

The income class of a family is the class in column I of the table, on the line on which appear (within the column for the number of members in the family) its income. The size of a family and income are determined in accordance with Appendix C.

1. Cost Sharing—*a. Premiums*—The amount of premiums for family coverage and enrollment in a family health center project shall be paid periodically and for a twelve month period shall total:

1. None in the case of a family income class 1;
2. \$25 in the case of a family in income class 2;
3. \$35 in the case of a family in income class 3;
4. \$60 in the case of a family in income class 4;
5. \$120 in the case of a family in income class 5.

In the case of a family in income class 1, no premiums shall be charged for enrollment in the family health center project.

*b. Per Visit Charge*—A charge of \$1 per visit shall be made for persons in families in income classes 3 or 4 and \$2 in class 5 (except with respect to visits for immunizations, well baby, and other preventive care, family planning or maternity care). There is to be no charge in the case of persons in income classes 1 and 2.

2. *Alternative Cost Sharing*: An applicant may provide, as an alternative to the premium and per visit charges set forth in paragraph 1 above, other premiums and per visit charges provided that the amount of money generated by such alternative must be commensurate with that which it is estimated would have been generated under paragraph 1 provided, however, that such alternative may not require a premium or per visit charge to a family in income class 1. A schedule setting forth the alternative charges, as well as justifying their use, must be submitted and approved as part of the application.

[37 FR 24667, Nov. 18, 1972, as amended at 38 FR 26195, Sept. 19, 1973]

## PART 51a—GRANTS FOR MATERNAL AND CHILD HEALTH AND CRIPPLED CHILDREN'S SERVICES<sup>1</sup>

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<sup>1</sup> 37 F.R. 10780, May 27, 1972.

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### Subpart A—Maternal and Child Health and Crippled Children's Services

**AUTHORITY:** Sec. 1102, 49 Stat. 647, 42 U.S.C. 1302; sec. 301, 81 Stat. 921, 42 U.S.C. 701-707, 713, 714.

**SOURCE:** 39 FR 26692, July 22, 1974, unless otherwise noted.

#### § 51a.101 Definitions.

Unless the context otherwise requires, the following terms as used in these regulations have the following meanings:

(a) "State" means the several States, the District of Columbia, Guam, Puerto Rico, the Virgin Islands, American Samoa, and the Trust Territory of the Pacific Islands;

(b) "State Agency" means the official agency of a State administering or supervising the administration of a State plan for maternal and child health or crippled children's services.

(c) "Act" means the Social Security Act as amended (42 U.S.C. Chap. 7);

(d) "Secretary" means the Secretary of Health, Education, and Welfare and any other officer or employee of the Department of Health, Education, and Welfare to whom the authority involved has been delegated;

(e) "Official forms" means forms supplied by the Secretary to State agencies for requesting funds and for submitting State budgets or reports under Title V of the Act;

(f) "Crippled child" means an individual below the age of 21 who has an organic disease, defect, or condition which may hinder the achievement of normal growth and development;

(g) "Facilitating services" means transportation, subsistence away from home, drugs, biologicals, communications, supplies and equipment as may be necessary for the provision of maternal

and child health or crippled children's services;

(h) "Health" means a state of physical and mental well-being, not merely the absence of disease or infirmity;

(i) "Medical care" means services, including services in hospitals, convalescent homes, and clinics, and home health services, by physicians and the allied services of dentists, nurses, medical social workers, nutritionists, dietitians, physical therapists, occupational therapists, speech and hearing specialists, optometrists, technicians and other personnel whose services are needed in the maternal and child health and crippled children's programs;

(j) "Maternal and child health services" means (1) the provision of educational, preventative, diagnostic and treatment services, including medical care, hospitalization and other institutional care and aftercare, appliances and facilitating services directed toward reducing infant mortality and improving the health of mothers and children; (2) the development, strengthening and improvement of standards and techniques relating to such services and care; (3) the training of personnel engaged in the provision, development, strengthening or improvement of such services and care; and (4) necessary administrative services in connection with the foregoing;

(k) "Crippled children's services" means (1) the early location of crippled children; (2) the provision for such children of preventive, diagnostic and treatment services, including medical care, hospitalization and other institutional care and aftercare, appliances and facilitating services directed toward the diagnosis of the condition of such children or toward the restoration of such children to maximum physical and mental health; (3) the development, strengthening and improvement of standards and techniques relating to the provision of such care and services; (4) the training of personnel engaged in the provision, development, strengthening or improvement of such care and services; and (5) necessary administrative services in connection with the foregoing;

(l) "Demonstration services" means either (1) the provision in a county, district, or community of more and better health services than are available in any comparable area in the State, utilizing

facilities meeting acceptable standards and personnel who are especially well qualified, for the purpose of establishing standards of care and service that can be shown to be practical, effective and adequate to improve the health of mothers and children, or (2) the provision of a special type of health service for the purpose of proving its value in improving the health of mothers and children and in providing information on cost, methods of development, techniques of provision and the administration of a given type of health service not generally available to mothers and children;

(m) "Specialized expenditures" means expenditures for salaries, services, items of equipment or supply, and other expenditures for the maternal and child health or crippled children's programs, the cost and use of which are not shared by any other program.

(n) "Supporting expenditures" means those expenditures which are shared by two or more programs and allocated among such programs.

#### § 51a.102 Submission of State plans.

In order to receive funds from an allotment for maternal and child health and crippled children's services a State must submit to and have approved by the Secretary a State plan which contains or, as required by these regulations, incorporates by reference the information and meets the requirements specified in title V of the Act and these regulations. Such plan shall be submitted by the State agency officially designated and authorized to administer it, after reasonable opportunity has been provided to the Governor of the State for his review and comment. Documents incorporated by reference become a part of the State plan as though fully set forth therein. Such documents must be (a) clearly identified as to subject, date, and location, (b) officially adopted and disseminated in accordance with applicable procedures, and (c) made available to the Secretary and to the public for inspection.

#### § 51a.103 Administration locally of State plans.

The State plan shall:

(a) Contain an assurance that the administration of the State plan in local communities will be performed

(1) Directly by the State agency; or  
 (2) By local public agencies which are, with respect to their administration locally

of such plan, supervised by the State agency; or

(3) By a combination of the foregoing methods of administration; and

(b) Incorporate by reference documents showing the manner in which the State agency will exercise and make effective its supervision over the operations of the local public agencies with respect to their administration locally of such plan.

