

ternal morbidity by improving prenatal care, labor care, birthing, and postpartum care services in rural areas. Rural obstetric networks established in accordance with this section may—

(1) develop a network to improve coordination and increase access to maternal health care and assist pregnant women in the areas described in subsection (a) with accessing and utilizing prenatal care, labor care, birthing, and postpartum care services to improve outcomes in birth and maternal mortality and morbidity;

(2) identify and implement evidence-based and sustainable delivery models for providing prenatal care, labor care, birthing, and postpartum care services, including home visiting programs and culturally appropriate care models that reduce health disparities;

(3) develop a model for maternal health care collaboration between health care settings to improve access to care in areas described in subsection (a), which may include the use of telehealth;

(4) provide training for professionals in health care settings that do not have specialty maternity care;

(5) collaborate with academic institutions that can provide regional expertise and help identify barriers to providing maternal health care, including strategies for addressing such barriers; and

(6) assess and address disparities in infant and maternal health outcomes, including among racial and ethnic minority populations and underserved populations in such areas described in subsection (a).

(c) Definitions

In this section:

(1) Eligible entities

The term “eligible entities” means entities providing prenatal care, labor care, birthing, and postpartum care services in rural areas, frontier areas, or medically underserved areas, or to medically underserved populations or Indian Tribes or Tribal organizations.

(2) Frontier area

The term “frontier area” means a frontier county, as defined in section 1395ww(d)(3)(E)(iii)(III) of this title.

(3) Indian Tribes; Tribal organization

The terms “Indian Tribe” and “Tribal organization” have the meanings given the terms “Indian tribe” and “tribal organization” in section 5304 of title 25.

(4) Maternity care health professional target area

The term “maternity care health professional target area” has the meaning described in section 254e(k)(2) of this title.

(d) Report to Congress

Not later than September 30, 2026, the Secretary shall submit to Congress a report on activities supported by grants awarded under this section, including—

(1) a description of activities conducted pursuant to paragraphs (1) through (6) of subsection (b); and

(2) an analysis of the effects of rural obstetric networks on improving maternal and infant health outcomes.

(e) Authorization of appropriations

There are authorized to be appropriated to carry out this section \$3,000,000 for each of fiscal years 2023 through 2027.

(July 1, 1944, ch. 373, title III, §330A-2, as added Pub. L. 117-103, div. P, title I, §142, Mar. 15, 2022, 136 Stat. 798.)

§ 254c-2. Special diabetes programs for type I diabetes

(a) In general

The Secretary, directly or through grants, shall provide for research into the prevention and cure of Type¹ I diabetes.

(b) Funding

(1) Transferred funds

Notwithstanding section 1397dd(a) of this title, from the amounts appropriated in such section for each of fiscal years 1998 through 2002, \$30,000,000 is hereby transferred and made available in such fiscal year for grants under this section.

(2) Appropriations

For the purpose of making grants under this section, there is appropriated, out of any funds in the Treasury not otherwise appropriated—

(A) \$70,000,000 for each of fiscal years 2001 and 2002 (which shall be combined with amounts transferred under paragraph (1) for each such fiscal years);

(B) \$100,000,000 for fiscal year 2003;

(C) \$150,000,000 for each of fiscal years 2004 through 2017;

(D) \$150,000,000 for each of fiscal years 2018 through 2023, to remain available until expended;

(E) \$19,726,027 for the period beginning on October 1, 2023, and ending on November 17, 2023, \$25,890,411 for the period beginning on November 18, 2023, and ending on January 19, 2024, \$20,136,986 for the period beginning on January 20, 2024, and ending on March 8, 2024, and \$130,000,000 for the period beginning on March 9, 2024, and ending on December 31, 2024, to remain available until expended; and

(F) \$39,261,745 for the period beginning on January 1, 2025, and ending on March 31, 2025, to remain available until expended.

