

cise the functions prescribed by this section; and

(C) the Director of each national research institute shall perform for such advisory council the functions prescribed by this section.

(2)(A) The National Cancer Advisory Board shall be the advisory council for the National Cancer Institute. This section applies to the National Cancer Advisory Board, except that—

(i) appointments to such Board shall be made by the President;

(ii) the term of office of an appointed member shall be 6 years;

(iii) of the members appointed to the Board not less than five members shall be individuals knowledgeable in environmental carcinogenesis (including carcinogenesis involving occupational and dietary factors);

(iv) the chairman of the Board shall be selected by the President from the appointed members and shall serve as chairman for a term of two years;

(v) the ex officio members of the Board shall be nonvoting members and shall be the Secretary, the Director of the Office of Science and Technology Policy, the Director of NIH, the Under Secretary for Health of the Department of Veterans Affairs, the Director of the National Institute for Occupational Safety and Health, the Director of the National Institute of Environmental Health Sciences, the Secretary of Labor, the Commissioner of the Food and Drug Administration, the Administrator of the Environmental Protection Agency, the Chairman of the Consumer Product Safety Commission, the Assistant Secretary of Defense for Health Affairs, and the Director of the Office of Science of the Department of Energy (or the designees of such officers); and

(vi) the Board shall meet at least four times each fiscal year.

(B) This section applies to the advisory council to the National Heart, Lung, and Blood Institute, except that the advisory council shall meet at least four times each fiscal year.

(July 1, 1944, ch. 373, title IV, § 406, as added Pub. L. 99-158, § 2, Nov. 20, 1985, 99 Stat. 828; amended Pub. L. 100-607, title I, § 117, Nov. 4, 1988, 102 Stat. 3053; Pub. L. 101-381, title I, § 102(1), Aug. 18, 1990, 104 Stat. 585; Pub. L. 102-405, title III, § 302(e)(1), Oct. 9, 1992, 106 Stat. 1985; Pub. L. 103-43, title II, § 210(a), title XX, §§ 2008(b)(1), 2010(b)(2), June 10, 1993, 107 Stat. 149, 210, 214; Pub. L. 105-245, title III, § 309(b)(2)(C), Oct. 7, 1998, 112 Stat. 1853.)

REFERENCES IN TEXT

Section 284b of this title, referred to in subsec. (g), was repealed by Pub. L. 109-482, title I, § 104(b)(1)(C), Jan. 15, 2007, 120 Stat. 3693.

AMENDMENTS

1998—Subsec. (h)(2)(A)(v). Pub. L. 105-245 substituted “Science of the Department of Energy” for “Energy Research of the Department of Energy”.

1993—Subsec. (a)(2). Pub. L. 103-43, § 2010(b)(2), substituted “section 238” for “section 300aaa”.

Subsec. (b)(2)(A). Pub. L. 103-43, § 2008(b)(1)(A), substituted “Department of Veterans Affairs” for “Veterans’ Administration” in two places.

Subsec. (c). Pub. L. 103-43, § 210(a), substituted “for 180 days after the date of such expiration” for “until a successor has taken office”.

Subsec. (h)(2)(A)(v). Pub. L. 103-43, § 2008(b)(1)(B), substituted “Department of Veterans Affairs” for “Veterans’ Administration”.

1992—Subsecs. (b)(2)(A), (h)(2)(A)(v). Pub. L. 102-405 substituted “Under Secretary for Health” for “Chief Medical Director”.

1990—Subsec. (a)(2). Pub. L. 101-381 made technical amendment to reference to section 300aaa of this title to reflect renumbering of corresponding section of original act.

1988—Subsec. (b)(1). Pub. L. 100-607, § 117(a), inserted at end “The ex officio members shall be nonvoting members.”

Subsec. (b)(3)(A). Pub. L. 100-607, § 117(b), inserted “not less than two individuals who are leaders in the fields of” after “(including)”.

Subsec. (h)(2)(A)(v). Pub. L. 100-607, § 117(c), inserted “shall be nonvoting members and” after “Board” and substituted “the Assistant Secretary of Defense for Health Affairs, and the Director of the Office of Energy Research of the Department of Energy” for “and the Assistant Secretary of Defense for Health Affairs”.