#### § 51a.104 Program units.

(a) The State plan shall incorporate by reference documents showing:

(1) With respect to the maternal and child health services program the establishment in the State agency, under the direction of a program director, of a separate organizational unit charged primarily with responsibilities in the field of maternal and child health and including, at least, the planning, promoting, and coordinating of maternal and child health services and the administration of the unit and its staff as provided under the State plan; and

(2) With respect to the crippled children's services program, the establishment, in the State agency, of a separate organizational unit charged primarily with responsibilities in the field of health services for crippled children and including, at least, the planning, promoting and coordinating of crippled children's services and the administration of the unit and its staff as provided under the State plan: *Provided*, That, where the major functions of the State agency relate to the provision of health services to children, as in the case of a crippled children's commission, such commission shall itself be considered the separate organizational unit required.

(b) The State plan may provide for combining the crippled children's program unit and the maternal and child health program unit into one organizational unit under the direction of a single program director.

#### § 51a.105 Program directors.

The State plan must contain an assurance that the maternal and child health and crippled children's program unit or units will both or each be under the direction of a program director who will be (a) a physician; (b) a full-time employee of the State agency; (c) devoting his full time, during the hours of his employment by the State agency, to the work of the program unit of which he is

the director: *Provided*, That, upon prior approval of the Secretary and where satisfactory evidence is incorporated by reference justifying such provision, the State plan may provide for the part-time employment of such physician.

**§ 51a.106 Information on services available.**

The State plan shall incorporate by reference documents showing how the public throughout the State will be fully informed as to the maternal and child health and crippled children's services available under the State plan.

**§ 51a.107 Limitations on provision of services.**

The State plan for maternal and child health and crippled children's services shall contain an assurance that hospital, rehabilitation, convalescent or foster home care, or appliances provided to individuals under the plan, will be made available only to individuals who are receiving medical services provided or arranged for by the State agency in accordance with the standards and policies of the plan.

**§ 51a.108 Crippled Children's Program; required content.**

With respect to services for crippled children, the State plan shall incorporate by reference documents showing that provision has been made for:

(a) Services for the early identification of children in need of health care and services;

(b) Diagnosis and evaluation of the condition of such children;

(c) Treatment services including at least appropriate services by physicians, appliances, hospital care, and aftercare as needed; and

(d) The development, strengthening, and improvement of standards and services for crippled children.

**§ 51a.109 Crippled Children's Program; diagnostic services.**

With respect to services for crippled children, the State plan shall contain an assurance that the diagnostic services under the plan will be made available within the area served by each diagnostic center to any child (a) Without charge to the child or his family, except to the extent that payment will be made by a third party (including a governmental agency) which is authorized or under

legal obligation to pay such charges. Where the cost of diagnostic services is to be reimbursed by a governmental agency, a written agreement with that agency is required. Reimbursement may be made either to the State or directly to the provider in accordance with such an agreement; (b) Without restriction or requirement as to the economic status of such child's family or relatives or their legal residence; and (c) Without any requirement for the referral of such child by any individual or agency.

**§ 51a.110 Standards relating to personnel and facilities.**

The State plan shall incorporate by reference the standards required for personnel and facilities utilized in the provision of services under the plan. These standards for personnel and facilities must be those which (a) are found, upon investigation by the State agency, to be best adapted for the attainment of the specific purpose; (b) assure a reasonably high standard of care; (c) meet State and local licensing laws; and (d) are in substantial accordance with national standards as accepted by the Secretary or standards prescribed by the Secretary.

**§ 51a.111 Authorization of service.**

The State plan shall contain an assurance that all services purchased for individuals under the plan will be authorized by employees of the State agency, or by employees of the local public agency administering a part of the plan locally under the supervision of the State agency, and that records of such authorizations will be retained by the State or local public agency as part of the individual's case record.

**§ 51a.112 Confidential information.**

The State plan shall:

(a) Contain an assurance that all information as to personal facts and circumstances obtained by the State or local staff administering the program shall constitute privileged communications, shall be held confidential and shall not be divulged without the individual's consent except as may be necessary to provide services to individual mothers and children: *Provided*, That, information may be disclosed in summary, statistical or other form which does not identify particular individuals; and

(b) Incorporate by reference the suitable regulations and safeguards to carry

out the provisions of paragraph (a) of this section.

**§ 51a.113 Rates of payment for medical care, appliances, and convalescent and foster home care.**

The State plan shall incorporate by reference the schedule of rates and the methods utilized by the State agency in establishing and substantiating that rates of payment for medical care, appliances, and convalescent and aftercare provided under such plan are reasonable and necessary to maintain the standards relating to personnel and facilities established pursuant to § 51a.110. Such rates may be based on reimbursement to providers of such services on a prepaid capitation basis.

**§ 51a.114 Payment for inpatient hospital services.**

The State plan shall contain an assurance that payment for inpatient hospital services provided under the plan shall be the reasonable cost of such services which shall be developed by the State and included in the plan. The reasonable cost of any such services shall not exceed the amount which would be determined under section 1861(v) of the Act as the reasonable cost of such services for purposes of Title XVIII, and shall take into account any action taken by the Secretary pursuant to section 1122(d) of the Act with respect to any such hospital.

**§ 51a.115 Additional remuneration for services.**

The State plan shall contain an assurance that professional personnel, hospitals, and other individuals, agencies or groups providing any services authorized by the State agency under a State plan, shall agree not to make any charge to or accept any payment from the patient or his family for such services unless the amount of such payment is determined and authorized for each patient by the State agency.

**§ 51a.116 State reports and records.**

The State plan shall contain an assurance that in addition to any other reports or records required by these regulations or which may reasonably be required by the Secretary under Title V of the Act:

(a) The State agency shall maintain adequate records to show the disposition of all funds (Federal and non-Federal)

expended for activities under the approved State plan.

(b) The State agency shall make annual expenditure and performance reports in accordance with Subparts I and J of 45 CFR Part 74.

(c) All records required pursuant to title V of the Act and these regulations shall be retained in accordance with Subpart D of 45 CFR Part 74.

**§ 51a.117 Demonstration services.**

The State plan shall incorporate by reference documents providing for the development of demonstration services (with special attention to dental care for children and family planning services for mothers) in needy areas and among groups in special need and setting forth the policies, standards, and criteria applicable to the development and provision of such services, and to the selection of such areas and groups.

**§ 51a.118 Use of subprofessional staff and volunteers.**

The State plan shall incorporate by reference documents showing:

(a) Provision for the training and effective use of paid subprofessional staff in the administration of the plan. Particular emphasis shall be given to full-time or part-time employment of persons of low income as community services aides.

(b) Provision for the use of nonpaid or partially paid volunteers in providing services and in assisting any advisory committees established by the State agency.

(c) That the State plan meets the requirements established by the Secretary for training and effective use of subprofessional and volunteer staff contained in 45 CFR Part 225.

