

82 Stat. 1304.  
44 USC 3508.

“(e) Section 3508(a) of this chapter dealing with unlawful disclosure of information shall apply to the use of information by independent regulatory agencies.

Regulations.

“(f) The Comptroller General may promulgate rules and regulations necessary to carry out this chapter.”

#### EQUITABLE ALLOCATION OF NORTH SLOPE CRUDE OIL

SEC. 410. The Congress declares that the crude oil on the North Slope of Alaska is an important part of the Nation's oil resources, and that the benefits of such crude oil should be equitably shared, directly or indirectly, by all regions of the country. The President shall use an authority he may have to insure an equitable allocation of available North Slope and other crude oil resources and petroleum product among all regions and all of the several States.

#### SEPARABILITY

SEC. 411. If any provision of this Act or the applicability thereof is held invalid the remainder of this Act shall not be affected thereby.  
Approved November 16, 1973.

#### Public Law 93-154

#### AN ACT

November 16, 1973  
[S. 2410]

To amend the Public Health Service Act to provide assistance and encouragement for the development of comprehensive area emergency medical service systems.

Emergency Medical Services Systems Act of 1973.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

#### SHORT TITLE

SECTION 1. This Act may be cited as the “Emergency Medical Services Systems Act of 1973”.

#### EMERGENCY MEDICAL SERVICES SYSTEMS

58 Stat. 682;  
86 Stat. 137.  
42 USC 201  
note.

SEC. 2. (a) The Public Health Service Act is amended by adding at the end thereof the following new title:

#### “TITLE XII—EMERGENCY MEDICAL SERVICES SYSTEMS

#### “DEFINITIONS

“SEC. 1201. For purposes of this title:

“(1) The term ‘emergency medical services system’ means a system which provides for the arrangement of personnel, facilities, and equipment for the effective and coordinated delivery of

an appropriate geographical area of health care services under emergency conditions (occurring either as a result of the patient's condition or of natural disasters or similar situations) and which is administered by a public or nonprofit private entity which has the authority and the resources to provide effective administration of the system.

“(2) The term ‘State’ includes the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Trust Territory of the Pacific Islands.

“(3) The term ‘modernization’ means the alteration, major repair (to the extent permitted by regulations), remodeling, and renovation of existing buildings (including initial equipment thereof), and replacement of obsolete, built-in (as determined in accordance with regulations) equipment of existing buildings.

“(4) The term ‘section 314(a) State health planning agency’ means the agency of a State which administers or supervises the administration of a State's health planning functions under a State plan approved under section 314(a).

“(5) The term ‘section 314(b) areawide health planning agency’ means a public or nonprofit private agency or organization which has developed a comprehensive regional, metropolitan, or other local area plan or plans referred to in section 314(b), and the term ‘section 314(b) plan’ means a comprehensive regional, metropolitan, or other local area plan or plans referred to in section 314(b).

80 Stat. 1181;  
84 Stat. 1304.  
42 USC 246.

84 Stat. 340.  
1304.

“GRANTS AND CONTRACTS FOR FEASIBILITY STUDIES AND PLANNING

“SEC. 1202. (a) The Secretary may make grants to and enter into contracts with eligible entities (as defined in section 1206(a)) for projects which include both (1) studying the feasibility of establishing through expansion or improvement of existing services or otherwise) and operating an emergency medical services system, and (2) planning the establishment and operation of such a system.

Post, p. 598.

“(b) If the Secretary makes a grant or enters into a contract under this section for a study and planning project respecting an emergency medical services system for a particular geographical area, the Secretary may not make any other grant or enter into any other contract under this section for such project, and he may not make a grant or enter into a contract under this section for any other study and planning project respecting an emergency medical services system for the same area or for an area which includes (in whole or substantial part) such area.

Geographical area, limitation.

“(c) Reports of the results of any study and planning project assisted under this section shall be submitted to the Secretary and the Interagency Committee on Emergency Medical Services at such intervals as the Secretary may prescribe, and a final report of such results shall be submitted to the Secretary and such Committee not later than one year from the date the grant was made or the contract entered into, as the case may be.

