

note set out under section 201 of this title] is deemed to have taken effect immediately after the enactment of Public Law 107-251 [Oct. 26, 2002].”

Pub. L. 108-20, §3(j), Apr. 30, 2003, 117 Stat. 649, provided that: “This section [amending this section] shall take effect as of November 25, 2002.”

EFFECTIVE DATE OF 2002 AMENDMENT

Amendment by Pub. L. 107-296 effective 60 days after Nov. 25, 2002, see section 4 of Pub. L. 107-296, set out as an Effective Date note under section 101 of Title 6, Domestic Security.

EFFECTIVE DATE OF 1996 AMENDMENT

Pub. L. 104-299, §5, Oct. 11, 1996, 110 Stat. 3645, as amended by Pub. L. 104-208, div. A, title I, §101(e) [title V, §521], Sept. 30, 1996, 110 Stat. 3009-233, 3009-275, provided that: “This Act [enacting sections 254b and 254c of this title, amending this section and sections 256c, 1395x, and 1396d of this title, repealing sections 256 and 256a of this title, and enacting provisions set out as notes under sections 201 and 254b of this title] and the amendments made by this Act shall become effective on October 1, 1996.”

[Pub. L. 104-208, div. A, title I, §101(e) [title V, §521], Sept. 30, 1996, 110 Stat. 3009-233, 3009-275, provided that the amendment made by that section is effective on the day after Oct. 11, 1996.]

EFFECTIVE DATE OF 1995 AMENDMENT

Pub. L. 104-73, §5(c), Dec. 26, 1995, 109 Stat. 779, provided that: “If, on the day before the date of the enactment of this Act [Dec. 26, 1995], an entity was deemed to be an employee of the Public Health Service for purposes of section 224(g) of the Public Health Service Act [42 U.S.C. 233(g)], the condition under paragraph (1)(D) of such section (as added by subsection (a) of this section) that an application be approved with respect to the entity does not apply until the expiration of the 180-day period beginning on such date.”

EFFECTIVE DATE OF 1992 AMENDMENT

Pub. L. 102-501, §6, Oct. 24, 1992, 106 Stat. 3272, provided that: “The amendments made by this Act [amending this section] shall take effect on the date of the enactment of this Act [Oct. 24, 1992].”

REPORT ON RISK EXPOSURE OF COVERED ENTITIES

Pub. L. 102-501, §5, Oct. 24, 1992, 106 Stat. 3271, provided that the Attorney General, by Apr. 1, 1995, and in consultation with the Secretary of Health and Human Services, was to submit a report to Congress on the medical malpractice liability claims experience of entities subject to subsec. (g) of this section, including their risk exposure and the effect of liability protections on costs incurred.

§ 234. Health care professionals assisting during a public health emergency

(a) Limitation on liability

Notwithstanding any other provision of law, a health care professional who is a member of the Medical Reserve Corps under section 300hh-15 of this title or who is included in the Emergency System for Advance Registration of Volunteer Health Professionals under section 247d-7b of this title and who—

(1) is responding—

(A) to a public health emergency determined under section 247d(a) of this title, during the initial period of not more than 90 days (as determined by the Secretary) of the public health emergency determination (excluding any period covered by a renewal of such determination); or

(B) to a major disaster or an emergency as declared by the President under section 5170 of this title or under section 1621 of title 50 during the initial period of such declaration;

(2) is alleged to be liable for an act or omission—

(A) during the initial period of a determination or declaration described in paragraph (1) and related to the treatment of individuals in need of health care services due to such public health emergency, major disaster, or emergency;

(B) in the State or States for which such determination or declaration is made;

(C) in the health care professional's capacity as a member of the Medical Reserve Corps or a professional included in the Emergency System for Advance Registration of Volunteer Health Professionals under section 247d-7b of this title; and

(D) in the course of providing services that are within the scope of the license, registration, or certification of the professional, as defined by the State of licensure, registration, or certification; and

(3) prior to the rendering of such act or omission, was authorized by the State's authorization of deploying such State's Emergency System for Advance Registration of Volunteer Health Professionals described in section 247d-7b of this title or the Medical Reserve Corps established under section 300hh-15 of this title, to provide health care services,

shall be subject only to the State liability laws of the State in which such act or omission occurred, in the same manner and to the same extent as a similar health care professional who is a resident of such State would be subject to such State laws, except with respect to the licensure, registration, and certification of such individual.

(b) Volunteer Protection Act

Nothing in this section shall be construed to affect an individual's right to protections under the Volunteer Protection Act of 1997 [42 U.S.C. 14501 et seq.].

(c) Preemption

This section shall supersede the laws of any State that would subject a health care professional described in subsection (a) to the liability laws of any State other than the State liability laws to which such individual is subject pursuant to such subsection.

(d) Definitions

In this section:

(1) The term “health care professional” means an individual licensed, registered, or certified under Federal or State laws or regulations to provide health care services.

(2) The term “health care services” means any services provided by a health care professional, or by any individual working under the supervision of a health care professional, that relate to—

(A) the diagnosis, prevention, or treatment of any human disease or impairment; or

(B) the assessment or care of the health of human beings.

(e) Effective date

(1) In general

This section shall take effect 90 days after June 24, 2019.

(2) Application

This section shall apply to a claim for harm only if the act or omission that caused such harm occurred on or after the effective date described in paragraph (1).

(July 1, 1944, ch. 373, title II, §225, as added Pub. L. 116-22, title II, §208(a), June 24, 2019, 133 Stat. 927.)

Editorial Notes

REFERENCES IN TEXT

The Volunteer Protection Act of 1997, referred to in subsec. (b), is Pub. L. 105-19, June 18, 1997, 111 Stat. 218, which is classified generally to chapter 139 (§14501 et seq.) of this title. For complete classification of this Act to the Code, see Short Title note set out under section 14501 of this title and Tables.

PRIOR PROVISIONS

A former section 234, act July 1, 1944, ch. 373, title II, §225, as added Oct. 27, 1972, Pub. L. 92-585, §5, 86 Stat. 1293; amended Aug. 23, 1974, Pub. L. 93-385, §1, 88 Stat. 741; Apr. 22, 1976, Pub. L. 94-278, title IX, §901, 90 Stat. 415; Sept. 30, 1976, Pub. L. 94-437, title I, §104, 90 Stat. 1403; Oct. 12, 1976, Pub. L. 94-484, title I, §101(t), 90 Stat. 2246, related to Public Health and National Health Service Corps Scholarship Training program, prior to repeal by Pub. L. 94-484, title IV, §408(b)(1), Oct. 12, 1976, 90 Stat. 2281, effective Oct. 1, 1977.

Statutory Notes and Related Subsidiaries

LIMITATION ON LIABILITY FOR VOLUNTEER HEALTH CARE PROFESSIONALS DURING COVID-19 EMERGENCY RESPONSE

Pub. L. 116-136, div. A, title III, §3215, Mar. 27, 2020, 134 Stat. 374, provided that:

“(a) **LIMITATION ON LIABILITY.**—Except as provided in subsection (b), a health care professional shall not be liable under Federal or State law for any harm caused by an act or omission of the professional in the provision of health care services during the public health emergency with respect to COVID-19 declared by the Secretary of Health and Human Services (referred to in this section as the ‘Secretary’) under section 319 of the Public Health Service Act (42 U.S.C. 247d) on January 31, 2020, if—

“(1) the professional is providing health care services in response to such public health emergency, as a volunteer; and

“(2) the act or omission occurs—

“(A) in the course of providing health care services;

“(B) in the health care professional’s capacity as a volunteer;

“(C) in the course of providing health care services that—

“(i) are within the scope of the license, registration, or certification of the volunteer, as defined by the State of licensure, registration, or certification; and

“(ii) do not exceed the scope of license, registration, or certification of a substantially similar health professional in the State in which such act or omission occurs; and

“(D) in a good faith belief that the individual being treated is in need of health care services.

“(b) **EXCEPTIONS.**—Subsection (a) does not apply if—

“(1) the harm was caused by an act or omission constituting willful or criminal misconduct, gross neg-

ligence, reckless misconduct, or a conscious flagrant indifference to the rights or safety of the individual harmed by the health care professional; or

“(2) the health care professional rendered the health care services under the influence (as determined pursuant to applicable State law) of alcohol or an intoxicating drug.

“(c) **PREEMPTION.**—

“(1) **IN GENERAL.**—This section preempts the laws of a State or any political subdivision of a State to the extent that such laws are inconsistent with this section, unless such laws provide greater protection from liability.

“(2) **VOLUNTEER PROTECTION ACT.**—Protections afforded by this section are in addition to those provided by the Volunteer Protection Act of 1997 (Public Law 105-19) [42 U.S.C. 14501 et seq.].

“(d) **DEFINITIONS.**—In this section—

“(1) the term ‘harm’ includes physical, nonphysical, economic, and noneconomic losses;

“(2) the term ‘health care professional’ means an individual who is licensed, registered, or certified under Federal or State law to provide health care services;

“(3) the term ‘health care services’ means any services provided by a health care professional, or by any individual working under the supervision of a health care professional that relate to—

“(A) the diagnosis, prevention, or treatment of COVID-19; or

“(B) the assessment or care of the health of a human being related to an actual or suspected case of COVID-19; and

“(4) the term ‘volunteer’ means a health care professional who, with respect to the health care services rendered, does not receive compensation or any other thing of value in lieu of compensation, which compensation—

“(A) includes a payment under any insurance policy or health plan, or under any Federal or State health benefits program; and

“(B) excludes—

“(i) receipt of items to be used exclusively for rendering health care services in the health care professional’s capacity as a volunteer described in subsection (a)(1); and

“(ii) any reimbursement for travel to the site where the volunteer services are rendered and any payments in cash or kind to cover room and board, if services are being rendered more than 75 miles from the volunteer’s principal place of residence.

“(e) **EFFECTIVE DATE.**—This section shall take effect upon the date of enactment of this Act [Mar. 27, 2020], and applies to a claim for harm only if the act or omission that caused such harm occurred on or after the date of enactment.

“(f) **SUNSET.**—This section shall be in effect only for the length of the public health emergency declared by the Secretary of Health and Human Services (referred to in this section as the ‘Secretary’) under section 319 of the Public Health Service Act (42 U.S.C. 247d) on January 31, 2020 with respect to COVID-19.”

§235. Administration of grants in multigrant projects; promulgation of regulations

For the purpose of facilitating the administration of, and expediting the carrying out of the purposes of, the programs established by subchapters V, VI, and VII,¹ and sections 242b, 246(a), 246(b), 246(c), 246(d),¹ and 246(e)¹ of this title in situations in which grants are sought or made under two or more of such programs with respect to a single project, the Secretary is authorized to promulgate regulations—

(1) under which the administrative functions under such programs with respect to such

¹ See References in Text note below.