

Appendix A: Authorizing Legislation

Appendix A1: Authorizing Legislation for Pease Study

Appendix A2: Authorizing Legislation for ATSDR Research

Appendix A3: Authorizing Legislation for NCEH Research

1a: Authorizing Legislation for Pease Study (PL 115-141)

Section 8006 of the Consolidated Appropriations Act, 2018
(see <https://www.congress.gov/115/bills/hr1625/BILLS-115hr1625enr.pdf>)
and supplemental table

1 and in no case where the item for which funds are re-
2 quested has been denied by the Congress: *Provided further*,
3 That the Secretary of Defense shall notify the Congress
4 promptly of all transfers made pursuant to this authority
5 or any other authority in this Act: *Provided further*, That
6 no part of the funds in this Act shall be available to pre-
7 pare or present a request to the Committees on Appropria-
8 tions for reprogramming of funds, unless for higher pri-
9 ority items, based on unforeseen military requirements,
10 than those for which originally appropriated and in no
11 case where the item for which reprogramming is requested
12 has been denied by the Congress: *Provided further*, That
13 a request for multiple reprogrammings of funds using au-
14 thority provided in this section shall be made prior to June
15 30, 2018: *Provided further*, That transfers among military
16 personnel appropriations shall not be taken into account
17 for purposes of the limitation on the amount of funds that
18 may be transferred under this section.

19 **SEC. 8006.** (a) With regard to the list of specific pro-
20 grams, projects, and activities (and the dollar amounts
21 and adjustments to budget activities corresponding to
22 such programs, projects, and activities) contained in the
23 tables titled **Explanation of Project Level Adjustments** in
24 the explanatory statement regarding this Act, the obliga-
25 tion and expenditure of amounts appropriated or other-

1 wise made available in this Act for those programs,
2 projects, and activities for which the amounts appro-
3 priated exceed the amounts requested are hereby required
4 by law to be carried out in the manner provided by such
5 tables to the same extent as if the tables were included
6 in the text of this Act.

7 (b) Amounts specified in the referenced tables de-
8 scribed in subsection (a) shall not be treated as subdivi-
9 sions of appropriations for purposes of section 8005 of this
10 Act: *Provided*, That section 8005 shall apply when trans-
11 fers of the amounts described in subsection (a) occur be-
12 tween appropriation accounts.

13 SEC. 8007. (a) Not later than 60 days after enact-
14 ment of this Act, the Department of Defense shall submit
15 a report to the congressional defense committees to estab-
16 lish the baseline for application of reprogramming and
17 transfer authorities for fiscal year 2018: *Provided*, That
18 the report shall include—

19 (1) a table for each appropriation with a sepa-
20 rate column to display the President's budget re-
21 quest, adjustments made by Congress, adjustments
22 due to enacted rescissions, if appropriate, and the
23 fiscal year enacted level;

24 (2) a delineation in the table for each appro-
25 priation both by budget activity and program,

O-1	Budget Request	Final Bill
4GTN OFFICE OF THE SECRETARY OF DEFENSE	1,488,344	1,485,899
Major headquarters activities - unjustified growth		-5,278
Other programs and initiatives - unjustified growth		-12,121
OUSD AT&L - unjustified growth		-3,000
BRAC support - unjustified growth		-2,046
Program increase - readiness and environmental protection initiative		15,000
Program increase - information assurance scholarship program		5,000
4GT1 SPECIAL OPERATIONS COMMAND	94,273	91,698
Unjustified growth		-2,575
4GTQ WASHINGTON HEADQUARTERS SERVICES	436,776	421,176
Historical underexecution		-6,000
DIUx program - unjustified growth		-9,600
999 OTHER PROGRAMS	14,806,404	14,706,381
Classified adjustment		-100,023
OVERESTIMATION OF CIVILIAN FTE TARGETS		-108,617
TRAVEL UNJUSTIFIED GROWTH		-50,000
PROGRAM INCREASE - IMPACT AID		30,000
PROGRAM INCREASE - IMPACT AID FOR CHILDREN WITH DISABILITIES		5,000
PFOS/PFOA STUDIES AND ANALYSIS		10,000
TRANSFER OPERATION AND MAINTENANCE FUNDS TO PROVIDE APPROPRIATIONS FOR THE DEPARTMENT OF DEFENSE ACQUISITION WORKFORCE DEVELOPMENT FUND		-136,000
PROGRAM INCREASE - AWARDS FOR SERVICE DOGS		100
PROGRAM INCREASE - JOINT TRAVEL REGULATION LONG TERM TEMPORARY DUTY WAIVERS		100