Reports.

Application re-  
quirements.

- “(d) An application for a grant or contract under this section shall—
  - “(1) demonstrate to the satisfaction of the Secretary the need of the area for which the study and planning will be done for an emergency medical services system;
  - “(2) contain assurances satisfactory to the Secretary that the applicant is qualified to plan an emergency medical services system for such area; and
  - “(3) contain assurances satisfactory to the Secretary that the planning will be conducted in cooperation (A) with each section 314(b) areawide health planning agency whose section 314(b) plan covers (in whole or in part) such area, and (B) with any emergency medical services council or other entity responsible for review and evaluation of the provision of emergency medical services in such area.
- “(e) The amount of any grant under this section shall be determined by the Secretary.

“GRANTS AND CONTRACTS FOR ESTABLISHING AND INITIAL OPERATION

Contracts with  
eligible entities.  
Post, p. 598.

“SEC. 1203. (a) The Secretary may make grants to and enter into contracts with eligible entities (as defined in section 1206(a)) for the establishment and initial operation of emergency medical services systems.

Coordination  
with state-wide  
system.

“(b) Special consideration shall be given to applications for grants and contracts for systems which will coordinate with statewide emergency medical services system.

Emergency facil-  
ities, moderniza-  
tion.

“(c)(1) Grants and contracts under this section may be used for the modernization of facilities for emergency medical services systems and other costs of establishment and initial operation.

Additional grant  
or contract.

“(2) Each grant or contract under this section shall be made for costs of establishment and operation in the year for which the grant or contract is made. If a grant or contract is made under this section for a system, the Secretary may make one additional grant or contract for that system if he determines, after a review of the first nine months' activities of the applicant carried out under the first grant or contract, that the applicant is satisfactorily progressing in the establishment and operation of the system in accordance with the plan contained in his application (pursuant to section 1206(b)(4)) for the first grant or contract.

Limitation.

“(3) No grant or contract may be made under this section for the fiscal year ending June 30, 1976, to an entity which did not receive a grant or contract under this section for the preceding fiscal year.

Cost limitation.

“(4) Subject to section 1206(f)—

- “(A) the amount of the first grant or contract under this section for an emergency medical services system may not exceed
  - (i) 50 per centum of the establishment and operation costs (as determined pursuant to regulations of the Secretary) of the system for the year for which the grant or contract is made, or
  - (ii) in the case of applications which demonstrate an exceptional need for financial assistance, 75 per centum of such costs for such year; and

“(B) the amount of the second grant or contract under this section for a system may not exceed (i) 25 per centum of the establishment and operation costs (as determined pursuant to regulations of the Secretary) of the system for the year for which the grant or contract is made, or (ii) in the case of applications which demonstrate an exceptional need for financial assistance, 50 per centum of such costs for such year.

“(5) In considering applications which demonstrate exceptional need for financial assistance, the Secretary shall give special consideration to applications submitted for emergency medical services systems for rural areas (as defined in regulations of the Secretary).

Rural area systems, financial assistance.

#### “GRANTS AND CONTRACTS FOR EXPANSION AND IMPROVEMENT

“SEC. 1204. (a) The Secretary may make grants to and enter into contracts with eligible entities (as defined in section 1206(a)) for projects for the expansion and improvement of emergency medical services systems, including the acquisition of equipment and facilities, the modernization of facilities, and other projects to expand and improve such systems.

Post, p. 598.

“(b) Subject to section 1206(f), the amount of any grant or contract under this section for a project shall not exceed (i) 50 per centum of the cost of that project (as determined pursuant to regulations of the Secretary), or (ii) in the case of applications which demonstrate an exceptional need for financial assistance, 75 per centum of such costs.

Cost limitation.

#### “GRANTS AND CONTRACTS FOR RESEARCH

“SEC. 1205. (a) The Secretary may make grants to public or private nonprofit entities, and enter into contracts with private entities and individuals, for the support of research in emergency medical techniques, methods, devices, and delivery. The Secretary shall give special consideration to applications for grants or contracts for research relating to the delivery of emergency medical services in rural areas.