**§ 51a.119 Use of optometrists.**

The State plan shall contain an assurance that, where payment is authorized under the plan for services which an optometrist is licensed to perform, the individual for whom such payment is authorized may obtain such services from a licensed optometrist. This assurance does not apply, however, in cases where such services are rendered in a clinic or other appropriate institution which does not have an arrangement with optometrists licensed to perform such services.

**§ 51a.120 Acceptance of family planning services.**

The State plan shall contain an assurance that acceptance of family planning services offered under the plan shall be voluntary on the part of the individual to whom such services are offered. Acceptance of family planning services shall not be a prerequisite to eligibility for or the receipt of any service under the plan.

**§ 51a.121 Cooperation with other agencies and groups.**

The State plan shall contain an assurance of cooperation with the State agency which administers the program of medical assistance established under title XIX of the Act and with other medical, health, nursing, educational, and welfare groups and organizations, and, with respect to the portion of the plan relating to services for crippled children, with any agency in such State charged with administering State laws providing for vocational rehabilitation of physically handicapped children.

**§ 51a.122 Specialized and supporting expenditures.**

(a) For its crippled children's program, the State plan shall, with respect to the State agency's total annual expenditures of Federal and required matching funds for such program, incorporate by reference documents identifying as specialized expenditures for such program an amount equal to 80 percent or more of the total annual expenditures of Federal and required matching funds for that program, provided the remaining 20 percent or less of such total expenditures were for purposes within the scope of the approved crippled children's services plan.

(b) For its maternal and child health program, the State plan shall, with respect to the State agency's total annual expenditures of Federal and required matching funds for such program, incorporate by reference documents providing for the allocation of such expenditures to such program in accordance with either of the following procedures:

(1) On the basis of objective criteria set forth in the State plan, allocate to such program a portion of "supporting expenditures" which, together with any "specialized expenditures" identified for such program will at least equal the total annual expenditures of Federal and required matching funds;

(2) Identify as "specialized expenditures" for such program an amount equal to 80 percent or more of the total annual expenditures of Federal and required matching funds for that program, provided the remaining 20 percent or less of such total expenditures were for purposes within the scope of the approved maternal and child health services plan.

**§ 51a.123 Allotments.**

(a) Prior to the beginning of each fiscal year the Secretary will prepare and make available to the several State agencies an estimated schedule of the amounts which it is expected will be allotted to each State during the fiscal year for each program.

(b) With respect to amounts determined to be available for any fiscal year for allotments for crippled children's services:

(1) One-half is allotted among the States in accordance with criteria specified in the Act. These funds are referred to as Fund A. Each State receives an allotment of \$70,000 and such part of the amount remaining as the number of children under 21 in the State bears to the total number of such children in the United States. The number of children under 21 is used as the index of the number of crippled children, since adequate statistics on the number of crippled children are not available; and

(2) The other half is known as Fund B. From this fund, an amount determined by the Secretary is available to States and to nonprofit institutions of higher learnings for special projects for crippled children who are mentally retarded. From the remainder of Fund B, not less than 75 percent is apportioned among the States according to the need of each State for financial assistance in carrying out its State plan after taking into consideration the number of children under 21 years in each State and per capita income in each State. The apportionments vary directly with the number of children under 21 years of age in the State, and the number in rural areas of the State, with rural children given twice the weight of children in urban areas. The apportionments vary inversely with State per capita income. Depending upon the amount of funds available, a minimum amount is set by the Secretary below which a State's apportionment may not fall. Funds thus apportioned are allotted to States as needed. The remaining 25 percent or less of Fund B is

reserved for grants to States and to non-profit institutions of higher learning for special projects of regional or national significance which may contribute to the advancement of services for crippled children.

(c) With respect to amounts determined to be available for any fiscal year for allotments for maternal and child health services:

(1) One-half is allotted among the States by a formula specified in the law. These funds are referred to as Fund A. Each State receives an allotment of \$70,000 and such part of the amount remaining as the number of live births in the State bears to the total number in the United States; and,

(2) The other half is known as Fund B. From this fund an amount determined by the Secretary is available to States and to nonprofit institutions of higher learning for special projects for mentally retarded children. From the remainder of Fund B, not less than 75 percent is apportioned among the States according to the need of each State for financial assistance in carrying out its State plan after taking into consideration the number of live births in each State and per capita income in each State. The apportionments vary directly with the number of live births in the State, and the number in rural areas of the State, with rural births given twice the weight of urban births. The apportionments vary inversely with State per capita income. Depending upon the amount of funds available, a minimum amount is set by the Secretary below which a State's apportionment may not fall. Funds thus apportioned are allotted to States as needed. The remaining 25 percent or less of Fund B is reserved for grants to States and to nonprofit institutions of higher learning for special projects of regional or national significance which may contribute to the advancement of maternal and child health.

**§ 51a.124 Submission of budgets by State agencies.**

Prior to the beginning of each fiscal year, the State agency shall submit, upon official forms and in accordance with procedures established by the Secretary, an annual budget, appropriately documented and supported, providing for financial participation by the State and indicating the availability and sources of all funds to be expended under the State plan during such fiscal year.

**§ 51a.125 Payments to States; effect of certification.**

Neither the approval of the State plan nor any certification of funds or payment to the State pursuant thereto shall be deemed to waive the responsibility of the State to observe before or after such administrative action any Federal requirements or the right or duty of the Secretary to withhold funds by reason thereof.

**§ 51a.126 Private funds.**

Funds obtained from private sources and made fully available for expenditure by the State agency under the approved State plan may be included in the computation of the amounts of public funds expended. Private funds shall be placed on deposit in accordance with the State law, but if there is no State law setting forth applicable procedures, the funds shall be deposited with the State Treasurer, the Treasurer of a political subdivision, or in a private depository, in a special account to the credit of the State agency. If the funds are placed in a private depository, the certificate of an officer of the private depository shall be furnished showing the deposit of such funds in a special account to the credit of the State agency.

**§ 51a.127 Application of Federal funds; effect of State rules.**

Except as specifically stated in the Act and in these regulations, State laws, rules, regulations, and standards governing the custody and disbursement of State funds shall govern the custody and disbursement of Federal funds paid to the State.

**§ 51a.128 Custody of and accounting for Federal funds.**

(a) The State Treasurer or official exercising similar functions for the State shall receive and provide for the custody of all funds paid to the State under the Act, subject to requisition or disbursement thereof by the State agency for State plan purposes.