(July 1, 1944, ch. 373, title III, §330B, as added Pub. L. 105-33, title IV, §4921, Aug. 5, 1997, 111 Stat. 574; amended Pub. L. 105-34, title XVI, §1604(f)(1)(B), (C), Aug. 5, 1997, 111 Stat. 1098; Pub. L. 106-554, §1(a)(6) [title IX, §931(a)], Dec. 21, 2000, 114 Stat. 2763, 2763A-585; Pub. L. 107-360, §1(a), Dec. 17, 2002, 116 Stat. 3019; Pub. L. 110-173, title III, §302(a), Dec. 29, 2007, 121 Stat. 2514; Pub. L. 110-275, title III, §303(a), July 15, 2008, 122 Stat. 2594; Pub. L. 111-309, title I, §112(1), Dec. 15, 2010, 124 Stat. 3289; Pub. L. 112-240, title VI, §625(a), Jan. 2, 2013, 126 Stat. 2352; Pub. L. 113-93, title II, §204(a), Apr. 1, 2014, 128 Stat. 1046; Pub. L. 114-10, title II, §213(a), Apr. 16, 2015, 129 Stat.

¹ So in original. Probably should not be capitalized.

152; Pub. L. 115-96, div. C, title I, §3102(a), Dec. 22, 2017, 131 Stat. 2049; Pub. L. 115-123, div. E, title IX, §50902(a), Feb. 9, 2018, 132 Stat. 289; Pub. L. 116-59, div. B, title I, §1102(a), Sept. 27, 2019, 133 Stat. 1103; Pub. L. 116-69, div. B, title I, §1102(a), Nov. 21, 2019, 133 Stat. 1136; Pub. L. 116-94, div. N, title I, §402(a), Dec. 20, 2019, 133 Stat. 3114; Pub. L. 116-136, div. A, title III, §3832(a), Mar. 27, 2020, 134 Stat. 434; Pub. L. 116-159, div. C, title I, §2102(a), Oct. 1, 2020, 134 Stat. 729; Pub. L. 116-215, div. B, title II, §1202(a), Dec. 11, 2020, 134 Stat. 1044; Pub. L. 116-260, div. BB, title III, §302(a), Dec. 27, 2020, 134 Stat. 2923; Pub. L. 118-15, div. B, title III, §2322(a), Sept. 30, 2023, 137 Stat. 95; Pub. L. 118-22, div. B, title II, §202(a), Nov. 17, 2023, 137 Stat. 120; Pub. L. 118-35, div. B, title I, §102(a), Jan. 19, 2024, 138 Stat. 5; Pub. L. 118-42, div. G, title I, §102(a), Mar. 9, 2024, 138 Stat. 398; Pub. L. 118-158, div. C, title I, §3102(a), Dec. 21, 2024, 138 Stat. 1763.)

Editorial Notes

AMENDMENTS

2024—Subsec. (b)(2)(E). Pub. L. 118-42 substituted “\$20,136,986 for the period beginning on January 20, 2024, and ending on March 8, 2024, and \$130,000,000 for the period beginning on March 9, 2024, and ending on December 31, 2024” for “and \$20,136,986 for the period beginning on January 20, 2024, and ending on March 8, 2024”.

Pub. L. 118-35 substituted “\$25,890,411 for the period beginning on November 18, 2023, and ending on January 19, 2024, and \$20,136,986 for the period beginning on January 20, 2024, and ending on March 8, 2024” for “and \$25,890,411 for the period beginning on November 18, 2023, and ending on January 19, 2024”.

Subsec. (b)(2)(F). Pub. L. 118-158 added subpar. (F).

2023—Subsec. (b)(2)(E). Pub. L. 118-22 substituted “\$19,726,027 for the period beginning on October 1, 2023, and ending on November 17, 2023, and \$25,890,411 for the period beginning on November 18, 2023, and ending on January 19, 2024” for “\$19,726,027 for the period beginning on October 1, 2023, and ending on November 17, 2023”.

Pub. L. 118-15 added subpar. (E).

2020—Subsec. (b)(2)(D). Pub. L. 116-260 substituted “2023” for “2020, and \$32,465,753 for the period beginning on October 1, 2020, and ending on December 18, 2020”.

Pub. L. 116-215 substituted “\$32,465,753” for “\$29,589,042” and “December 18, 2020” for “December 11, 2020”.

Pub. L. 116-159 substituted “\$29,589,042” for “\$25,068,493” and “December 11, 2020” for “November 30, 2020”.

Pub. L. 116-136 substituted “through 2020, and \$25,068,493 for the period beginning on October 1, 2020, and ending on November 30, 2020” for “and 2019, and \$96,575,342 for the period beginning on October 1, 2019, and ending on May 22, 2020”.

2019—Subsec. (b)(2)(D). Pub. L. 116-94 substituted “\$96,575,342” for “\$33,287,671” and “May 22, 2020” for “December 20, 2019”.