Rural area systems, research.

“(b) No grant may be made or contract entered into under this section for amounts in excess of \$35,000 unless the application therefor has been recommended for approval by an appropriate peer review panel designated or established by the Secretary. Any application for a grant or contract under this section shall be submitted in such form and manner, and contain such information, as the Secretary shall prescribe in regulations.

Cost limitation.

“(c) The recipient of a grant or contract under this section shall make such reports to the Secretary as the Secretary may require.

Reports to HEW.

“GENERAL PROVISIONS RESPECTING GRANTS AND CONTRACTS

“Eligible  
entity.”

*Ante*, pp. 595-  
597.

“SEC. 1206. (a) For purposes of sections 1202, 1203, and 1204, the term ‘eligible entity’ means—

“(1) a State,

“(2) a unit of general local government,

“(3) a public entity administering a compact or other regional arrangement or consortium, or

“(4) any other public entity and any nonprofit private entity.

“(b) (1) No grant or contract may be made under this title unless an application therefor has been submitted to, and approved by, the Secretary.

Priority con-  
sideration.

“(2) In considering applications submitted under this title, the Secretary shall give priority to applications submitted by the entities described in clauses (1), (2), and (3) of subsection (a).

“(3) No application for a grant or contract under section 1202 may be approved unless—

“(A) the application meets the application requirements of such section;

“(B) in the case of an application submitted by a public entity administering a compact or other regional arrangement or consortium, the compact or other regional arrangement or consortium includes each unit of general local government of each standard metropolitan statistical area (as determined by the Office of Management and Budget) located (in whole or in part) in the service area of the emergency medical services system for which the application is submitted;

“(C) in the case of an application submitted by an entity described in clause (4) of subsection (a), such entity has provided a copy of its application to each entity described in clause (1), (2), and (3) of such subsection which is located (in whole or in part) in the service area of the emergency medical services system for which the application is submitted and has provided each such entity a reasonable opportunity to submit to the Secretary comments on the application;

“(D) the—

“(i) section 314(a) State health planning agency of each State in which the service area of the emergency medical services system for which the application is submitted will be located, and

“(ii) section 314(b) area-wide health planning agency (if any) whose section 314(b) plan covers (in whole or in part) the service area of such system,

have had not less than thirty days (measured from the date a copy of the application was submitted to the agency by the applicant) in which to comment on the application;

“(E) the applicant agrees to maintain such records and make such reports to the Secretary as the Secretary determines are necessary to carry out the provisions of this title; and

Recordkeeping;  
reports to HEW.

“(F) the application is submitted in such form and such manner and contains such information (including specification of applicable provisions of law or regulations which restrict the full utilization of the training and skills of health professions and allied and other health personnel in the provision of health care services in such a system) as the Secretary shall prescribe in regulations.

“(4) (A) An application for a grant or contract under section 1203 1204 may not be approved by the Secretary unless (i) the application meets the requirements of subparagraphs (B) through (F) of paragraph (3), and (ii) except as provided in subparagraph (B) (ii), the applicant (I) demonstrates to the satisfaction of the Secretary at the emergency medical services system for which the application submitted will, within the period specified in subparagraph (B) (i), meet each of the emergency medical services system requirements specified in subparagraph (C), and (II) provides in the application plan satisfactory to the Secretary for the system to meet each such requirement within such period.

“(B) (i) The period within which an emergency medical services system must meet each of the requirements specified in subparagraph (C) is the period of the grant or contract for which application is made; except that if the applicant demonstrates to the satisfaction of the Secretary the inability of the applicant’s emergency medical services system to meet one or more of such requirements within such period, the period (or periods) within which the system must meet each requirement (or requirements) is such period (or periods) as the Secretary may require.

“(ii) If an applicant submits an application for a grant or contract under section 1203 or 1204 and demonstrates to the satisfaction of the Secretary the inability of the system for which the application submitted to meet one or more of the requirements specified in subparagraph (C) within any specific period of time, the demonstration and plan prerequisites prescribed by clause (ii) of subparagraph (C) shall not apply with respect to such requirement (or requirements) and the applicant shall provide in his application a plan, satisfactory to the Secretary, for achieving appropriate alternatives to such requirement (or requirements).

“(C) An emergency medical services system shall—

“(i) include an adequate number of health professions, allied health professions, and other health personnel with appropriate training and experience;

“(ii) provide for its personnel appropriate training (including clinical training) and continuing education programs which (I) are coordinated with other programs in the system’s service area which provide similar training and education, and (II) emphasize recruitment and necessary training of veterans of the Armed Forces with military training and experience in health care fields and of appropriate public safety personnel in such area;

“(iii) join the personnel, facilities, and equipment of the system by a central communications system so that requests for emergency health care services will be handled by a communications facility which (I) utilizes emergency medical telephonic screening, (II) utilizes or, within such period as the Secretary prescribes will utilize, the universal emergency telephone number 911, and (III) will have direct communication connections and interconnections with the personnel, facilities, and equipment of the system and with other appropriate emergency medical services systems;

Prohibitions.

Ante, pp. 596, 597.

Grant or contract period.

Alternate plan, submittal to HEW.

Emergency medical services system requirements.

“(iv) include an adequate number of necessary ground, air, and water vehicles and other transportation facilities to meet the individual characteristics of the system’s service area—

“(I) which vehicles and facilities meet appropriate standards relating to location, design, performance, and equipment, and

“(II) the operators and other personnel for which vehicles and facilities meet appropriate training and experience requirements;

“(v) include an adequate number of easily accessible emergency medical services facilities which are collectively capable of providing services on a continuous basis, which have appropriate nonduplicative and categorized capabilities, which meet appropriate standards relating to capacity, location, personnel, and equipment, and which are coordinated with other health care facilities of the system;

“(vi) provide access (including appropriate transportation) to specialized critical medical care units in the system’s service area, or, if there are no such units or an inadequate number of them in such area, provide access to such units in neighboring areas if access to such units is feasible in terms of time and distance;

“(vii) provide for the effective utilization of the appropriate personnel, facilities, and equipment of each public safety agency providing emergency services in the system’s service area;

“(viii) be organized in a manner that provides persons who reside in the system’s service area and who have no professional training or financial interest in the provision of health care with an adequate opportunity to participate in the making of policy for the system;

“(ix) provide, without prior inquiry as to ability to pay, necessary emergency medical services to all patients requiring such services;

“(x) provide for transfer of patients to facilities and programs which offer such followup care and rehabilitation as is necessary to effect the maximum recovery of the patient;

“(xi) provide for a standardized patient recordkeeping system meeting appropriate standards established by the Secretary, which records shall cover the treatment of the patient from initial entry into the system through his discharge from it, and shall be consistent with ensuing patient records used in followup care and rehabilitation of the patient;

“(xii) provide programs of public education and information in the system’s service area (taking into account the needs of visitors to, as well as residents of, that area to know or be able to learn immediately the means of obtaining emergency medical services) which programs stress the general dissemination of information regarding appropriate methods of medical self-help and first-aid and regarding the availability of first-aid training programs in the area;

“(xiii) provide for (I) periodic, comprehensive, and independent review and evaluation of the extent and quality of the emergency health care services provided in the system’s service area, and (II) submission to the Secretary of the reports of each such review and evaluation;

“(xiv) have a plan to assure that the system will be capable of providing emergency medical services in the system’s service area during mass casualties, natural disasters, or national emergencies; and

“(xv) provide for the establishment of appropriate arrangements with emergency medical services systems or similar entities serving neighboring areas for the provision of emergency medical services on a reciprocal basis where access to such services would be more appropriate and effective in terms of the services available, time, and distance.

