

credited residency or internship program in preventive medicine or public health;

(2) defray the costs of practicum experiences, as required in such a program; and

(3) establish, maintain, or improve—

(A) academic administrative units (including departments, divisions, or other appropriate units) in preventive medicine and public health; or

(B) programs that improve clinical teaching in preventive medicine and public health.

(d) Report

The Secretary shall submit to the Congress an annual report on the program carried out under this section.

(July 1, 1944, ch. 373, title VII, §768, as added Pub. L. 105-392, title I, §105, Nov. 13, 1998, 112 Stat. 3555; amended Pub. L. 111-148, title X, §10501(m)(1), Mar. 23, 2010, 124 Stat. 1001.)

Editorial Notes

PRIOR PROVISIONS

A prior section 295c, act July 1, 1944, ch. 373, title VII, §764, as added Dec. 25, 1970, Pub. L. 91-696, §101, 84 Stat. 2080-2; amended Oct. 17, 1979, Pub. L. 96-88, title III, §301(a)(1), title V, §507, 93 Stat. 677, 692, established requirements of eligibility for grants, prior to repeal by Pub. L. 99-129, title II, §220(c), Oct. 22, 1985, 99 Stat. 544.

Another prior section 295c, act July 1, 1944, ch. 373, title VII, §764, as added Oct. 31, 1963, Pub. L. 88-164, title I, §101, 77 Stat. 283, related to recovery of expenditures under certain conditions respecting grants for construction of mental retardation facilities, prior to the general amendment of former part D of this subchapter by section 101 of Pub. L. 91-696.

AMENDMENTS

2010—Pub. L. 111-148 amended section generally. Prior to amendment, section related to grants and contracts for residency training programs in preventive medicine and dental public health and provision of financial assistance to residency trainees.

§ 295d. Health administration traineeships and special projects

(a) In general

The Secretary may make grants to State or local governments (that have in effect preventive medical and dental public health residency programs) or public or nonprofit private educational entities (including graduate schools of social work and business schools that have health management programs) that offer a program described in subsection (b)—

(1) to provide traineeships for students enrolled in such a program; and

(2) to assist accredited programs health administration in the development or improvement of programs to prepare students for employment with public or nonprofit private entities.

(b) Relevant programs

The program referred to in subsection (a) is an accredited program in health administration, hospital administration, or health policy analysis and planning, which program is accredited by a body or bodies approved for such purpose by the Secretary of Education and which meets such other quality standards as the Secretary of

Health and Human Services by regulation may prescribe.

(c) Preference in making grants

In making grants under subsection (a), the Secretary shall give preference to qualified applicants that meet the following conditions:

(1) Not less than 25 percent of the graduates of the applicant are engaged in full-time practice settings in medically underserved communities.

(2) The applicant recruits and admits students from medically underserved communities.

(3) For the purpose of training students, the applicant has established relationships with public and nonprofit providers of health care in the community involved.

(4) In training students, the applicant emphasizes employment with public or nonprofit private entities.

(d) Certain provisions regarding traineeships

(1) Use of grant

Traineeships awarded under grants made under subsection (a) shall provide for tuition and fees and such stipends and allowances (including travel and subsistence expenses and dependency allowances) for the trainees as the Secretary may deem necessary.

(2) Preference for certain students

Each entity applying for a grant under subsection (a) for traineeships shall assure to the satisfaction of the Secretary that the entity will give priority to awarding the traineeships to students who demonstrate a commitment to employment with public or nonprofit private entities in the fields with respect to which the traineeships are awarded.

(July 1, 1944, ch. 373, title VII, §769, as added Pub. L. 105-392, title I, §105, Nov. 13, 1998, 112 Stat. 3556.)

Editorial Notes

PRIOR PROVISIONS

A prior section 295d, act July 1, 1944, ch. 373, title VII, §765, as added Dec. 25, 1970, Pub. L. 91-696, §101, 84 Stat. 2080-3; amended Oct. 17, 1979, Pub. L. 96-88, title III, §301(a)(1), title V, §507, 93 Stat. 677, 692, related to requisites for approval of grants, establishment of separate medical school departments of family medicine, establishment of special hospital programs of family medicine, and supplementation of non-Federal funds, prior to repeal by Pub. L. 99-129, title II, §220(c), Oct. 22, 1985, 99 Stat. 544.

Another prior section 295d, act July 1, 1944, ch. 373, title VII, §765, as added Oct. 31, 1963, Pub. L. 88-164, title I, §101, 77 Stat. 284, related to noninterference with administration of institutions respecting grants for construction of mental retardation facilities, prior to the general amendment of former part D of this subchapter by section 101 of Pub. L. 91-696.

Prior sections 295d-1 and 295d-2 were repealed by Pub. L. 99-129, title II, §220(c), Oct. 22, 1985, 99 Stat. 544.

Section 295d-1, act July 1, 1944, ch. 373, title VII, §766, as added Dec. 25, 1970, Pub. L. 91-696, §101, 84 Stat. 2080-4, related to establishment and funding of planning and developmental grants.

Another prior section 295d-1, act July 1, 1944, ch. 373, title VII, §766, as added Oct. 31, 1963, Pub. L. 88-164, title I, §101, 77 Stat. 284, related to definitions in connection with grants for construction of mental retarda-

tion research facilities, prior to the general amendment of former part D of this subchapter by section 101 of Pub. L. 91-696.

Section 295d-2, act July 1, 1944, ch. 373, title VII, § 767, as added Dec. 25, 1970, Pub. L. 91-696, § 101, 84 Stat. 2080-4, established Advisory Council on Family Medicine and provided for its composition, term and compensation of its members, and its duties and functions.

