

## §55a.201

42 CFR part 50, subpart D—Public Health Service grant appeals procedure;  
42 CFR part 50, subpart E—Maximum allowable cost for drugs;  
45 CFR part 16—Procedures of the Departmental Grant Appeals Board;  
45 CFR part 19—Limitations on payment or reimbursement for drugs;  
45 CFR part 74—Administration of grants;  
45 CFR part 75—Informal grant appeals procedures;  
45 CFR part 80—Nondiscrimination under programs receiving Federal assistance through the Department of Health and Human Services effectuation of title VI of the Civil Rights Act of 1964;  
45 CFR part 81—Practice and procedure for hearings under part 80;  
45 CFR part 84—Nondiscrimination on the basis of handicap in programs and activities receiving or benefiting from Federal financial assistance; and  
45 CFR part 91—Nondiscrimination on the basis of age in HHS programs or activities receiving Federal financial assistance.

### Subpart B—Grants to States

#### §55a.201 What is required for a State application?

An approvable State application must contain assurances that the State will:

(a) Provide the following services for active and inactive miners in the State:

- (1) Primary care;
- (2) Patient and family education and counseling;
- (3) Outreach;
- (4) Patient care coordination, including individual patient care plans for all patients;
- (5) Antismoking advice; and
- (6) Other symptomatic treatments.

(b) Provide medical services in consultation with a physician with special training or experience in the diagnosis and treatment of respiratory diseases.

(c) Meet all criteria for approval and designation by the Department of Labor under 20 CFR part 725 to perform disability examination and provide treatment under the Act.

(d) Use grant funds under this part to supplement and not supplant existing services of the State.

(e) Provide the services described above for those miners previously served by a Black Lung Clinic in the State for which grant support expires

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during the funding period of the State's grant.

(f) Provide services described above regardless of a person's ability to pay.

(g) Audit its expenditures from amounts received under this part in accordance with the provisions of Attachment P, Audit Requirements, of Office of Management and Budget Circular A–102, Uniform Requirements for Assistance to State and Local Governments, as adopted for the Department of Health and Human Services by 45 CFR part 74.

(Approved by the Office of Management and Budget under control number 0915–0081)

[50 FR 7913, Feb. 27, 1985, as amended at 50 FR 53156, Dec. 30, 1985]

### Subpart C—Grants to Entities Other Than States

#### §55a.301 What is required for an application from an entity other than a State?

An approvable application must contain the following:

(a) A plan for the provision of the services required by §55a.201(a), consistent with the requirements of §55a.201 (b) and (c). The plan must also contain at least the following elements:

(1) A description of the target population to whom services are to be provided, including a statement of the need for services;

(2) An assurance that charges shall be made for services rendered as follows:

(i) A schedule shall be maintained listing fees or payments for the provision of services, designed to cover reasonable costs of operations;

(ii) A schedule of discounts adjusted on the basis of a patient's ability to pay shall be maintained. The schedule of discounts must provide for a full discount to individuals and families with annual incomes at or below the poverty line established in accordance with section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2)), (except that nominal fees for service may be requested, but not required, from individuals and families with annual incomes at or below the poverty line). No

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discounts shall be provided to individuals and families with annual incomes greater than twice the poverty line; and

(iii) Where third-party payors (including Government Agencies) are authorized or under a legal obligation to pay all or a portion of such charges, all services covered by that reimbursement plan will be billed and every reasonable effort will be made to obtain payment.

(b) An assurance that no person will be denied services because of inability to pay.

(c) An assurance that grant funds received under this part will be used to supplement and not supplant existing services of the grantee.

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AUTHORITY: Secs. 215, 319, Public Health Service Act (42 U.S.C. 216, 247d).

SOURCE: 42 FR 60406, Nov. 25, 1977, unless otherwise noted.

**Subpart A—General Provisions**

**§ 56.101 Applicability.**

The regulations of this subpart are applicable to all grants authorized by section 319 of the Public Health Service Act (42 U.S.C. 247d).

**§ 56.102 Definitions.**

As used in this part:

(a) *Act* means the Public Health Service Act (42 U.S.C. 201 *et seq.*), as amended.

(b)(1) *Agriculture* means farming in all its branches, including—

- (i) Cultivation and tillage of the soil;
- (ii) The production, cultivation, growing, and harvesting of any commodity grown on, in, or as an adjunct to or part of a commodity grown in, or on, the land; and