(b) The State plan shall incorporate by reference such written fiscal control and fund accounting procedures as are necessary to assure the proper disbursement of and accounting for funds paid to the State under this subpart. Such procedures shall provide for an accurate and timely recording of receipts of Federal funds paid to the State for expenditures incurred or to be incurred under

the approved plan, of the amounts and purposes of expenditures made in carrying out such plan and of any unearned balances of Federal funds paid to the State. In addition, such procedures must:

(1) Provide for the determination of allowability and the allocation of costs in accordance with Subpart Q of 45 CFR Part 74; and

(2) Provide adequate information to show exclusion from expenditures claimed for Federal participation of those costs for which payments have been received or are due under other Federal grants or contracts or which are required or used to match other Federal funds.

#### § 51a.129 Withholding of payments.

No payment will be made from the allotments for maternal and child health or crippled children's services to any State;

(a) Which fails to make a satisfactory showing in documents incorporated by reference in the State plan that it is extending the provision of services under its plan with a view to making such services available in all parts of the State by July 1, 1975. Services which must be extended are those to which the State plan applies, including services for dental care for children and family planning for mothers.

(b) With respect to any amount paid for items or services furnished under the plan to the extent that such amount exceeds the charge level which is determined to be reasonable for such items or services, as follows:

(1) No charge for physician and dentist services may be determined to be reasonable in the case of bills submitted or requests for payment made under this part if it exceeds the prevailing charge level that, on the basis of statistical data and methodology acceptable to the Secretary, would cover 75 percent of the customary charges made for similar services in the same locality during the last preceding calendar year elapsing prior to the start of the fiscal year in which the bill is submitted or the request for payment is made. The prevailing charge level may not exceed (in the aggregate) the level determined for the fiscal year ending June 30, 1973, except to the extent that the Secretary finds, on the basis of appropriate economic index data, that such higher level is justified by economic changes.

(2) Charges for medical services, supplies, and equipment (including equip-

ment servicing) that, in the judgment of the Secretary, do not generally vary significantly in quality from one supplier to another, incurred after December 31, 1972, and determined to be reasonable, may not exceed the lowest charge levels at which such services, supplies, and equipment are widely and consistently available in a locality, except to the extent and under the circumstances specified by the Secretary.

(c) With respect to any amount paid for services furnished under the plan by a provider or other person during any period of time if payment may not be made under Title XVIII of the Act with respect to services furnished by such provider or person during such period of time solely by reason of a determination by the Secretary that such provider or person

(1) Has knowingly and willfully made, or caused to be made, any false statement or representation of a material fact for use in an application for payment under Title XVIII of the Act or for use in determining the right to a payment under that title;

(2) Has submitted or caused to be submitted (except in the case of a provider of services) bills or requests for payment under Title XVIII of the Act containing charges (or in applicable cases requests for payment of costs to such person) for services rendered which the Secretary finds, with the concurrence of the appropriate program review team appointed pursuant to section 1862(d)

(4) of the Act, to be substantially in excess of such person's customary charges (or in applicable cases substantially in excess of such person's costs) for such services, unless the Secretary finds there is good cause for such bills or requests for payment containing such charges (or in applicable cases, such costs); or

(3) Has furnished services or supplies which are determined by the Secretary, with the concurrence of the members of the appropriate program review team (appointed pursuant to section 1862(d)

(4) of the Act) who are physicians or other professional personnel in the health care field, to be substantially in excess of the needs of individuals or to be harmful to individuals or to be of a grossly inferior quality.

(d) To reimburse health care facilities and health maintenance organizations for services to the extent that such reimbursement supports capital expendi-



tures made by or on behalf of such facilities or organizations which the Secretary has, pursuant to section 1122 of the Act, determined to exclude from reimbursement expenses related to such capital expenditures.

**§ 51a.130 Maintenance of effort.**

The amount payable to any State under the regulations in this part for any fiscal year ending after June 30, 1968, shall be reduced by the amount by which the sum expended (as determined by the Secretary) from non-Federal sources for maternal and child health services and services for crippled children for such year is less than the sum expended from such sources for such services for the fiscal year ending June 30, 1968. In case of any such reduction the Secretary shall determine the portion thereof which shall be applied, and the manner of applying such reduction, to the amounts otherwise payable to the State under these regulations.

**§ 51a.131 Merit system.**

The State plan shall provide for the establishment and maintenance of personnel standards on a merit basis for persons employed by the State agency and by official local agencies to provide or supervise the provision of maternal and child health and crippled children's services under the approved State plan, and of State agency supervision of compliance with such standards by official local agencies. Conformity with Standards for a Merit System of Personnel Administration, 45 CFR Part 70, issued by the Secretary of Health, Education, and Welfare, including any amendments thereto, and any standards prescribed by the United States Civil Service Commission pursuant to section 208 of the Intergovernmental Personnel Act of 1970 (Public Law 91-648; 84 Stat. 1915) modifying or superseding such Standards, will be deemed to meet this requirement as determined by said Commission. Laws, rules, regulations, and policy statements, and amendments thereto, effectuating such methods of personnel administration shall be incorporated by reference in the State plan.

**§ 51a.132 Nondiscrimination.**

Attention is called to the requirements of Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d; 78 Stat. 252), which provides that no person in the United States shall, on the ground of

race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. A regulation implementing such Title VI, which applies to grants made under this subpart, has been issued by the Secretary of Health, Education, and Welfare with the approval of the President (45 CFR Part 80). Such regulation is applicable to services and programs provided under section 501-507 of the Act, and requires receipt and acceptance by the Secretary of the applicable documentation set forth therein.

**§ 51a.133 Applicability of 45 CFR Part 74.**

The provisions of 45 CFR Part 74, establishing uniform administrative requirements and cost principles, shall apply to all grants made under this subpart.

**Subpart B—Special Project Grants for Family Planning Services**

**AUTHORITY:** The provisions of this Subpart B issued under sec. 1102, 49 Stat. 647, 42 U.S.C. 1302; sec. 508, 81 Stat. 926, 42 U.S.C. 708.

**SOURCE:** The provisions of this Subpart B appear at 36 F.R. 3814, Feb. 27, 1971, unless otherwise noted. Redesignated at 37 F.R. 10780, May 27, 1972.

**§ 51a.201 Applicability.**

The regulations in this subpart are applicable to the award of grants under section 508(a)(3) of the Social Security Act (42 U.S.C. 708(a)(3)) for projects for the provision of family planning services to ensure that individuals have available to them the freedom of choice to determine the spacing of their children and the size of their families, and to help improve the general health of mothers and children.

**§ 51a.202 Definitions.**

As used in this subpart:

(a) "Act" means section 508 of the Social Security Act as amended (42 U.S.C. 708).

(b) "State" means any of the several States, the District of Columbia, Puerto Rico, the Virgin Islands, and Guam.

(c) "Secretary" means the Secretary of Health, Education, and Welfare and any other officer or employee of the Department of Health, Education, and Welfare to whom the authority involved has been delegated.

**§ 51a.203 Eligibility for grants.**

In order to be eligible for a grant under this part, an applicant must be (a) the State health agency of any State; (b) with the consent of such State health agency, the health agency of a political subdivision of the State; or (c) any public or nonprofit private agency, institution, or organization.

**§ 51a.204 Application.**

(a) An application for a grant under this subpart shall be submitted to the Secretary in such form and manner and at such time as the Secretary may prescribe.<sup>1</sup> The application shall contain a budget and a narrative plan of the manner in which the applicant intends to conduct the project and carry out the requirements of this subpart.

(b) The application shall be executed by an individual authorized to act for the applicant and to assume on behalf of the applicant the obligations imposed by the terms and conditions of the grant award, including the regulations of this subpart and the policies and procedures prescribed by the Secretary for grants under this subpart.

(c) The applicant will be notified of action taken on his application.

(1) If a grant is made, the initial award will set forth the amount of funds granted and will specify the project period for which support is contemplated if the activity is satisfactorily carried out and Federal funds are available. For continuation support, grantees must make separate application annually.

(2) Neither the approval of any project nor a grant award shall commit or obligate the United States in any way to make any additional, supplemental, continuation or other award with respect to any approved project or portion thereof, but this provision shall not preclude the Secretary from making upward adjustments to actual costs as to amounts awarded on a provisional basis as provided in subparagraph (1) of this paragraph.

**§ 51a.205 Matching requirements.**

Federal funds will be granted on the basis of project applications and may be

<sup>1</sup> Applications and instructions may be obtained from the Regional Health Director of the Health Services and Mental Health Administration at the Regional Office of the Department of Health, Education, and Welfare for the region in which the project is to be conducted.

used to meet not more than 75 percent of the cost of the project. The non-Federal participation may be derived from a variety of sources, including (a) new State or local appropriations or other new grantee funds, and (b) existing funds and time of personnel used for the ongoing activities of the grantee agency which are made a part of the project. Grantee funds or services derived from other Federal funds or used for matching any other Federal grant may not be used to match the Federal funds in this program except as otherwise specifically allowed by Federal statute.

[36 FR 3814, Feb. 27, 1971. Redesignated at 37 FR 10780, May 27, 1972 and amended at 38 FR 26195, Sept. 19, 1973]

**§ 51a.206 Personnel and facilities standards.**

The application shall describe the standards required for personnel and facilities utilized in the provision of services under the program. These standards for personnel and facilities must (a) be those which are found upon investigation by the grantee to be best adapted for the attainment of the specific purposes of the project, (b) assure a reasonably high standard of care, and (c) be in substantial accordance with national standards as accepted by the Secretary or standards prescribed by the Secretary. However, if a project is planned for an area in which it is not possible to meet standards accepted or prescribed by the Secretary, the best available resources must be used, and steps must be taken to improve the standard of care. In such case, the application must include a description of such proposed remedial action.

**§ 51a.207 Availability of services.**

Project services must be made available:

(a) Without any requirement for legal residence other than a requirement that the person or family to be served is currently residing in the project area;

(b) Upon referral from any source or upon the patient's own application;

(c) With respect for the dignity of the individual;

(d) With efficient administrative procedures for registration and delivery of services;

(e) Without regard to religion, family size, or marital status (see also section 51a.20); and

(f) Only to persons who because of low income or for other reasons beyond their control could not otherwise obtain

services comparable to those provided under the project. However, if specific income standards are used, they must be applied flexibly, with due regard for total family needs in the particular case. Determinations of eligibility for services under the project shall be made by the project director or a member of the project staff designated by him, and shall be made in accordance with this section, the policies and procedures governing the project, and the project plan and budget as approved.

**§ 51a.208 Provision of services.**

(a) Acceptance of services provided under the project must be voluntary, and individuals must not be subjected to any coercion to receive services or to employ or not to employ any particular method of family planning. Acceptance of family planning services shall not be a prerequisite to eligibility for or receipt of any other services.

(b) Measures must be taken to promote community understanding of the objectives of the program, to make the availability of services known to the community, and to encourage and facilitate attendance in the program.

(c) The project must be coordinated with related services of local health and welfare departments, hospitals and related voluntary agencies, and health projects supported by the Office of Economic Opportunity. Where appropriate, there should be referral arrangements with local welfare departments for services to persons under the Aid to Families With Dependent Children Program.

(d) The program must include counseling, and interpretation to individuals of the service provided.

(e) Family planning medical services shall be under the direction and responsibility of a physician with special training or experience in family planning.

(f) Projects are to be designed to assure comprehensiveness and continuity in the health management and supervision of project patients with respect to family planning services.

(g) A variety of medically approved methods of family planning, including the rhythm method, must be available to persons to whom family planning services are offered and provided.

(h) Diagnostic and treatment services for infertility must be provided for in the family planning project.

**§ 51a.209 Payment for services.**

(a) Project plans shall set forth the methods utilized by the grantee in establishing the rates of payment for medical care, and in substantiating that the rates are reasonable and necessary to maintain standards relating to the provision of services established pursuant to § 51a.206. Grantees will maintain a schedule of rates for such services.

(b) All services purchased for project patients must be authorized by the project director or his designee on the project staff.

(c) No charge shall be made to any person or family for services under the project, except to the extent that payment will be made by a third party (including a government agency) which is authorized or is under legal obligation to pay such charges. Where the cost of care and services furnished by or through the project is to be reimbursed under Title XIX of the Social Security Act, a written agreement with this Title XIX agency is required. Reimbursement may be either to the project or directly to the provider.

**§ 51a.210 Confidentiality of information.**

All information as to personal facts and circumstances obtained by the project staff shall be treated as privileged communications, shall be held confidential, and shall not be divulged without the individual's consent except as may be necessary to provide services to the individual. Information may be disclosed in summary, statistical, or other form which does not identify particular individuals.

**§ 51a.211 Project expenditures.**

(a) Project funds (Federal and matching) are available for the direct costs of operating and maintaining the project approved in the plan and budget.

(b) Funds may not be used for the following:

- (1) Construction of buildings;
- (2) Depreciation of existing building or equipment;
- (3) Dues to societies, organizations, or federations;
- (4) Entertainment costs;
- (5) General agency overhead;
- (6) Fundraising material and activities;
- (7) Consultants or other personnel paid from other Federal grant funds;

(8) Any other costs not approved in the plan and budget.

(c) Prior approval of revision of the budget and project plan is required whenever there is to be a significant change in the scope or nature of project activities.

§ 51a.212 Interest and other income.

(a) Pursuant to section 203 of the Intergovernmental Cooperation Act of 1968, 42 U.S.C. 4213, a State, as defined in section 102 of that Act, will not be held accountable for interest earned on grant funds, pending their disbursement for program purposes. A State, as defined in the Intergovernmental Cooperation Act, section 102, means any one of the several States, the District of Columbia, Puerto Rico, any territory or possession of the United States, or any agency or instrumentality of a State, but does not include the governments of the political subdivisions of the State. All grantees other than a State, as so defined, must return to the Health Services and Mental Health Administration all interest earned on grant funds.

[36 FR 3814, Feb. 27, 1971. Redesignated at 37 FR 10780, May 27, 1972 and amended at 38 FR 26195, Sept. 19, 1973]

§ 51a.213 [Reserved]

§ 51a.214 Control of project funds or services.

Funds or services made available to the project for project purposes, whether or not utilized to meet the grantee's share of the costs, shall be under the control of the grantee and expended and utilized in accordance with this part, policies and procedures governing the project, and the project plan and budget as approved.

§ 51a.215 Effect of State or local law.

Except as otherwise authorized, where the grantee is a public agency, administrative provisions of State or local law applicable to the moneys appropriated to the public agency shall apply to the project funds.

§ 51a.216 [Reserved]

§ 51a.217 Applicability of 45 CFR Part 74.

The provisions of 45 CFR Part 74, establishing uniform administrative requirements and cost principles, shall apply to all grants under this subpart to State and local governments as those terms are defined in Subpart A of that Part 74. The relevant provisions of the following subparts of Part 74 shall also

apply to grants to all other grantee organizations under this subpart:

45 CFR PART 74

Subpart

- A General.
- B Cash Depositories.
- C Bonding and Insurance.
- D Retention and Custodial Requirements for Records.
- F Grant-Related Income.
- G Matching and Cost Sharing.
- K Grant Payment Requirements.
- L Budget Revision Procedures.
- M Grant Closeout, Suspension, and Termination.
- O Property.
- Q Cost Principles.

[38 FR 26195, Sept. 19, 1973]

§ 51a.218 Copyright.

The United States reserves a royalty-free, nonexclusive license to use and authorize others to use all copyrightable or copyrighted material resulting from a project.

§ 51a.219 Effect of payment.

Neither the approval of a project plan nor any certification of funds or payment to a grantee pursuant thereto shall be deemed to waive the obligation of the grantee to observe, before or after such action, any Federal requirements, or to waive the right of the Secretary to withhold funds for noncompliance with Federal requirements.

§ 51a.220 Nondiscrimination.

Attention is called to the requirements of Title VI of the Civil Rights Act of 1964 (78 Stat. 252, 42 U.S.C. 2000d et seq.) and in particular section 601 of such act which provides that no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. A regulation implementing such Title VI, which applies to grants made under this subpart, has been issued by the Secretary of Health, Education, and Welfare with the approval of the President (45 CFR Part 80).

**Subpart C—Special Project Grants for Dental Health of Children**

**AUTHORITY:** The provisions of this Subpart C issued under sec. 1102, 49 Stat. 647; 42 U.S.C. 1302; sec. 510, 81 Stat. 927; 42 U.S.C. 710.

SOURCE: The provisions of this Subpart C appear at 37 F.R. 10780, May 27, 1972; 37 F.R. 11577, June 9, 1972, unless otherwise noted.

#### § 51a.301 Applicability.

The regulations in this subpart are applicable to the award of grants under section 510 of the Social Security Act (42 U.S.C. 710) to promote the dental health of children and youth of school or preschool age, particularly in areas with concentrations of low income families.

#### § 51a.302 Definitions.

As used in this subpart:

(a) "Act" means the Social Security Act, as amended.

(b) "Secretary" means the Secretary of Health, Education, and Welfare and any other officer or employee of the Department of Health, Education, and Welfare to whom the authority involved has been delegated.

(c) "State" means one of the 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, and Guam.

(d) "Nonprofit private agency, institution, or organization" means an agency, institution, or organization, no part of the net earnings of which inures or may lawfully inure to the benefit of any private shareholder or individual.

#### § 51a.303 Eligibility.

To be eligible for a grant under this subpart, an applicant must be (a) the State health agency of a State; (b) with the consent of such State agency, the health agency of any political subdivision of the State; or (c) any health oriented public or nonprofit private agency, institution, or organization which has the capability of providing dental care.

#### § 51a.304 Application for a grant.

(a) An application for a grant under this subpart shall be submitted to the Secretary in such form and manner and at such time as the Secretary may prescribe.<sup>1</sup> The application shall contain a full and adequate description of the project and of the manner in which the applicant intends to conduct the project and carry out the requirements of this

subpart, and a budget and justification of the amount of grant funds requested, and such other pertinent information as the Secretary may require.

(b) The application shall be executed by an individual authorized to act for the applicant and to assume on behalf of the applicant the obligations imposed by the regulations of this subpart and any additional conditions of the grant.

#### § 51a.305 Project requirements.

An approvable application must contain each of the following:

- (a) Assurances that:
  - (1) Services will be made available.
  - (i) Without the imposition of any durational residence requirement;
  - (ii) With respect for the dignity of the individual;
  - (iii) Without any requirement that there be a court commitment;
  - (iv) Without regard to religion, sex, or creed.

(2) In cases involving treatment, correction of defects or aftercare provided under the project, services will be made available only to children who would not otherwise receive such services because they are from low-income families or for other reasons beyond their control. In determining such eligibility the grantee shall consider the family's size and income, the medical diagnosis, the costs of required care and the family's other financial responsibilities.

(3) Under special circumstances, services will be made available to certain patients from outside a project area or age group designated in the approved project plan if the project director considers that it will best promote the purposes of the project and section 510 of the Act.

(4) In the case of hospital care or prostheses, services will be made available only to persons who are receiving services provided for or arranged by the project in accordance with its standards and policies.

(5) No charge will be made to any person for services under the project, except to the extent that payments will be made by a third party (including a government agency) which is authorized or is under legal obligation to pay such charges. Where the cost of care and services furnished by or through the project is to be reimbursed under Title XIX of the Social Security Act, a written agreement with the Title XIX agency is required. Reimbursement may be

<sup>1</sup> Applications and instructions may be obtained from the Regional Health Director of the Health Services and Mental Health Administration at the Regional Office of the Department of Health, Education, and Welfare for the region in which the project is to be conducted.

either to the project or, in lieu thereof, directly to the provider in accordance with the above referred to agreement.

(6) All services purchased for project patients will be authorized by the project director or his designee on the project staff.

(7) The reasonable cost of inpatient hospital care provided in connection with the conduct of the project will be paid in accordance with standards approved by the Secretary.

(8) Determination of eligibility for services under the project will be made by the project director or someone on the project staff designated by him, and shall be in accordance with the Act, and the policies and procedures promulgated thereunder and in accordance with the approved project.