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(IN THOUSANDS OF DOLLARS)

	BUDGET REQUEST	FINAL BILL
270 MISSILE DEFENSE AGENCY.....	504,058	477,808
290 OFFICE OF ECONOMIC ADJUSTMENT.....	57,840	57,840
300 OFFICE OF THE SECRETARY OF DEFENSE.....	1,488,344	1,485,899
310 SPECIAL OPERATIONS COMMAND.....	94,273	91,698
320 WASHINGTON HEADQUARTERS SERVICES.....	436,776	421,176
OTHER PROGRAMS.....	14,806,404	14,706,381
TOTAL, BUDGET ACTIVITY 4.....	27,976,345	27,697,261
IMPACT AID.....	---	30,000
IMPACT AID FOR CHILDREN WITH DISABILITIES.....	---	5,000
OVERESTIMATION OF CIVILIAN FTE TARGETS	---	-108,617
UNJUSTIFIED GROWTH IN TRAVEL.....	---	-50,000
COMMENDATION PROGRAM FOR MILITARY WORKING DOGS AND THEIR HANDLERS (HOUSE FLOOR AMENDMENT #9).....	---	100
O&M TRANSFER TO DAWDF.....	---	-136,000
PFOS/PFOA STUDIES AND ANALYSIS.....	---	10,000
PROGRAM INCREASE--JOINT TRAVEL REGULATIONS--LONG-TERM TDY WAIVERS.....	---	100
TOTAL, OPERATION AND MAINTENANCE, DEFENSE-WIDE.....	===== 34,585,817 =====	===== 34,059,257 =====

34B

Appendix A2: Authorizing Legislation for ATSDR

Comprehensive Environmental Response, Compensation and Liability Act of 1980 (CERCLA) and Superfund Amendments and Reauthorization Act of 1986 (SARA)

<https://www.law.cornell.edu/uscode/text/42/9604>

TITLE 42--THE PUBLIC HEALTH AND WELFARE
CHAPTER 103--COMPREHENSIVE ENVIRONMENTAL RESPONSE, COMPENSATION,
AND LIABILITY [42 U.S.C. 9604 – Response Authorities]

Section 9604.

(i) Agency for Toxic Substances and Disease Registry; establishment, functions, etc.

(1) There is hereby established within the Public Health [Service](#) an agency, to be known as the Agency for Toxic Substances and Disease Registry, which shall report directly to the Surgeon General of the United [States](#). The [Administrator](#) of said Agency shall, with the cooperation of the [Administrator](#) of the Environmental Protection Agency, the Commissioner of the Food and Drug Administration, the Directors of the National Institute of Medicine, National Institute of Environmental Health Sciences, National Institute of Occupational Safety and Health, Centers for Disease Control and Prevention, the [Administrator](#) of the Occupational Safety and Health Administration, the [Administrator](#) of the Social Security Administration, the Secretary of Transportation, and appropriate State and local health officials, effectuate and implement the health related authorities of this chapter. In addition, said [Administrator](#) shall—

(A) in cooperation with the [States](#), establish and maintain a national registry of serious diseases and illnesses and a national registry of [persons](#) exposed to toxic substances;

(B) establish and maintain inventory of literature, [research](#), and studies on the health effects of toxic substances;

(C) in cooperation with the [States](#), and other agencies of the Federal Government, establish and maintain a complete listing of areas closed to the public or otherwise restricted in use because of toxic substance contamination;

(D) in cases of public health emergencies caused or believed to be caused by exposure to toxic substances, provide [medical care](#) and testing to exposed individuals, including but not limited to tissue sampling, chromosomal testing where appropriate, epidemiological studies, or any other assistance appropriate under the circumstances; and

(E) either independently or as part of other health status survey, conduct periodic survey and [screening](#) programs to determine relationships between exposure to toxic substances and illness. In cases of public health emergencies, exposed [persons](#) shall be eligible for admission to hospitals and other facilities and services operated or provided by the Public Health Service.

(2)

(A) Within 6 months after October 17, 1986, the Administrator of the Agency for Toxic Substances and Disease Registry (ATSDR) and the Administrator of the Environmental Protection Agency (“EPA”) shall prepare a list, in order of priority, of at least 100 hazardous substances which are most commonly found at facilities on the National Priorities List and which, in their sole discretion, they determine are posing the most significant potential threat to human health due to their known or suspected toxicity to humans and the potential for human exposure to such substances at facilities on the National Priorities List or at facilities to which a response to a release or a threatened release under this section is under consideration.

