

Statutory Notes and Related Subsidiaries**EFFECTIVE DATE OF REPEAL**

Repeal deemed to have taken effect immediately after the enactment of Pub. L. 107-251, see section 3 of Pub. L. 108-163, set out as an Effective Date of 2003 Amendments note under section 233 of this title.

§ 254c-18. Telemedicine; incentive grants regarding coordination among States**(a) In general**

The Secretary may make grants to State professional licensing boards to carry out programs under which such licensing boards of various States cooperate to develop and implement State policies that will reduce statutory and regulatory barriers to telemedicine.

(b) Authorization of appropriations

For the purpose of carrying out subsection (a), there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 2002 through 2006.

(July 1, 1944, ch. 373, title III, § 330L, as added Pub. L. 108-163, § 2(e)(1), Dec. 6, 2003, 117 Stat. 2021.)

Statutory Notes and Related Subsidiaries**EFFECTIVE DATE**

Section deemed to have taken effect immediately after the enactment of Pub. L. 107-251, see section 3 of Pub. L. 108-163, set out as an Effective Date of 2003 Amendments note under section 233 of this title.

§ 254c-19. Pediatric mental health care access grants**(a) In general**

The Secretary, acting through the Administrator of the Health Resources and Services Administration and in coordination with other relevant Federal agencies, shall award grants or cooperative agreements to States, political subdivisions of States, and Indian Tribes and Tribal organizations (for purposes of this section, as such terms are defined in section 5304 of title 25) to promote behavioral health integration in pediatric primary care by—

(1) supporting the development of statewide or regional pediatric mental health care telehealth access programs; and

(2) supporting the improvement of existing statewide or regional pediatric mental health care telehealth access programs.

(b) Program requirements**(1) In general**

A pediatric mental health care telehealth access program referred to in subsection (a), with respect to which an award under such subsection may be used, shall—

(A) be a statewide or regional network of pediatric mental health teams that provide support to pediatric primary care sites as an integrated team;

(B) support and further develop organized State or regional networks of pediatric mental health teams to provide consultative support to pediatric primary care sites;

(C) conduct an assessment of critical behavioral consultation needs among pediatric

providers and such providers' preferred mechanisms for receiving consultation, training, and technical assistance;

(D) develop an online database and communication mechanisms, including telehealth, to facilitate consultation support to pediatric practices;

(E) provide rapid statewide or regional clinical telephone or telehealth consultations when requested between the pediatric mental health teams and pediatric primary care providers;

(F) conduct training and provide technical assistance to pediatric primary care providers to support the early identification, diagnosis, treatment, and referral of children with behavioral health conditions;

(G) provide information to pediatric providers about, and assist pediatric providers in accessing, pediatric mental health care providers, including child and adolescent psychiatrists, developmental-behavioral pediatricians, and licensed mental health professionals, such as psychologists, social workers, or mental health counselors and in scheduling and conducting technical assistance;

(H) provide information to pediatric health care providers about available mental health services for children in the community and assist with referrals to specialty care and community or behavioral health resources; and

(I) establish mechanisms for measuring and monitoring increased access to pediatric mental health care services by pediatric primary care providers and expanded capacity of pediatric primary care providers to identify, treat, and refer children with mental health conditions.

(2) Support to schools and emergency departments**(A) In general**

In addition to the activities required under paragraph (1), a pediatric mental health care access program referred to in subsection (a), with respect to which an award under such subsection may be used, may provide information, consultative support, training, and technical assistance to—

(i) emergency departments; and

(ii) State educational agencies, local educational agencies, Tribal educational agencies, and elementary and secondary schools.

(B) Requirements for certain recipients

An entity receiving information, consultative support, training, and technical assistance under subparagraph (A)(ii) shall operate in a manner consistent with, and shall ensure consistency with, the requirements of subsections (a) and (c) of section 7101 of title 20¹ with respect to such information, consultative support, training, and technical assistance.

(3) Pediatric mental health teams

In this subsection, the term “pediatric mental health team” means a team consisting of

¹ See References in Text note below.

at least one case coordinator, at least one child and adolescent psychiatrist, and at least one licensed clinical mental health professional, such as a psychologist, social worker, or mental health counselor, and which may include a developmental-behavioral pediatrician. Such a team may be regionally based.

(c) Application

A State, political subdivision of a State, Indian Tribe, or Tribal organization seeking an award under this section shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require, including a plan for the comprehensive evaluation of activities that are carried out with funds received under such award.

(d) Evaluation

A State, political subdivision of a State, Indian Tribe, or Tribal organization that receives an award under this section shall prepare and submit an evaluation of activities that are carried out with funds received under such award to the Secretary at such time, in such manner, and containing such information as the Secretary may reasonably require, including a process and outcome evaluation.

(e) Access to broadband

In administering awards under this section, the Secretary may coordinate with other agencies to ensure that funding opportunities are available to support access to reliable, high-speed Internet for providers.

(f) Matching requirement

The Secretary may not make an award under this section unless the State, political subdivision of a State, Indian Tribe, or Tribal organization involved agrees, with respect to the costs to be incurred by the State, political subdivision of a State, Indian Tribe, or Tribal organization in carrying out the purpose described in this section, to make available non-Federal contributions (in cash or in kind) toward such costs in an amount that is not less than 20 percent of Federal funds provided in the award.

(g) Technical assistance

The Secretary may—

(1) provide, or continue to provide, technical assistance to recipients of awards under subsection (a); and

(2) award a grant or contract to an eligible public or nonprofit private entity (as determined by the Secretary) for the purpose of providing such technical assistance pursuant to this subsection.

(h) Authorization of appropriations

To carry out this section, there are authorized to be appropriated, \$31,000,000 for each of fiscal years 2023 through 2027.

(July 1, 1944, ch. 373, title III, §330M, as added Pub. L. 114–255, div. B, title X, §10002, Dec. 13, 2016, 130 Stat. 1262; amended Pub. L. 117–159, div. A, title I, §11005, June 25, 2022, 136 Stat. 1321.)

Editorial Notes

REFERENCES IN TEXT

Section 7101 of title 20, referred to in subsec. (b)(2), was in the original “section 4001 of the Elementary and

Secondary Education Act” and was translated as if it had read “section 4001 of the Elementary and Secondary Education Act of 1965” to reflect the probable intent of Congress.

AMENDMENTS

2022—Pub. L. 117–159, §11005(1), made technical amendment to section designation in original Act as added by Pub. L. 114–255, §10002, resulting in no change in text.

Subsec. (a). Pub. L. 117–159, §11005(2), inserted “or cooperative agreements” after “award grants” and substituted “Indian Tribes and Tribal organizations” for “Indian tribes and tribal organizations” in introductory provisions.

Subsec. (b)(1). Pub. L. 117–159, §11005(3)(A)(i), substituted “an award” for “a grant” in introductory provisions.

Subsec. (b)(1)(G). Pub. L. 117–159, §11005(3)(A)(ii), inserted “developmental-behavioral pediatricians,” after “psychiatrists,”.

Subsec. (b)(1)(H). Pub. L. 117–159, §11005(3)(A)(iii), inserted “provide information to pediatric health care providers about available mental health services for children in the community and” before “assist”.

Subsec. (b)(1)(I). Pub. L. 117–159, §11005(3)(A)(iv), substituted “conditions” for “problems”.

Subsec. (b)(2). Pub. L. 117–159, §11005(3)(C), added par. (2). Former par. (2) redesignated (3).

Subsec. (b)(3). Pub. L. 117–159, §11005(3)(B), (D), redesignated par. (2) as (3) and inserted “, and which may include a developmental-behavioral pediatrician” after “or mental health counselor”.

Subsecs. (c), (d). Pub. L. 117–159, §11005(4), (5), substituted “Indian Tribe, or Tribal organization” for “Indian tribe, or tribal organization”, “an award” for “a grant”, and “such award” for “such grant”.

Subsec. (e). Pub. L. 117–159, §11005(6), substituted “awards” for “grants”.

Subsec. (f). Pub. L. 117–159, §11005(4), (7), substituted “make an award” for “award a grant”, “Indian Tribe, or Tribal organization” for “Indian tribe, or tribal organization” in two places, and “the award” for “the grant”.

Subsec. (g). Pub. L. 117–159, §11005(9), added subsec. (g). Former subsec. (g) redesignated (h).

Subsec. (h). Pub. L. 117–159, §11005(8), (10), redesignated subsec. (g) as (h) and substituted “\$31,000,000 for each of fiscal years 2023 through 2027” for “\$9,000,000 for the period of fiscal years 2018 through 2022”.

§ 254c–20. Expanding capacity for health outcomes

(a) Definitions

In this section:

(1) Eligible entity

The term “eligible entity” means an entity that provides, or supports the provision of, health care services in rural areas, frontier areas, health professional shortage areas, or medically underserved areas, or to medically underserved populations or Native Americans, including Indian Tribes, Tribal organizations, and urban Indian organizations, and which may include entities leading, or capable of leading, a technology-enabled collaborative learning and capacity building model or engaging in technology-enabled collaborative training of participants in such model.

(2) Health professional shortage area

The term “health professional shortage area” means a health professional shortage area designated under section 254e of this title.