(9) The project will be under the direction of a single project director, responsible for the overall direction of the project who shall be a full time employee of the project: *Provided*, That, the Secretary may in particular cases, approve the appointment of a director who is employed less than full time where the Secretary finds that such appointment is consistent with the purposes of the program.

(b) Provision for comprehensive dental care and services, including diagnosis, screening, preventive services, treatment, correction of defects, and after-care. In determining whether comprehensive dental care and services will be provided the Secretary will consider, among other things, the following:

(1) Existing practices.

(2) Coordination and continuity of care and services, including active follow-up of cases.

(3) Procedures utilized to reach children in need of such services such as, publicity, provision of services at schools, community centers, and other places where concentrations of eligible children may be found.

(4) The degree of coordination with, and utilization of other State or local health, welfare, and education programs, as well as other federally supported health service programs.

(c) A description of the methods to be utilized by the grantee in establishing the rates of payment for dental care (which may include payments on a prepaid capitation basis) including specialty services, prostheses and appliances, and aftercare, and a substantiation of the fact that the rates are rea-

sonable and necessary to maintain standards relating to the provision of services established pursuant to § 51a.307. Grantees will enter into agreements with providers of services and will maintain a schedule of rates for such services.

(d) A description of the standards required for personnel and facilities utilized in the provision of services under the program. These standards for personnel and facilities must (1) be those which are found upon investigation by the grantee to be best adapted for the attainment of the specific purposes of the project, (2) assure a reasonably high standard of care, and (3) be in substantial accord with national standards as accepted by the Secretary or standards prescribed by the Secretary. However, if a project is planned for an area in which it is not possible to meet standards accepted or prescribed by the Secretary, the best available resources must be used, and steps must be taken to improve care. In such case, the application must include a description of such proposed remedial action.

#### § 51a.306 Research.

In addition to the project requirements imposed by § 51a.305, an approvable project may include research looking toward the development of new methods of diagnosis or treatment, or demonstration of the utilization of dental personnel with various levels of training.

#### § 51a.307 Evaluation and grant award.

(a) Within the limits of funds available for such purpose, the Secretary may award grants to assist those project applications which will in his judgment best promote the purposes of section 510 of the Social Security Act, taking into account:

(1) The need for the services to be provided;

(2) The quality of the services offered;

(3) Procedures utilized to assure prompt thorough service;

(4) The degree to which the project plan adequately provides for the elements set forth in § 51a.305.

(b) The amount of any award shall be determined by the Secretary on the basis of his estimate of the sum necessary for the proper performance of the project: *Provided, however*, That no grant shall be made for an amount equal to more than 75 percent of the cost of the project. In determining the grantee's

share of project costs, costs borne by Federal funds, or costs used to match other Federal grants, may not be included except as may be otherwise provided by law.

(c) All grant awards shall be in writing, shall set forth the amount of funds granted and the period for which support is recommended.

(d) Neither the approval of any project nor any grant award shall commit or obligate the United States in any way to make any additional, supplemental, continuation or other award with respect to any approved project or portion thereof, but this provision shall not preclude the Secretary from making upward adjustments to actual costs as to amounts awarded on a provisional basis. For continuation support, grantees must make separate application periodically at such times and in such form as the Secretary may direct.

[36 FR 3814, Feb. 27, 1971. Redesignated at 37 FR 10780, May 27, 1972 and amended at 38 FR 26195, Sept. 19, 1973]

#### § 51a.308 Payments.

The Secretary shall from time to time make payments to a grantee of all or a portion of any grant award, either in advance or by way of reimbursement for expenses incurred or to be incurred to the extent he determines such payments necessary to promote prompt initiation and advancement of the approved project. Such payments may include reimbursement to a grantee for services rendered on a prepaid capitation basis.

#### § 51a.309 Use of project funds.

(a) Any funds granted pursuant to this subpart, as well as other funds to be used in the performance of the approved project shall be expended solely for carrying out the approved project in accordance with the statute, the regulations in this subpart, the terms and conditions of the award, and the applicable cost principles prescribed by Subpart Q of 45 CFR Part 74: *Provided, however*, That with respect to grants awarded prior to July 1, 1972, funds may not be used for the payment of indirect costs.

(b) Prior approval by the Secretary of revision of the budget and project plan is required whenever there is to be a significant change in the scope or nature of project activities.

(c) In the event that funds for the performance of the project are so inadequate as to require revision of the

approved project plan or budget, such revision may (subject to the provisions of paragraph (a) of this section) curtail the geographic area serviced or similar factors but shall not curtail the comprehensiveness of health services furnished

[36 FR 3814, Feb. 27, 1971. Redesignated at 37 FR 10780, May 27, 1972 and amended at 38 FR 26195, Sept. 19, 1973]

#### § 51a.310 Civil rights.

Attention is called to the requirements of title VI of the Civil Rights Act of 1964 (78 Stat. 252, 42 U.S.C. 2000d, et seq.) and in particular section 601 of such Act which provides that no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. A regulation implementing such title VI, which applies to grants made under this subpart, has been issued by the Secretary of Health, Education, and Welfare with the approval of the President (45 CFR Part 80).

#### § 51a.311 Confidentiality of information.

All information as to personal facts and circumstances obtained by the project staff shall be treated as privileged communications, shall be held confidential, and shall not be divulged without the individual's consent except as may be necessary to provide services to the individual. Information may be disclosed in summary, statistical, or other form which does not identify particular individuals.

#### § 51a.312 Inventions and discoveries.

Any grant award under this subpart is subject to the regulations of the Department of Health, Education, and Welfare as set forth in 45 CFR Parts 6 and 8, as amended. Such regulations shall apply to any activity for which grant funds are in fact used whether within the scope of the project as approved or otherwise. Appropriate measures shall be taken by the grantee and by the Secretary to assure that no contracts, assignments or other arrangements inconsistent with the grant obligation are continued or entered into and that all personnel involved in the supported activity are aware of and comply with such obligation. Laboratory notes, related technical data and information pertaining to inventories or discoveries shall be maintained for such

periods, and filed with or otherwise made available to the Secretary or those he may designate, at such times and in such manner as he may determine necessary to carry out such Department regulations.

#### § 51a.313 Publications and copyright.

Except as may otherwise be provided under the terms and conditions of the award, the grantee may copyright without prior approval any publications, films, or similar materials developed or resulting from a project supported by a grant under this subpart, subject, however, to a royalty-free, nonexclusive license or right in the Government to reproduce, translate, publish, use, disseminate, and dispose of such materials and to authorize others to do so.

#### § 51a.314 Grantee accountability.

(a) *Accounting for grant award payments.* All payments made by the Secretary shall be recorded by the grantee in accounting records separate from the records of all other grant funds, including funds derived from other grant awards. With respect to each approved project the grantee shall account for the sum total of all amounts paid by presenting or otherwise making available evidence satisfactory to the Secretary, of expenditures for direct and indirect costs meeting the requirements of this part: *Provided, however,* That when the amount awarded for indirect cost was based on a predetermined fixed percentage of estimated direct costs, the amount allowed for indirect costs shall be computed on the basis of such predetermined fixed-percentage rates applied to the total, or a selected element thereof, of the reimbursable direct costs incurred.

(b) [Reserved]

(c) *Accounting for grant related income*—(1) *Interest.* Pursuant to section 203 of the Intergovernmental Cooperation Act of 1968 (42 U.S.C. 4213), a State will not be held accountable for interest earned on grant funds, pending their disbursement for grant purposes. A State, as defined in section 102 of the Intergovernmental Cooperation Act, means any one of the several States, the District of Columbia, Puerto Rico, any territory or possession of the United States, or any agency or instrumentality of a State, but does not include the governments of the political subdivisions of the State. All grantees other than a State, as defined in this section, must

return all interest earned on grant funds to the Federal Government.

(d) *Grant closeout*—(1) *Date of final accounting.* A grantee shall render, with respect to each approved project, a full account, as provided herein, as of date of the termination of grant support. The Secretary may require other special and periodic accounting.

(2) *Final settlement.* There shall be payable to the Federal Government as final settlement with respect to each approved project the total sum of:

(i) Any amount not accounted for pursuant to paragraph (a) of this section;

(ii) Any credits for earned interest pursuant to paragraph (c)(1) of this section;

(iii) Any other amounts due pursuant to Subparts F, M, and O of 45 CFR Part 74.

Such total sum shall constitute a debt owed by the grantee to the Federal Government and shall be recovered from the grantee or its successors or assignees by setoff or other action as provided by law. [36 FR 3814, Feb. 27, 1971. Redesignated at 37 FR 10780, May 27, 1972 and amended at 38 FR 26195, Sept. 19, 1973]

#### § 51a.315 [Reserved]

#### § 51a.316 Additional conditions.

The Secretary may with respect to any grant award impose additional conditions prior to or at the time of any award when in his judgment such conditions are necessary to assure or protect advancement of the approved project, the interests of public health, or the conservation of grant funds.

#### § 51a.317 Applicability of 45 CFR Part 74.

The provisions of 45 CFR Part 74, establishing uniform administrative requirements and cost principles, shall apply to all grants under this subpart to State and local governments as those terms are defined in Subpart A of that Part 74. The relevant provisions of the following subparts of Part 74 shall also apply to grants to all other grantee organizations under this subpart:

#### 45 CFR PART 74

##### Subpart

- A General.
- B Cash Depositories.
- C Bonding and Insurance.
- D Retention and Custodial Requirements for Records.
- F Grant-Related Income.
- G Matching and Cost Sharing.



Sec.

- K Grant Payment Requirements.
  - L Budget Revision Procedures.
  - M Grant Closeout, Suspension, and Termination.
  - O Property.
  - Q Cost Principles.
- [38 FR 26195, Sept. 19, 1973]

**PART 51b—GRANTS FOR COMMUNICABLE DISEASE CONTROL**

Sec.

- 51b.1 Applicability.
- 51b.2 Definitions.
- 51b.3 Eligibility.
- 51b.4 Application for grant.
- 51b.5 Project requirements.
- 51b.6 Grant evaluation and award.
- 51b.7 Grant payments.
- 51b.8 Use of project funds.
- 51b.9 Civil rights.
- 51b.10 Confidentiality.
- 51b.11 Inventions or discoveries.
- 51b.12 Publications and copyright.
- 51b.13 Grantee accountability.
- 51b.14 [Reserved]
- 51b.15 Additional conditions.
- 51b.16 Applicability of 45 CFR Part 74.
- 51b.17 Voluntary participation.

**AUTHORITY:** The provisions of this Part 51b issued under sec. 215, 58 Stat. 690; 42 U.S.C. 216. Sec. 317, 84 Stat. 988; 42 USC 247b, as amended.

**SOURCE:** The provisions of this Part 51b appear at 37 F.R. 7000, Apr. 7, 1972, unless otherwise noted.

**§ 51b.1 Applicability.**

These regulations are applicable to the award of grants under section 317 of the Public Health Service Act (42 U.S.C. 247b) for the support of communicable disease control programs.

**§ 51b.2 Definitions.**

As used in these regulations:

(a) "Act" means the Public Health Service Act.

(b) "Secretary" means the Secretary of Health, Education, and Welfare and any other officer or employee of the Department of Health, Education, and Welfare to whom the authority involved has been delegated.

(c) "State" means one of the 50 States, the Commonwealth of Puerto Rico, Guam, American Samoa, the Trust Territory of the Pacific Islands, the Virgin Islands, and the District of Columbia.

(d) "Communicable disease control program or project" means a program or project which is designed and conducted so as to contribute to national protec-

tion against tuberculosis, venereal disease, rubella, measles, Rh disease, poliomyelitis, diphtheria, tetanus, whooping cough or other communicable diseases which are transmitted from State to State, are amenable to reduction, and which are determined by the Secretary on the recommendation of the National Advisory Health Council to be of national significance.

**§ 51b.3 Eligibility.**

(a) *Eligible applicant.* Any State, or with the approval of the appropriate State Health authority, any political subdivision or instrumentality of a State, is eligible for a grant award under these regulations.

(b) *Eligible projects.* Grants pursuant to section 317 of the Act and these regulations may be made to eligible applicants for the purpose of meeting the cost of communicable disease control programs, including studies to determine the communicable disease control needs of communities and the means of best meeting those needs.

**§ 51b.4 Application for grant.**

(a) An application for a grant under these regulations shall be submitted to the Secretary at such time and in such form as the Secretary may prescribe.<sup>1</sup> The application shall contain a full and adequate description of the project and of the manner in which the applicant intends to conduct the project and carry out the requirements of these regulations, including a description of the nature and extent of the problems to be met, the environment in which the project will function, and the relationship of the applicant to the community, the medical societies, and voluntary health agencies in the area to be served. The application shall also contain a budget and justification of the amount of grant funds requested, and such other pertinent information as the Secretary may require.

(b) The application shall be executed by an individual authorized to act for the applicant and to assume for the applicant the obligations imposed by these regulations and any additional conditions of the grant.

<sup>1</sup> Applications and Instructions may be obtained from the Regional Health Director of the Health Services and Mental Health Administration at the Regional Office of the Department of Health, Education, and Welfare for the region in which the project is to be conducted.