(B) Within 24 months after October 17, 1986, the Administrator of ATSDR and the Administrator of EPA shall revise the list prepared under subparagraph (A). Such revision shall include, in order of priority, the addition of 100 or more such hazardous substances. In each of the 3 consecutive 12-month periods that follow, the Administrator of ATSDR and the Administrator of EPA shall revise, in the same manner as provided in the 2 preceding sentences, such list to include not fewer than 25 additional hazardous substances per revision. The Administrator of ATSDR and the Administrator of EPA shall not less often than once every year thereafter revise such list to include additional hazardous substances in accordance with the criteria in subparagraph (A).

(3) Based on all available information, including information maintained under paragraph (1)(B) and data developed and collected on the health effects of [hazardous substances](#) under this paragraph, the Administrator of ATSDR shall prepare toxicological profiles of each of the substances listed pursuant to paragraph (2). The toxicological profiles shall be prepared in accordance with guidelines developed by the Administrator of ATSDR and the Administrator of EPA. Such profiles shall include, but not be limited to each of the following:

(A) An examination, summary, and interpretation of available toxicological information and epidemiologic evaluations on a [hazardous substance](#) in order to ascertain the levels of significant human exposure for the substance and the associated acute, subacute, and chronic health effects.

(B) A determination of whether adequate information on the health effects of each substance is available or in the process of [development](#) to determine levels of exposure which present a significant risk to human health of acute, subacute, and chronic health effects.

(C) Where appropriate, an identification of toxicological testing needed to identify the types or levels of exposure that may present significant risk of adverse health effects in humans.

Any toxicological profile or revision thereof shall reflect the [Administrator](#) of ATSDR’s assessment of all relevant toxicological testing which has been peer reviewed. The profiles required to be prepared under this paragraph for those [hazardous substances](#) listed under subparagraph

(A) of paragraph (2) shall be completed, at a rate of no fewer than 25 per year, within 4 years after October 17, 1986. A profile required on a substance listed pursuant to subparagraph (B) of paragraph (2) shall be completed within 3 years after addition to the list. The profiles prepared under this paragraph shall be of those substances highest on the list of priorities under paragraph (2) for which profiles have not previously been prepared. Profiles required under this paragraph shall be revised and republished as necessary, but no less often than once every 3 years. Such profiles shall be provided to the States and made available to other interested parties.

(4) The [Administrator](#) of the ATSDR shall provide consultations upon request on health issues relating to exposure to hazardous or toxic substances, on the basis of available information, to the [Administrator](#) of EPA, State officials, and local officials. Such consultations to individuals may be provided by States under cooperative agreements established under this chapter.

(5)

(A) For each [hazardous substance](#) listed pursuant to paragraph (2), the Administrator of ATSDR (in consultation with the Administrator of EPA and other agencies and programs of the Public Health Service) shall assess whether adequate information on the health effects of such substance is available. For any such substance for which adequate information is not available (or under development), the Administrator of ATSDR, in cooperation with the Director of the National Toxicology Program, shall assure the initiation of a program of research designed to determine the health effects (and techniques for development of methods to determine such health effects) of such substance. Where feasible, such program shall seek to develop methods to determine the health effects of such substance in combination with other substances with which it is commonly found. Before assuring the initiation of such program, the Administrator of ATSDR shall consider recommendations of the Interagency Testing Committee established under section 4(e) of the Toxic Substances Control Act [[15 U.S.C. 2603\(e\)](#)] on the types of research that should be done. Such program shall include, to the extent necessary to supplement existing information, but shall not be limited to—

- (i) laboratory and other studies to determine short, intermediate, and long-term health effects;
- (ii) laboratory and other studies to determine organ-specific, [site](#)-specific, and system-specific acute and chronic [toxicity](#);
- (iii) laboratory and other studies to determine the manner in which such substances are metabolized or to otherwise develop an understanding of the biokinetics of such substances; and
- (iv) where there is a possibility of obtaining human data, the collection of such information.

(B) In assessing the need to perform laboratory and other studies, as required by subparagraph (A), the [Administrator](#) of ATSDR shall consider—

- (i) the availability and quality of existing test data concerning the substance on the suspected health effect in question;
- (ii) the extent to which testing already in progress will, in a timely fashion, provide data that will be adequate to support the preparation of toxicological profiles as required by paragraph (3); and
- (iii) such other scientific and technical factors as the [Administrator](#) of ATSDR may determine are necessary for the effective implementation of this subsection.