TERMINATION OF ADVISORY COUNCILS

Advisory councils established after Jan. 5, 1973, to terminate not later than the expiration of the 2-year period beginning on the date of their establishment, unless, in the case of a council established by the President or an officer of the Federal Government, such council is renewed by appropriate action prior to the expiration of such 2-year period, or in the case of a council established by the Congress, its duration is otherwise provided by law. See sections 3(2) and 14 of Pub. L. 92-463, Oct. 6, 1972, 86 Stat. 770, 776, set out in the Appendix to Title 5, Government Organization and Employees.

Pub. L. 93-641, § 6, Jan. 4, 1975, 88 Stat. 2275, set out as a note under section 217a of this title, provided that an advisory committee established pursuant to the Public Health Service Act shall terminate at such time as may be specifically prescribed by an Act of Congress enacted after Jan. 4, 1975.

REFERENCES IN OTHER LAWS TO GS-16, 17, OR 18 PAY RATES

References in laws to the rates of pay for GS-16, 17, or 18, or to maximum rates of pay under the General Schedule, to be considered references to rates payable under specified sections of Title 5, Government Organization and Employees, see section 529 [title I, § 101(c)(1)] of Pub. L. 101-509, set out in a note under section 5376 of Title 5.

§ 284b. Repealed. Pub. L. 109-482, title I, § 104(b)(1)(C), Jan. 15, 2007, 120 Stat. 3693

Section, act July 1, 1944, ch. 373, title IV, § 407, as added Pub. L. 99-158, § 2, Nov. 20, 1985, 99 Stat. 831, related to biennial report and its contents.

EFFECTIVE DATE OF REPEAL

Repeal 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.

§ 284c. Certain uses of funds

(a)(1) Except as provided in paragraph (2), the sum of the amounts obligated in any fiscal year for administrative expenses of the National Institutes of Health may not exceed an amount which is 5.5 percent of the total amount appropriated for such fiscal year for the National Institutes of Health.

(2) Paragraph (1) does not apply to the National Library of Medicine, the National Center

for Nursing Research, the John E. Fogarty International Center for Advanced Study in the Health Sciences, the Warren G. Magnuson Clinical Center, and the Office of Medical Applications of Research.

(3) For purposes of paragraph (1), the term “administrative expenses” means expenses incurred for the support of activities relevant to the award of grants, contracts, and cooperative agreements and expenses incurred for general administration of the scientific programs and activities of the National Institutes of Health.

(b) For fiscal year 1989 and subsequent fiscal years, amounts made available to the National Institutes of Health shall be available for payment of nurses and allied health professionals in accordance with payment authorities, scheduling options, benefits, and other authorities provided under chapter 73 of title 38 for nurses of the Department of Veterans Affairs.

(July 1, 1944, ch. 373, title IV, § 408, as added Pub. L. 99-158, § 2, Nov. 20, 1985, 99 Stat. 831; amended Pub. L. 100-607, title I, § 118, Nov. 4, 1988, 102 Stat. 3053; Pub. L. 100-690, title II, § 2613(d), Nov. 18, 1988, 102 Stat. 4239; Pub. L. 103-43, title IV, § 403(b)(1), title XX, § 2008(b)(2), June 10, 1993, 107 Stat. 158, 211; Pub. L. 104-316, title I, § 122(a), Oct. 19, 1996, 110 Stat. 3836; Pub. L. 105-362, title VI, § 601(a)(1)(B), Nov. 10, 1998, 112 Stat. 3285.)

AMENDMENTS

1998—Subsec. (a)(4). Pub. L. 105-362 struck out par. (4) which read as follows: “Not later than December 31, 1987, and December 31 of each succeeding year, the Secretary shall report to the Congress the amount obligated in the fiscal year preceding such date for administrative expenses of the National Institutes of Health and the total amount appropriated for the National Institutes of Health for such fiscal year. The Secretary shall consult with the Comptroller General of the United States in preparing each report.”

1996—Subsec. (a)(3). Pub. L. 104-316 struck out at end “In identifying expenses incurred for such support and administration the Secretary shall consult with the Comptroller General of the United States.”

1993—Pub. L. 103-43 amended section catchline generally, redesignated subsec. (b) as (a) and par. (5) of subsec. (a) as (b), struck out former subsec. (a) which authorized appropriations in addition to amounts otherwise appropriated under this subchapter for the National Cancer Institute for programs other than under section 285a-1 of this title and for its program under section 285a-1 of this title and for the National Heart, Lung, and Blood Institute for programs other than under section 285b-1 of this title and for its program under section 285b-1 of this title, and substituted “Department of Veterans Affairs” for “Veterans’ Administration” in subsec. (b).

