

technologies, evaluating the role of the National Institutes of Health or any other Federal agency to achieve a greater commitment to innovation in bioengineering, and evaluating the need for better coordination and collaboration among Federal agencies and between the public and private sectors, and, not later than 1 year after June 10, 1993, to prepare and submit to Committee on Labor and Human Resources of Senate, and Committee on Energy and Commerce of House of Representatives, a report containing the findings of the study together with recommendations concerning the enactment of legislation to implement the results of such study.

MASTER PLAN FOR PHYSICAL INFRASTRUCTURE FOR RESEARCH

Pub. L. 103-43, title XX, §2002, June 10, 1993, 107 Stat. 208, directed Secretary of Health and Human Services, acting through Director of the National Institutes of Health, not later than June 1, 1994, to present to Congress a master plan to provide for replacement or refurbishment of less than adequate buildings, utility equipment and distribution systems (including the resources that provide electrical and other utilities, chilled water, air handling, and other services that the Secretary, acting through the Director, deemed necessary), roads, walkways, parking areas, and grounds that underpin the laboratory and clinical facilities of the National Institutes of Health, and provided that the plan could make recommendations for the undertaking of new projects that are consistent with the objectives of this section, such as encircling the National Institutes of Health Federal enclave with an adequate chilled water conduit.

**§ 282a. Authorization of appropriations**

**(a) In general**

**(1) This subchapter**

For purposes of carrying out this subchapter, there are authorized to be appropriated—

- (A) \$30,331,309,000 for fiscal year 2007;
- (B) \$32,831,309,000 for fiscal year 2008;
- (C) such sums as may be necessary for fiscal year 2009;
- (D) \$34,851,000,000 for fiscal year 2018;
- (E) \$35,585,871,000 for fiscal year 2019; and
- (F) \$36,472,442,775 for fiscal year 2020.

**(2) Funding for pediatric research initiative**

For the purpose of carrying out section 282(b)(7)(B)(ii) of this title, there is authorized to be appropriated to the Division of Program Coordination, Planning, and Strategic Initiatives, out of the Pediatric Research Initiative Fund described in section 9008 of title 26, and in addition to amounts otherwise made available under paragraph (1) of this subsection, \$12,600,000 for each of fiscal years 2024 through 2028.

**(b) Office of the Director**

Of the amount authorized to be appropriated under subsection (a) for a fiscal year, there are authorized to be appropriated for programs and activities under this subchapter carried out through the Office of the Director of NIH such sums as may be necessary for each of the fiscal years 2007 through 2009.

**(c) Trans-NIH research**

**(1) Common Fund**

**(A) Account**

For the purpose of allocations under section 282(b)(7)(B)(i) of this title (relating to

research identified by the Division of Program Coordination, Planning, and Strategic Initiatives), there is established an account to be known as the Common Fund.

**(B) Reservation**

**(i) In general**

Of the total amount appropriated under subsection (a)(1) for fiscal year 2007 or any subsequent fiscal year, the Director of NIH shall reserve an amount for the Common Fund, subject to any applicable provisions in appropriations Acts.

**(ii) Minimum amount**

For each fiscal year, the percentage constituted by the amount reserved under clause (i) relative to the total amount appropriated under subsection (a)(1) for such year may not be less than the percentage constituted by the amount so reserved for the preceding fiscal year relative to the total amount appropriated under subsection (a)(1) for such preceding fiscal year, subject to any applicable provisions in appropriations Acts.

**(C) Common Fund strategic planning report**

As part of the National Institutes of Health Strategic Plan required under section 282(m) of this title, the Secretary, acting through the Director of NIH, shall submit a report to the Congress containing a strategic plan for funding research described in section 282(b)(7)(A)(i) of this title (including personnel needs) through the Common Fund. Each such plan shall include the following:

(i) An estimate of the amounts determined by the Director of NIH to be appropriate for maximizing the potential of such research.

(ii) An estimate of the amounts determined by the Director of NIH to be sufficient only for continuing to fund research activities previously identified by the Division of Program Coordination, Planning, and Strategic Initiatives.

(iii) An estimate of the amounts determined by the Director of NIH to be necessary to fund research described in section 282(b)(7)(A)(i) of this title—

(I) that is in addition to the research activities described in clause (ii); and

(II) for which there is the most substantial need.

**(D) Evaluation**

During the 6-month period following the end of the first fiscal year for which the total amount reserved under subparagraph (B) is equal to 5 percent of the total amount appropriated under subsection (a)(1) for such fiscal year, the Secretary, acting through the Director of NIH, in consultation with the advisory council established under section 282(k) of this title, shall submit recommendations to the Congress for changes regarding amounts for the Common Fund.

**(2) Trans-NIH research reporting**

**(A) Limitation**

With respect to the total amount appropriated under subsection (a) for fiscal year

2008 or any subsequent fiscal year, if the head of a national research institute or national center fails to submit the report required by subparagraph (B) for the preceding fiscal year, the amount made available for the institute or center for the fiscal year involved may not exceed the amount made available for the institute or center for fiscal year 2006.