The Secretary shall by regulations prescribe standards and criteria for the requirements prescribed by this subparagraph. In prescribing such standards and criteria, the Secretary shall consider relevant standards and criteria prescribed by other public agencies and by private organizations.

“(5) The Secretary shall provide technical assistance, as appropriate, to eligible entities as necessary for the purpose of their preparing applications or otherwise qualifying for or carrying out grants or contracts under sections 1202, 1203, or 1204, with special consideration for applicants in rural areas.

*Ante*, pp. 595-597.

“(c) Payments under grants and contracts under this title may be made in advance or by way of reimbursement and in such installments and on such conditions as the Secretary determines will most effectively carry out this title.

“(d) Contracts may be entered into under this title without regard to sections 3648 and 3709 of the Revised Statutes (31 U.S.C. 529; 41 U.S.C. 5).

“(e) No funds appropriated under any provision of this Act other than section 1207 or title VII may be used to make a new grant or contract in any fiscal year for a purpose for which a grant or contract is authorized by this title unless (1) all the funds authorized to be appropriated by section 1207 for such fiscal year have been appropriated and made available for obligation in such fiscal year, and (2) such new grant or contract is made in accordance with the requirements of this title that would be applicable to such grant or contract if it was made under this title. For purposes of this subsection, the term ‘new grant or contract’ means a grant or contract for a program or project for which an application was first submitted after the date of the enactment of the Act which makes the first appropriations under the authorizations contained in section 1207.

70 Stat. 717;  
85 Stat. 461.  
42 USC 292.

“New grant or contract.”

“(f)(1) In determining the amount of any grant or contract under section 1203 or 1204, the Secretary shall take into consideration the amount of funds available to the applicant from Federal grant or contract programs under laws other than this Act for any activity which the applicant proposes to undertake in connection with the establishment and operation or expansion and improvement of an emergency medical services system and for which the Secretary may authorize the use of funds under a grant or contract under sections 1203 and 1204.

“(2) The Secretary may not authorize the recipient of a grant or contract under section 1203 or 1204 to use funds under such grant or contract for any training program in connection with an emergency medical services system unless the applicant filed an application (as appropriate) under title VII or VIII for a grant or contract for such program and such application was not approved or was approved but for which no or inadequate funds were made available under such title.

78 Stat. 908;  
80 Stat. 1236.  
42 USC 296.

## “AUTHORIZATION OF APPROPRIATIONS

Ante, pp. 595-597.

“SEC. 1207. (a) (1) For the purpose of making payments pursuant to grants and contracts under sections 1202, 1203, and 1204, there are authorized to be appropriated \$30,000,000 for the fiscal year ending June 30, 1974, and \$60,000,000 for the fiscal year ending June 30, 1975; and for the purpose of making payments pursuant to grants and contracts under sections 1203 and 1204 for the fiscal year ending June 30, 1976, there are authorized to be appropriated \$70,000,000.

“(2) Of the sums appropriated under paragraph (1) for any fiscal year, not less than 20 per centum shall be made available for grants and contracts under this title for such fiscal year for emergency medical services systems which serve or will serve rural areas (as defined in regulations of the Secretary under section 1203(c)(5)).

“(3) Of the sums appropriated under paragraph (1) for the fiscal year ending June 30, 1974, or the succeeding fiscal year—

“(A) 15 per centum of such sums for each such fiscal year shall be made available only for grants and contracts under section 1202 (relating to feasibility studies and planning) for such fiscal year;

“(B) 60 per centum of such sums for each such fiscal year shall be made available only for grants and contracts under section 1203 (relating to establishment and initial operation) for such fiscal year; and

“(C) 25 per centum of such sums for each such fiscal year shall be made available only for grants and contracts under section 1204 (relating to expansion and improvement) for such fiscal year.

“(4) Of the sums appropriated under paragraph (1) for the fiscal year ending June 30, 1976—

“(A) 75 per centum of such sums shall be made available only for grants and contracts under section 1203 for such fiscal year, and

“(B) 25 per centum of such sums shall be made available only for grants and contracts under section 1204 for such fiscal year.

“(b) For the purpose of making payments pursuant to grants and contracts under section 1205 (relating to research), there are authorized to be appropriated \$5,000,000 for the fiscal year ending June 30, 1974, and for each of the next two fiscal years.

## “ADMINISTRATION

“SEC. 1208. The Secretary shall administer the program of grants and contracts authorized by this title through an identifiable administrative unit within the Department of Health, Education, and Welfare. Such unit shall also be responsible for collecting, analyzing, cataloging, and disseminating all data useful in the development and operation of emergency medical services systems, including data derived from reviews and evaluations of emergency medical services systems assisted under section 1203 or 1204.

## “INTERAGENCY COMMITTEE ON EMERGENCY MEDICAL SERVICES

Establishment.

“SEC. 1209. (a) The Secretary shall establish an Interagency Committee on Emergency Medical Services. The Committee shall evaluate the adequacy and technical soundness of all Federal programs and activities which relate to emergency medical services and provide for

the communication and exchange of information necessary to maintain the coordination and effectiveness of such programs and activities, and shall make recommendations to the Secretary respecting the administration of the program of grants and contracts under this title (including the making of regulations for such program).

“(b) The Secretary or his designee shall serve as Chairman of the Committee, the membership of which shall include (1) appropriate scientific, medical, or technical representation from the Department of Transportation, the Department of Justice, the Department of Defense, the Veterans’ Administration, the National Science Foundation, the Federal Communications Commission, the National Academy of Sciences, and such other Federal agencies and offices (including appropriate agencies and offices of the Department of Health, Education, and Welfare), as the Secretary determines administer programs directly affecting the functions or responsibilities of emergency medical services systems, and (2) five individuals from the general public appointed by the President from individuals who by virtue of their training or experience are particularly qualified to participate in the performance of the Committee’s functions. The Committee shall meet at the call of the Chairman, but not less often than four times a year.

Membership.

“(c) Each appointed member of the Committee shall be appointed for a term of four years, except that—

Term.

“(1) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term; and

Vacancies.

“(2) of the members first appointed, two shall be appointed for a term of four years, two shall be appointed for a term of three years, and one shall be appointed for a term of one year, as designated by the President at the time of appointment.

Appointed members may serve after the expiration of their terms until their successors have taken office.

“(d) Appointed members of the Committee shall receive for each day they are engaged in the performance of the functions of the Committee compensation at rates not to exceed the daily equivalent of the annual rate in effect for grade GS-18 of the General Schedule, including traveltime; and all members, while so serving away from their homes or regular places of business, may be allowed travel expenses, including per diem in lieu of subsistence, in the same manner as such expenses are authorized by section 5703 of title 5, United States Code, for persons in the Government service employed intermittently.

Travel expenses.

5 USC 5332.

“(e) The Secretary shall make available to the Committee such staff, information (including copies of reports of reviews and evaluations of emergency medical services systems assisted under section 1203 or 1204), and other assistance as it may require to carry out its activities effectively.

80 Stat. 499;  
83 Stat. 190.

#### “ANNUAL REPORT

“SEC. 1210. The Secretary shall prepare and submit annually to the Congress a report on the administration of this title. Each report shall include an evaluation of the adequacy of the provision of emergency medical services in the United States during the period covered by the report, and evaluation of the extent to which the needs for such services are being adequately met through assistance provided under this title, and his recommendations for such legislation as he determines is required to provide emergency medical services at a level

Report to Congress.

adequate to meet such needs. The first report under this section shall be submitted not later than September 30, 1974, and shall cover the fiscal year ending June 30, 1974."

86 Stat. 137.  
42 USC 201  
note.

(b)(1) Section 1 of the Public Health Service Act is amended by striking out "titles I to XI" and inserting in lieu thereof "titles I to XII".

(2) The Act of July 1, 1944 (58 Stat. 682), as amended, is further amended by renumbering title XII (as in effect prior to the date of enactment of this Act) as title XIII, and by renumbering sections 1201 through 1214 (as in effect prior to such date), and references thereto, as sections 1301 through 1314, respectively.