1988—Subsec. (a)(1), (2). Pub. L. 100-607, § 118(a), amended pars. (1) and (2) generally. Prior to amendment, pars. (1) and (2) read as follows:

“(1)(A) For the National Cancer Institute (other than its programs under section 285a-1 of this title), there are authorized to be appropriated \$1,194,000,000 for fiscal year 1986, \$1,270,000,000 for fiscal year 1987, and \$1,344,000,000 for fiscal year 1988.

“(B) For the programs under section 285a-1 of this title, there are authorized to be appropriated \$68,000,000 for fiscal year 1986, \$74,000,000 for fiscal year 1987, and \$80,000,000 for fiscal year 1988.

“(2)(A) For the National Heart, Lung, and Blood Institute (other than its programs under section 285b-1 of this title), there are authorized to be appropriated \$809,000,000 for fiscal year 1986, \$871,000,000 for fiscal year 1987, and \$927,000,000 for fiscal year 1988. Of the

amount appropriated under this subsection for such fiscal year, not less than 15 percent of such amount shall be reserved for programs respecting diseases of the lung and not less than 15 percent of such amount shall be reserved for programs respecting blood diseases and blood resources.

“(B) For the programs under section 285b-1 of this title, there are authorized to be appropriated \$82,000,000 for fiscal year 1986, \$90,000,000 for fiscal year 1987, and \$98,000,000 for fiscal year 1988.”

Subsec. (a)(2)(B). Pub. L. 100-690 inserted a comma after “section 285b-1 of this title”.

Subsec. (b)(5). Pub. L. 100-607, § 118(b), added par. (5).

CHANGE OF NAME

National Center for Nursing Research changed to National Institute of Nursing Research by Pub. L. 103-43, title XV, § 1511, June 10, 1993, 107 Stat. 178.

EFFECTIVE DATE OF 1988 AMENDMENT

Amendment by Pub. L. 100-690 effective immediately after enactment of Pub. L. 100-607, which was approved Nov. 4, 1988, see section 2600 of Pub. L. 100-690, set out as a note under section 242m of this title.

WARREN G. MAGNUSON CLINICAL CENTER; AVAILABILITY OF FUNDS FOR PAYMENT OF NURSES; RATE OF PAY AND OPTIONS AND BENEFITS

Pub. L. 99-349, title I, July 2, 1986, 100 Stat. 738, provided that: “Funds made available for fiscal year 1986 and hereafter to the Warren G. Magnuson Clinical Center of the National Institutes of Health shall be available for payment of nurses at the rates of pay and with schedule options and benefits authorized for the Veterans Administration pursuant to 38 U.S.C. 4107.”

§ 284d. Definitions

(a) Health service research

For purposes of this subchapter, the term “health services research” means research endeavors that study the impact of the organization, financing and management of health services on the quality, cost, access to and outcomes of care. Such term does not include research on the efficacy of services to prevent, diagnose, or treat medical conditions.

(b) Clinical research

As used in this subchapter, the term “clinical research” means patient oriented clinical research conducted with human subjects, or research on the causes and consequences of disease in human populations involving material of human origin (such as tissue specimens and cognitive phenomena) for which an investigator or colleague directly interacts with human subjects in an outpatient or inpatient setting to clarify a problem in human physiology, pathophysiology or disease, or epidemiologic or behavioral studies, outcomes research or health services research, or developing new technologies, therapeutic interventions, or clinical trials.

(July 1, 1944, ch. 373, title IV, § 409, as added Pub. L. 102-321, title I, § 121(b), July 10, 1992, 106 Stat. 358; amended Pub. L. 103-43, title XX, § 2016(a), June 10, 1993, 107 Stat. 218; Pub. L. 106-505, title II, § 206, Nov. 13, 2000, 114 Stat. 2329.)

AMENDMENTS

2000—Pub. L. 106-505 designated existing provisions as subsec. (a), inserted heading, and added subsec. (b).

1993—Pub. L. 103-43 inserted at end “Such term does not include research on the efficacy of services to prevent, diagnose, or treat medical conditions.”