#### **(B) Reporting**

Not later than 2 years after December 13, 2016, the head of each national research institute or national center shall submit to the Director of the National Institutes of Health a report, to be included in the triennial report under section 283 of this title, on the amount made available by the institute or center for conducting or supporting research that involves collaboration between the institute or center and 1 or more other national research institutes or national centers.

#### **(C) Determination**

For purposes of determining the amount or percentage of funds to be reported under subparagraph (B), any amounts made available to an institute or center under section 282(b)(7)(B)(i) of this title shall be included.

#### **(D) Verification of amounts**

Upon receipt of each report submitted under subparagraph (B), the Director of NIH shall review and, in cases of discrepancy, verify the accuracy of the amounts specified in the report.

#### **(E) Waiver**

At the request of any national research institute or national center, the Director of NIH may waive the application of this paragraph to such institute or center if the Director finds that the conduct or support of research described in subparagraph (B) is inconsistent with the mission of such institute or center.

#### **(d) Transfer authority**

Of the total amount appropriated under subsection (a)(1) for a fiscal year, the Director of NIH may (in addition to the reservation under subsection (c)(1) for such year) transfer not more than 1 percent for programs or activities that are authorized in this subchapter and identified by the Director to receive funds pursuant to this subsection. In making such transfers, the Director may not decrease any appropriation account under subsection (a)(1) by more than 1 percent.

#### **(e) Rule of construction**

This section may not be construed as affecting the authorities of the Director of NIH under section 281 of this title.

(July 1, 1944, ch. 373, title IV, § 402A, as added Pub. L. 109-482, title I, § 103(a), Jan. 15, 2007, 120 Stat. 3685; amended Pub. L. 113-94, § 3(b), Apr. 3, 2014, 128 Stat. 1087; Pub. L. 114-255, div. A, title II, §§ 2001, 2031(b), 2042(a), Dec. 13, 2016, 130 Stat. 1047, 1056, 1073; Pub. L. 118-228, § 2(1), (2), Jan. 4, 2025, 138 Stat. 2822.)

### **Editorial Notes**

#### **AMENDMENTS**

2025—Subsec. (a)(2). Pub. L. 118-228, § 2(1), struck out “10-year” before “pediatric” and “through Common Fund” after “initiative” in heading, and in text substituted “to the Division of Program Coordination, Planning, and Strategic Initiatives” for “to the Common Fund” and “2024 through 2028” for “2014 through 2023”, and struck out “10-Year” before “Pediatric Research Initiative Fund” and “and reserved under subsection (c)(1)(B)(i) of this section” after “paragraph (1) of this subsection”.

Subsec. (c)(1)(A), (2)(C). Pub. L. 118-228, § 2(2), substituted “section 282(b)(7)(B)(i)” for “section 282(b)(7)(B)”.

2016—Subsec. (a)(1)(D) to (F). Pub. L. 114-255, § 2001, added subpars. (D) to (F).

Subsec. (c)(1)(C). Pub. L. 114-255, § 2031(b), substituted “As part of the National Institutes of Health Strategic Plan required under section 282(m) of this title,” for “Not later than June 1, 2007, and every 2 years thereafter.”.

Subsec. (c)(2)(B). Pub. L. 114-255, § 2042(a)(1), amended subpar. (B) generally. Prior to amendment, text read as follows: “Not later than January 1, 2008, and each January 1st thereafter—

“(i) the head of each national research institute or national center shall submit to the Director of NIH a report on the amount made available by the institute or center for conducting or supporting research that involves collaboration between the institute or center and 1 or more other national research institutes or national centers; and

“(ii) the Secretary shall submit a report to the Congress identifying the percentage of funds made available by each national research institute and national center with respect to such fiscal year for conducting or supporting research described in clause (i).”

Subsec. (c)(2)(D), (E). Pub. L. 114-255, § 2042(a)(2), substituted “(B)” for “(B)(i)”.

2014—Subsec. (a). Pub. L. 113-94, § 3(b)(1)(B), which directed amendment of subsec. (a) by striking “For purposes of carrying out this subchapter” and inserting par. (1) designation, heading, and “For purposes of carrying out this subchapter”, was executed by striking “For the purpose of carrying out this subchapter” and making the insertions as directed, to reflect the probable intent of Congress.

Pub. L. 113-94, § 3(b)(1)(A), redesignated pars. (1) to (3) as subpars. (A) to (C), respectively, and realigned margins.

Subsec. (a)(2). Pub. L. 113-94, § 3(b)(1)(C), added par. (2). Former par. (2) redesignated subpar. (B) of par. (1).

Subsecs. (c)(1)(B), (D), (d). Pub. L. 113-94, § 3(b)(2), substituted “subsection (a)(1)” for “subsection (a)” wherever appearing.

### **Statutory Notes and Related Subsidiaries**

#### **EFFECTIVE DATE**

Section applicable only with respect to amounts appropriated for fiscal year 2007 or subsequent fiscal years, see section 109 of Pub. L. 109-482, set out as an Effective Date of 2007 Amendment note under section 281 of this title.

#### **SUPPLEMENT, NOT SUPPLANT; PROHIBITION AGAINST TRANSFER**

Pub. L. 113-94, § 3(c), Apr. 3, 2014, 128 Stat. 1087, provided that: “Funds appropriated pursuant to section 402A(a)(2) of the Public Health Service Act [42 U.S.C. 282a(a)(2)], as added by subsection (b)—

“(1) shall be used to supplement, not supplant, the funds otherwise allocated by the National Institutes of Health for pediatric research; and

“(2) notwithstanding any transfer authority in any appropriation Act, shall not be used for any purpose other than allocating funds for making grants as de-

scribed in section 402(b)(7)(B)(ii) of the Public Health Service Act [42 U.S.C. 282(b)(7)(B)(ii)], as added by subsection (a).”

### § 282b. Electronic coding of grants and activities

The Secretary, acting through the Director of NIH, shall establish an electronic system to uniformly code research grants and activities of the Office of the Director and of all the national research institutes and national centers. The electronic system shall be searchable by a variety of codes, such as the type of research grant, the research entity managing the grant, and the public health area of interest. When permissible, the Secretary, acting through the Director of NIH, shall provide information on relevant literature and patents that are associated with research activities of the National Institutes of Health.

(July 1, 1944, ch. 373, title IV, §402B, as added Pub. L. 109-482, title I, §104(a)(3), Jan. 15, 2007, 120 Stat. 3689.)

#### Statutory Notes and Related Subsidiaries

##### EFFECTIVE DATE

Section applicable only with respect to amounts appropriated for fiscal year 2007 or subsequent fiscal years, see section 109 of Pub. L. 109-482, set out as an Effective Date of 2007 Amendment note under section 281 of this title.

### § 282c. Public access to funded investigators' final manuscripts

The Director of the National Institutes of Health (“NIH”) shall require in the current fiscal year and thereafter that all investigators funded by the NIH submit or have submitted for them to the National Library of Medicine’s PubMed Central an electronic version of their final, peer-reviewed manuscripts upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication: *Provided*, That the NIH shall implement the public access policy in a manner consistent with copyright law.

(Pub. L. 111-8, div. F, title II, §217, Mar. 11, 2009, 123 Stat. 782.)

#### Editorial Notes

##### CODIFICATION

Section was enacted as part of the Department of Health and Human Services Appropriations Act, 2009, and also as part of the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2009, and the Omnibus Appropriations Act, 2009, and not as part of the Public Health Service Act which comprises this chapter.

### § 282d. Transferred

#### Editorial Notes

##### CODIFICATION

Section, act July 1, 1944, ch. 373, title IV, §402C, as added Pub. L. 111-148, title X, §10409(d), Mar. 23, 2010, 124 Stat. 978, which related to the Cures Acceleration Network, was renumbered section 480 of act July 1, 1944, by Pub. L. 112-74, div. F, title II, §221(c)(1)(A), Dec. 23, 2011, 125 Stat. 1089, and transferred to section 287a of this title.

### § 283. Triennial reports of Director of NIH

#### (a) In general

The Director of NIH shall submit to the Congress on a triennial basis a report in accordance with this section. The first report shall be submitted not later than 1 year after January 15, 2007. Each such report shall include the following information:

(1) An assessment of the state of biomedical and behavioral research.

(2) A description of the activities conducted or supported by the agencies of the National Institutes of Health and policies respecting the programs of such agencies.

(3) A description of intra-National Institutes of Health activities, including—

(A) identification of the percentage of funds made available by each national research institute and national center with respect to each applicable fiscal year for conducting or supporting research that involves collaboration between the institute or center and 1 or more other national research institutes or national centers; and

(B) recommendations for promoting coordination of information among the centers of excellence.

(4) A catalog of all the research activities of the agencies, prepared in accordance with the following:

(A) The catalog shall, for each such activity—

(i) identify the agency or agencies involved;

(ii) state whether the activity was carried out directly by the agencies or was supported by the agencies and describe to what extent the agency was involved; and

(iii) identify whether the activity was carried out through a center of excellence.

(B) In the case of clinical research, the catalog shall, as appropriate, identify study populations by demographic variables, including biological and social variables and relevant age categories (such as pediatric subgroups), and determinants of health, that contribute to research on minority health and health disparities.

(C) Research activities listed in the catalog shall include, where applicable, the following:

(i) Epidemiological studies and longitudinal studies.

(ii) Disease registries, information clearinghouses, and other data systems.

(iii) Public education and information campaigns.

(iv) Training activities, including—

(I) National Research Service Awards and Clinical Transformation Science Awards;

(II) graduate medical education programs, including information on the number and type of graduate degrees awarded during the period in which the programs received funding under this subchapter;

(III) investigator-initiated awards for postdoctoral training and postdoctoral training funded through research grants;