#### TRAINING ASSISTANCE

Scholarship  
grants.  
85 Stat. 437.  
42 USC 295f.

SEC. 3. (a) Part E of title VII of the Public Health Service Act is amended by inserting after section 775 the following new section:

#### "TRAINING IN EMERGENCY MEDICAL SERVICES

"SEC. 776. (a) The Secretary may make grants to and enter into contracts with schools of medicine, dentistry, osteopathy, and nursing, training centers for allied health professions, and other appropriate educational entities to assist in meeting the cost of training programs in the techniques and methods of providing emergency medical services (including the skills required in connection with the provision of ambulance service), especially training programs affording clinical experience in emergency medical services systems receiving assistance under title XII of this Act.

"(b) No grant or contract may be made or entered into under this section unless (1) the applicant is a public or nonprofit private entity, and (2) an application therefor has been submitted to, and approved by, the Secretary. Such application shall be in such form, submitted in such manner, and contain such information, as the Secretary shall by regulation prescribe.

"(c) The amount of any grant or contract under this section shall be determined by the Secretary. Payments under grants and contracts under this section may be made in advance or by way of reimbursement and at such intervals and on such conditions as the Secretary finds necessary. Grantees and contractees under this section shall make such reports at such intervals, and containing such information, as the Secretary may require.

"(d) Contracts may be entered into under this section without regard to sections 3648 and 3709 of the Revised Statutes (31 U.S.C. 529; 41 U.S.C. 5).

"(e) For the purpose of making payments pursuant to grants and contracts under this section, there are authorized to be appropriated \$10,000,000 for the fiscal year ending June 30, 1974."

(b) Section 772(a) of such Act (42 U.S.C. 295f-2(a)) is amended—

(1) by striking out "or" at the end of paragraph (12),

(2) by striking out the period at the end of paragraph (13) and inserting in lieu thereof "; or", and

(3) by inserting after paragraph (13) the following new paragraph:

Special project  
grants, contracts.  
85 Stat. 444.

“(14) establish and operate programs in the interdisciplinary training of health personnel for the provision of emergency medical services, with particular emphasis on the establishment and operation of training programs affording clinical experience in emergency medical services systems receiving assistance under title XII of this Act.”

(c) Section 774(a)(1)(D) of such Act (42 U.S.C. 295f-4(a)(1)(D)) is amended by inserting “(including emergency medical services)” after “services” each time it appears.

85 Stat. 446.

## STUDY

SEC. 4. The Secretary of Health, Education, and Welfare shall conduct a study to determine the legal barriers to the effective delivery of medical care under emergency conditions. The study shall include consideration of the need for a uniform conflict of laws rule prescribing the law applicable of the provision of emergency medical services to persons in the course of travels on interstate common carriers. Within twelve months of the date of the enactment of this Act, the Secretary shall report to the Congress the results of such study and recommendations for such legislation as may be necessary to overcome such barriers and provide such rule.

Report to Congress.

Approved November 16, 1973.

## Public Law 93-155

## AN ACT

November 16, 1973  
[H. R. 9286]

To authorize appropriations during the fiscal year 1974 for procurement of aircraft, missiles, naval vessels, tracked combat vehicles, torpedoes, and other weapons, and research, development, test and evaluation for the Armed Forces, and to prescribe the authorized personnel strength for each active duty component and of the Selected Reserve of each reserve component of the Armed Forces, and the military training student loads, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

Department of  
Defense Appro-  
priation Authori-  
zation Act, 1974.

## TITLE I—PROCUREMENT

SEC. 101. Funds are hereby authorized to be appropriated during the fiscal year 1974 for the use of the Armed Forces of the United States for procurement of aircraft, missiles, naval vessels, tracked combat vehicles, torpedoes, and other weapons as authorized by law, in amounts as follows:

## Aircraft

For aircraft: for the Army, \$168,000,000; for the Navy and the Marine Corps, \$2,912,600,000 of which amount not to exceed