L. 108-173, §900(e)(5)(B)(i), substituted “Centers for Medicare & Medicaid Services” for “National Health Care Financing Administration”.

Subsec. (b)(1). Pub. L. 108-173, §900(e)(5)(B)(ii), substituted “Centers for Medicare & Medicaid Services” for “Health Care Financing Administration” in introductory provisions.

Subsecs. (b)(2), (c). Pub. L. 108-173, §900(e)(5)(B)(iii), (iv), substituted “Centers for Medicare & Medicaid Services” for “Health Care Financing Administration”.

<sup>1</sup> So in original. Probably should be preceded by “subsection”.

**§ 11272. Dissemination**

The Administrator of the Centers for Medicare & Medicaid Services shall disseminate the results of research conducted under this part to appropriate professional entities and to the public.

(Pub. L. 99-660, title IX, §938, formerly §949B, Nov. 14, 1986, 100 Stat. 3812; renumbered §938, Pub. L. 100-607, title I, §142(c)(2)(B), Nov. 4, 1988, 102 Stat. 3057; amended Pub. L. 108-173, title IX, §900(e)(5)(C), Dec. 8, 2003, 117 Stat. 2373.)

**Editorial Notes**

## AMENDMENTS

2003—Pub. L. 108-173 substituted “Centers for Medicare & Medicaid Services” for “Health Care Financing Administration”.

**§ 11273. Authorization of appropriations**

To carry out this part, there are authorized to be appropriated \$2,000,000 for each of fiscal years 1988 through 1991.

(Pub. L. 99-660, title IX, §939, formerly §949C, Nov. 14, 1986, 100 Stat. 3813; renumbered §939, Pub. L. 100-607, title I, §142(c)(2)(B), Nov. 4, 1988, 102 Stat. 3057.)

**§§ 11281, 11282. Transferred****Editorial Notes**

## CODIFICATION

Section 11281, Pub. L. 99-660, title IX, §951, Nov. 14, 1986, 100 Stat. 3813, which provided for establishment of Clearinghouse on Alzheimer’s Disease, was renumbered section 445E of the Public Health Service Act by Pub. L. 100-607, title I, §142(a), Nov. 4, 1988, 102 Stat. 3057, and is classified to section 285e-7 of this title.

Section 11282, Pub. L. 99-660, title IX, §952, Nov. 14, 1986, 100 Stat. 3813, which provided for dissemination project to be conducted by national organization representing individuals with Alzheimer’s disease and related dementias, was renumbered section 445F of the Public Health Service Act by Pub. L. 100-607, title I, §142(a), Nov. 4, 1988, 102 Stat. 3057, and is classified to section 285e-8 of this title.

**§ 11283. Repealed. Pub. L. 100-607, title I, § 142(c)(1)(A), Nov. 4, 1988, 102 Stat. 3057**

Section, Pub. L. 99-660, title IX, §953, Nov. 14, 1986, 100 Stat. 3814, authorized appropriations for fiscal years 1988 through 1991 to carry out program of dissemination of information on Alzheimer’s disease.

SUBCHAPTER V—EDUCATIONAL  
ACTIVITIES**Editorial Notes**

## CODIFICATION

Pub. L. 100-607, title I, §142(c)(1)(C), (D), Nov. 4, 1988, 102 Stat. 3057, redesignated subchapter VII as V, struck out heading for subchapter VI “DISSEMINATION”, consisting of sections 11281 to 11283 of this title, and redesignated former subchapter V as IV.

**§ 11291. Providing information for personnel of Social Security Administration**

(a) The Secretary shall develop a mechanism to ensure the prompt provision of the most current information concerning Alzheimer’s disease

and related dementias to the Commissioner of Social Security, particularly information which will increase the understanding of personnel of the Social Security Administration concerning such disease and dementias.

(b) The Commissioner of Social Security shall ensure that information received under subsection (a) is provided to personnel of the Social Security Administration, particularly personnel involved in the process of determining, for purposes of titles II and XVI of the Social Security Act [42 U.S.C. 401 et seq., 1381 et seq.], whether an individual is under a disability.

(Pub. L. 99-660, title IX, §961, Nov. 14, 1986, 100 Stat. 3814.)

**Editorial Notes**

## REFERENCES IN TEXT

The Social Security Act, referred to in subsec. (b), is act Aug. 14, 1935, ch. 531, 49 Stat. 620. Titles II and XVI of the Social Security Act are classified generally to subchapters II (§401 et seq.) and XVI (§1381 et seq.), respectively, of chapter 7 of this title. For complete classification of this Act to the Code, see section 1305 of this title and Tables.

**§ 11292. Education of public, individuals with Alzheimer’s disease and their families, and health and long-term care providers****(a) Training models grants****(1) Grants**

The Director of the National Institute on Aging may award grants to eligible entities to assist the entities in developing and evaluating model training programs—

(A) for—

- (i) health care professionals, including mental health professionals;
- (ii) health care paraprofessionals;
- (iii) personnel, including information and referral, case management, and in-home services personnel (including personnel receiving support under the Older Americans Act of 1965 (42 U.S.C. 3001 et seq.)), providing supportive services to the elderly and the families of the elderly;

(iv) family caregivers providing care and treatment for individuals with Alzheimer’s disease and related disorders; and

(v) personnel of local organizations (including community groups, business and labor groups, and religious, educational, and charitable organizations) that have traditionally not been involved in planning and developing long-term care services; and

(B) with attention to such variables as—

- (i) curricula development for training and continuing education programs;
- (ii) care setting; and
- (iii) intervention technique.

**(2) Eligible entity**

To be eligible to receive grants under this subsection, an entity shall be—

(A) an educational institution providing training and education in medicine, psychology, nursing, social work, gerontology, or health care administration;