(C) In the [development](#) and implementation of any research program under [this paragraph](#), the [Administrator](#) of ATSDR and the [Administrator](#) of EPA shall coordinate such research program implemented under this paragraph with the National Toxicology Program and with programs of toxicological testing established under the Toxic Substances Control Act [[15 U.S.C. 2601](#) et seq.] and the Federal Insecticide, Fungicide and Rodenticide Act [[7 U.S.C. 136](#) et seq.]. The purpose of such coordination shall be to avoid duplication of effort and to assure that the hazardous substances listed pursuant to this subsection are tested thoroughly at the earliest practicable date. Where appropriate, consistent with such purpose, a research program under this paragraph may be carried out using such programs of toxicological testing.

(D) It is the sense of the Congress that the [costs](#) of [research](#) programs under [this paragraph](#) be borne by the manufacturers and processors of the [hazardous substance](#) in question, as required in programs of toxicological testing under the Toxic Substances Control Act [[15 U.S.C. 2601](#) et seq.]. Within 1 year after October 17, 1986, the Administrator of EPA shall promulgate regulations which provide, where appropriate, for payment of such costs by manufacturers and processors under the Toxic Substances Control Act, and registrants under the Federal Insecticide, Fungicide, and Rodenticide Act [[7 U.S.C. 136](#) et seq.], and recovery of such costs from responsible parties under this chapter.

(6)

(A) The [Administrator](#) of ATSDR shall perform a health assessment for each facility on the National Priorities List established under [section 9605 of this title](#). Such health assessment shall be completed not later than December 10, 1988, for each facility proposed for inclusion on such list prior to October 17, 1986, or not later than one year after the date of proposal for inclusion on such list for each facility proposed for inclusion on such list after October 17, 1986.

(B) The [Administrator](#) of ATSDR may perform health assessments for releases or facilities where individual persons or licensed physicians provide information that individuals have been exposed to a [hazardous substance](#), for which the probable source of such exposure is a release. In addition to other methods (formal or informal) of providing such information, such individual persons or licensed physicians may submit a petition to the Administrator of ATSDR providing such

information and requesting a health assessment. If such a petition is submitted and the Administrator of ATSDR does not initiate a health assessment, the Administrator of ATSDR shall provide a written explanation of why a health assessment is not appropriate.

(C) In determining the priority in which to conduct health assessments under this subsection, the [Administrator](#) of ATSDR, in consultation with the [Administrator](#) of EPA, shall give priority to those facilities at which there is documented evidence of the release of [hazardous substances](#), at which the potential risk to human health appears highest, and for which in the judgment of the Administrator of ATSDR existing health assessment data are inadequate to assess the potential risk to human health as provided in subparagraph (F). In determining the priorities for conducting health assessments under this subsection, the Administrator of ATSDR shall consider the National Priorities List schedules and the needs of the Environmental Protection Agency and other Federal agencies pursuant to schedules for remedial investigation and feasibility studies.

(D) Where a health assessment is done at a [site](#) on the National Priorities List, the [Administrator](#) of ATSDR shall complete such assessment promptly and, to the maximum extent practicable, before the completion of the remedial investigation and feasibility study at the facility concerned.

(E) Any [State](#) or political subdivision carrying out a health assessment for a [facility](#) shall report the results of the assessment to the [Administrator](#) of ATSDR and the [Administrator](#) of EPA and shall include recommendations with respect to further activities which need to be carried out under this section. The [Administrator](#) of ATSDR shall state such recommendation in any report on the results of any assessment carried out directly by the [Administrator](#) of ATSDR for such facility and shall issue periodic reports which include the results of all the assessments carried out under this subsection.

(F) For the purposes of this subsection and [section 9611\(c\)\(4\) of this title](#), the term “health assessments” shall include preliminary assessments of the potential risk to human health posed by individual sites and facilities, based on such factors as the nature and extent of contamination, the existence of potential pathways of human exposure (including ground or surface water contamination, air emissions, and food chain contamination), the size and potential susceptibility of the community within the likely pathways of exposure, the comparison of expected human exposure levels to the short-term and long-term health effects associated with identified hazardous substances and any available recommended exposure or tolerance limits for such hazardous substances, and the comparison of existing morbidity and mortality data on diseases that may be associated with the observed levels of exposure. The Administrator of ATSDR shall use appropriate data, risk assessments, risk evaluations and studies available from the Administrator of EPA.

(G) The purpose of health assessments under this subsection shall be to assist in determining whether actions under paragraph (11) of this subsection should be taken to reduce human exposure to [hazardous substances](#) from a facility and

whether additional information on human exposure and associated health risks is needed and should be acquired by conducting epidemiological studies under paragraph (7), establishing a registry under paragraph (8), establishing a health surveillance program under paragraph (9), or through other means. In using the results of health assessments for determining additional actions to be taken under this section, the Administrator of ATSDR may consider additional information on the risks to the potentially affected population from all sources of such [hazardous substances](#) including known point or nonpoint sources other than those from the facility in question.