Pub. L. 116-69 substituted “\$33,287,671” for “\$21,369,863” and “December 20, 2019” for “November 21, 2019”.

Pub. L. 116-59 inserted “and \$21,369,863 for the period beginning on October 1, 2019, and ending on November 21, 2019,” before “to remain available”.

2018—Subsec. (b)(2)(D). Pub. L. 115-123 amended subpar. (D) generally. Prior to amendment, subpar. (D) read as follows: “\$37,500,000 for the period of the first and second quarters of fiscal year 2018, to remain available until expended.”

2017—Subsec. (b)(2)(D). Pub. L. 115-96 added subpar. (D).

2015—Subsec. (b)(2)(C). Pub. L. 114-10 substituted “2017” for “2015”.

2014—Subsec. (b)(2)(C). Pub. L. 113-93 substituted “2015” for “2014”.

2013—Subsec. (b)(2)(C). Pub. L. 112-240 substituted “2014” for “2013”.

2010—Subsec. (b)(2)(C). Pub. L. 111-309 substituted “2013” for “2011”.

2008—Subsec. (b)(2)(C). Pub. L. 110-275 substituted “2011” for “2009”.

2007—Subsec. (b)(2)(C). Pub. L. 110-173 substituted “2009” for “2008”.

2002—Subsec. (b)(2)(C). Pub. L. 107-360 added subpar. (C).

2000—Subsec. (b). Pub. L. 106-554 designated existing provisions as par. (1), inserted par. heading, and added par. (2).

1997—Pub. L. 105-34, §1604(f)(1)(B), amended directory language of Pub. L. 105-33, §4921, which enacted this section.

Pub. L. 105-34, §1604(f)(1)(C)(i), struck out “children with” before “type I diabetes” in section catchline.

Subsec. (a). Pub. L. 105-34, §1604(f)(1)(C)(ii), amended heading and text of subsec. (a) generally. Prior to amendment, text read as follows: “The Secretary shall make grants for services for the prevention and treatment of type I diabetes in children, and for research in innovative approaches to such services. Such grants may be made to children’s hospitals; grantees under section 254b of this title and other federally qualified health centers; State and local health departments; and other appropriate public or nonprofit private entities.”

Statutory Notes and Related Subsidiaries

EFFECTIVE DATE OF 1997 AMENDMENT

Pub. L. 105-34, title XVI, §1604(f)(4), Aug. 5, 1997, 111 Stat. 1099, provided that: “The provisions of, and amendments made by, this subsection [amending this section and provisions set out as a note under section 5701 of Title 26, Internal Revenue Code] shall take effect immediately after the sections referred to in this subsection [sections 4921, 9302, 11104, and 11201 of Pub. L. 105-33] take effect.”

REPORT ON DIABETES GRANT PROGRAMS

Pub. L. 105-33, title IV, §4923, Aug. 5, 1997, 111 Stat. 574, as amended by Pub. L. 106-554, §1(a)(6) [title IX, §931(c)], Dec. 21, 2000, 114 Stat. 2763, 2763A-585; Pub. L. 107-360, §1(c), Dec. 17, 2002, 116 Stat. 3019; Pub. L. 109-482, title I, §104(b)(3)(C), Jan. 15, 2007, 120 Stat. 3694; Pub. L. 110-275, title III, §303(c), July 15, 2008, 122 Stat. 2594, provided that:

“(a) EVALUATION.—The Secretary of Health and Human Services shall conduct an evaluation of the diabetes grant programs established under the amendments made by this chapter [chapter 3 (§§ 4921-4923) of subtitle J of title IV of Pub. L. 105-33, enacting this section and section 254c-3 of this title].

“[(b) Repealed. Pub. L. 109-482, title I, §104(b)(3)(C), Jan. 15, 2007, 120 Stat. 3694.]”

[Pub. L. 110-275, §303(c), which directed amendment of section 4923(b) of Pub. L. 105-33 by substituting “a second interim report” for “a final report” in par. (2) and by adding par. (3) at end to read “a report on such evaluation not later than January 1, 2011.”, could not be executed because of prior repeal.]

§ 254c-3. Special diabetes programs for Indians

(a) In general

The Secretary shall make grants for providing services for the prevention and treatment of diabetes in accordance with subsection (b).

(b) Services through Indian health facilities

For purposes of subsection (a), services under such subsection are provided in accordance with this subsection if the services are provided through any of the following entities: