

### § 6.1

(b) Companion animal veterinarian shortage =  $(\text{resident civilian pop.} / 30,000) - (\text{number of companion animal veterinarians})$ .

#### 6. *Contiguous Area Considerations.*

Veterinary professional(s) in areas contiguous to an area being considered for designation will be considered excessively distant from the population of the area or overutilized if one of the following conditions prevails in each contiguous area:

(a) Veterinary professional(s) in the contiguous area are more than 60 minutes travel time from the center of the area being considered for designation (measured in accordance with paragraph C.1.(b) of this part).

(b) In the case of food animal veterinary professional(s), the VLU-to-food animal veterinarian ratio in the contiguous area is in excess of 5,000:1.

(c) In the case of companion animal veterinary professional(s), the population-to-companion animal veterinarian ratio in the contiguous area is in excess of 15,000:1.

#### C. *Determination of Degree-of-Shortage.*

Designated areas will be assigned to degree-of-shortage groups as follows:

Group 1—Areas with a food animal veterinarian shortage and no veterinarians.

Group 2—Areas (not included above) with a food animal veterinarian shortage and no food animal veterinarians.

Group 3—All other food animal veterinarian shortage areas.

Group 4—All companion animal shortage areas (not included above) having no veterinarians.

Group 5—All other companion animal shortage areas.

## PART 6—FEDERAL TORT CLAIMS ACT COVERAGE OF CERTAIN GRANTEES AND INDIVIDUALS

Sec.

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AUTHORITY: Sections 215 and 224 of the Public Health Service Act, 42 U.S.C. 216 and 233.

SOURCE: 60 FR 22532, May 8, 1995, unless otherwise noted.

### § 6.1 Applicability.

This part applies to entities and individuals whose acts and omissions related to the performance of medical, surgical, dental, or related functions are covered by the Federal Tort Claims Act (28 U.S.C. 1346(b) and 2671–2680) in ac-

cordance with the provisions of section 224(g) of the Public Health Service Act (42 U.S.C. 233(g)).

### § 6.2 Definitions.

*Act* means the Public Health Service Act, as amended.

*Attorney General* means the Attorney General of the United States and any other officer or employee of the Department of Justice to whom the authority involved has been delegated.

*Covered entity* means an entity described in § 6.3 which has been deemed by the Secretary, in accordance with § 6.5, to be covered by this part.

*Covered individual* means an individual described in § 6.4.

*Effective date* as used in § 6.5 and § 6.6 refers to the date of the Secretary's determination that an entity is a covered entity.

*Secretary* means the Secretary of Health and Human Services (HHS) and any other officer or employee of the Department of HHS to whom the authority involved has been delegated.

*Subrecipient* means an entity which receives a grant or a contract from a covered entity to provide a full range of health services on behalf of the covered entity.

### § 6.3 Eligible entities.

(a) *Grantees.* Entities eligible for coverage under this part are public and nonprofit private entities receiving Federal funds under any of the following grant programs:

(1) Section 329 of the Act (relating to grants for migrant health centers);

(2) Section 330 of the Act (relating to grants for community health centers);

(3) Section 340 of the Act (relating to grants for health services for the homeless); and

(4) Section 340A of the Act (relating to grants for health services for residents of public housing).

(b) *Subrecipients.* Entities that are subrecipients of grant funds described in paragraph (a) of this section are eligible for coverage only if they provide a full range of health care services on behalf of an eligible grantee and only for those services carried out under the grant funded project.