

30,000)–(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 5a—RURAL PHYSICIAN TRAINING GRANT PROGRAM

Sec.

5a.1 Statutory basis and purpose.

5a.2 Applicability.

5a.3 Definition of Underserved Rural Community.

**AUTHORITY:** Sec. 749B of the Public Health Service Act (42 U.S.C. 293k) as amended.

**SOURCE:** 75 FR 29451, May 26, 2010, unless otherwise noted.

### § 5a.1 Statutory basis and purpose.

This part implements section 749B(f) of the Public Health Service Act. These provisions define “underserved rural community” for purposes of the Rural Physician Training Grant Program.

### § 5a.2 Applicability.

This part applies to grants made under section 749B of the Public Health Service Act.

### § 5a.3 Definition of Underserved Rural Community.

*Underserved Rural Community* means a community:

(a) Located in:

(1) A non-Metropolitan County or Micropolitan county; or

(2) If it is within a Metropolitan county, all Census Tracts that are assigned a Rural-Urban Commuting Area (RUCAs) codes of 4–10; or

(3) Census Tracts within a Metropolitan Area with RUCA codes 2 and 3 that are larger than 400 square miles and have population density of less than 30 people per square mile; and

(b) Located in a current:

(1) Federally-designated Primary Health Care Geographic Health Professions Shortage Area, (under section 332(a)(1)(A) of the Public Health Service Act) or

(2) Federally-designated Medically Underserved Area (under section 330(b)(3) of the Public Health Service Act).

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

Sec.

6.1 Applicability.

6.2 Definitions.

6.3 Eligible entities.

6.4 Covered individuals.

6.5 Deeming process for eligible entities.

6.6 Covered acts and omissions.

**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 accordance 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