§ 295e. Authorization of appropriations

(a) In general

For the purpose of carrying out this subpart, there is authorized to be appropriated \$17,000,000 for each of fiscal years 2021 through 2025.

(b) Limitation regarding certain program

In obligating amounts appropriated under subsection (a), the Secretary may not obligate more than 30 percent for carrying out section 295b of this title.

(July 1, 1944, ch. 373, title VII, § 770, as added Pub. L. 105-392, title I, § 105, Nov. 13, 1998, 112 Stat. 3556; amended Pub. L. 111-148, title X, § 10501(m)(2), Mar. 23, 2010, 124 Stat. 1002; Pub. L. 116-136, div. A, title III, § 3401(12), Mar. 27, 2020, 134 Stat. 387.)

Editorial Notes

PRIOR PROVISIONS

A prior section 295e, act July 1, 1944, ch. 373, title VII, § 768, as added Dec. 25, 1970, Pub. L. 91-696, § 101, 84 Stat. 2080-5, set forth definitions for former part D of this subchapter, prior to repeal by Pub. L. 99-129, title II, § 220(c), Oct. 22, 1985, 99 Stat. 544.

Another prior section 295e consisted of section 766 of act July 1, 1944. The classification of section 766 of act July 1, 1944, was changed to section 295d-1 of this title for purposes of codification.

Prior sections 295e-1 to 295e-5 were repealed by Pub. L. 99-129, title II, § 220(c), Oct. 22, 1985, 99 Stat. 544.

Section 295e-1, act July 1, 1944, ch. 373, title VII, § 767, as added Nov. 18, 1971, Pub. L. 92-157, title I, § 107(b), 85 Stat. 457; amended Oct. 12, 1976, Pub. L. 94-484, title I, § 101(g), 90 Stat. 2244, authorized appropriations for grants to public or nonprofit private hospitals for training, traineeships, and fellowships in family medicine.

Section 295e-2, act July 1, 1944, ch. 373, title VII, § 768, as added Nov. 18, 1971, Pub. L. 92-157, title I, § 107(b), 85 Stat. 458; amended Oct. 12, 1976, Pub. L. 94-484, title I, § 101(h), 90 Stat. 2244, established grants for post-graduate training programs for physicians and dentists and authorized appropriations for those grants.

Section 295e-3, act July 1, 1944, ch. 373, title VII, § 769, as added Nov. 18, 1971, Pub. L. 92-157, title I, § 107(b), 85 Stat. 459; amended Oct. 12, 1976, Pub. L. 94-484, title I, § 101(i), 90 Stat. 2245, authorized the Secretary to make grants for training, traineeships, and fellowships for health professions teaching personnel and authorized appropriations for those grants.

Section 295e-4, act July 1, 1944, ch. 373, title VII, § 769A, as added Nov. 18, 1971, Pub. L. 92-157, title I, § 107(b), 85 Stat. 459; amended Oct. 12, 1976, Pub. L. 94-484, title I, § 101(j), 90 Stat. 2245, authorized appropriations for grants for computer technology health care demonstration programs.

Section 295e-5, act July 1, 1944, ch. 373, title VII, § 769B, as added Nov. 18, 1971, Pub. L. 92-157, title I, § 107(b), 85 Stat. 460, required applications for grants and approval of grants by Secretary and set forth payment limitations.

AMENDMENTS

2020—Subsec. (a). Pub. L. 116-136 substituted “\$17,000,000 for each of fiscal years 2021 through 2025”

for “\$43,000,000 for fiscal year 2011, and such sums as may be necessary for each of the fiscal years 2012 through 2015”.

2010—Subsec. (a). Pub. L. 111-148 amended subsec. (a) generally. Prior to amendment, text read as follows: “For the purpose of carrying out this subpart, there is authorized to be appropriated \$9,100,000 for fiscal year 1998, and such sums as may be necessary for each of the fiscal years 1999 through 2002.”

SUBPART 3—RECRUITMENT AND RETENTION PROGRAMS

§ 295f. Investment in tomorrow's pediatric health care workforce

(a) Establishment

The Secretary shall establish and carry out a pediatric specialty loan repayment program under which the eligible individual agrees to be employed full-time for a specified period (which shall not be less than 2 years) in providing pediatric medical subspecialty, pediatric surgical specialty, or child and adolescent mental and behavioral health care, including substance abuse prevention and treatment services.

(b) Program administration

Through the program established under this section, the Secretary shall enter into contracts with qualified health professionals under which—

(1) such qualified health professionals will agree to provide pediatric medical subspecialty, pediatric surgical specialty, or child and adolescent mental and behavioral health care in an area with a shortage of the specified pediatric subspecialty that has a sufficient pediatric population to support such pediatric subspecialty, as determined by the Secretary; and

(2) the Secretary agrees to make payments on the principal and interest of undergraduate, graduate, or graduate medical education loans of professionals described in paragraph (1) of not more than \$35,000 a year for each year of agreed upon service under such paragraph for a period of not more than 3 years during the qualified health professional's—

(A) participation in an accredited pediatric medical subspecialty, pediatric surgical specialty, or child and adolescent mental health subspecialty residency or fellowship; or

(B) employment as a pediatric medical subspecialist, pediatric surgical specialist, or child and adolescent mental health professional serving an area or population described in such paragraph.

(c) In general

(1) Eligible individuals

(A) Pediatric medical specialists and pediatric surgical specialists

For purposes of contracts with respect to pediatric medical specialists and pediatric surgical specialists, the term “qualified health professional” means a licensed physician who—

(i) is entering or receiving training in an accredited pediatric medical subspecialty or pediatric surgical specialty residency or fellowship; or