(H) At the completion of each health assessment, the [Administrator](#) of ATSDR shall provide the [Administrator](#) of EPA and each affected State with the results of such assessment, together with any recommendations for further actions under this subsection or otherwise under this chapter. In addition, if the health assessment indicates that the release or threatened release concerned may pose a serious threat to human health or the environment, the [Administrator](#) of ATSDR shall so notify the [Administrator](#) of EPA who shall promptly evaluate such release or threatened release in accordance with the hazard ranking system referred to in [section 9605\(a\)\(8\)\(A\) of this title](#) to determine whether the site shall be placed on the National Priorities List or, if the site is already on the list, the Administrator of ATSDR may recommend to the Administrator of EPA that the site be accorded a higher priority.

(7)

(A) Whenever in the judgment of the [Administrator](#) of ATSDR it is appropriate on the basis of the results of a health assessment, the [Administrator](#) of ATSDR shall conduct a pilot study of health effects for selected groups of exposed individuals in order to determine the desirability of conducting full scale epidemiological or other health studies of the entire exposed population.

(B) Whenever in the judgment of the [Administrator](#) of ATSDR it is appropriate on the basis of the results of such pilot study or other study or health assessment, the [Administrator](#) of ATSDR shall conduct such full scale epidemiological or other health studies as may be necessary to determine the health effects on the population exposed to [hazardous substances](#) from a release or threatened release. If a significant excess of disease in a population is identified, the letter of transmittal of such study shall include an assessment of other risk factors, other than a release, that may, in the judgment of the peer review group, be associated with such disease, if such risk factors were not taken into account in the design or conduct of the study.

(8) In any case in which the results of a health assessment indicate a potential significant risk to human health, the [Administrator](#) of ATSDR shall consider whether the establishment of a registry of exposed persons would contribute to accomplishing the purposes of this subsection, taking into account circumstances bearing on the usefulness of such a registry, including the seriousness or unique character of identified diseases or the likelihood of population migration from the affected area.

(9) Where the [Administrator](#) of ATSDR has determined that there is a significant increased risk of adverse health effects in humans from exposure to [hazardous substances](#) based on the results of a health assessment conducted under paragraph (6), an epidemiologic study conducted under paragraph (7), or an exposure registry that has been established under paragraph (8), and the Administrator of ATSDR has determined that such exposure is the result of a release from a facility, the Administrator of ATSDR shall initiate a health surveillance program for such population. This program shall include but not be limited to—

(A) periodic medical testing where appropriate of population subgroups to screen for diseases for which the population or subgroup is at significant increased risk; and

(B) a mechanism to refer for [treatment](#) those individuals within such population who are screened positive for such diseases.

(10) Two [years](#) after October 17, 1986, and every 2 years thereafter, the Administrator of ATSDR shall prepare and submit to the Administrator of EPA and to the Congress a report on the results of the activities of ATSDR regarding—

(A) health assessments and pilot health effects studies conducted;

(B) epidemiologic studies conducted;

(C) [hazardous substances](#) which have been listed under paragraph (2), toxicological profiles which have been developed, and toxicologic testing which has been conducted or which is being conducted under this subsection;

(D) registries established under paragraph (8); and

(E) an overall assessment, based on the results of activities conducted by the [Administrator](#) of ATSDR, of the linkage between human exposure to individual or combinations of [hazardous substances](#) due to releases from facilities covered by this chapter or the Solid Waste Disposal Act [[42 U.S.C. 6901](#) et seq.] and any increased incidence or prevalence of adverse health effects in humans.

(11) If a health assessment or other study carried out under this subsection contains a finding that the exposure concerned presents a significant risk to human health, the President shall take such steps as may be necessary to reduce such exposure and eliminate or substantially mitigate the significant risk to human health. Such steps may include the use of any authority under this chapter, including, but not limited to—

(A) provision of [alternative water supplies](#), and

(B) permanent or temporary relocation of individuals.

In any case in which information is insufficient, in the judgment of the [Administrator](#) of ATSDR or the President to determine a significant human exposure level with respect to a [hazardous substance](#), the President may take such steps as may be necessary to reduce the exposure of any person to such [hazardous substance](#) to such level as the President deems necessary to protect human health.

(12) In any case which is the subject of a petition, a health assessment or study, or a [research](#) program under this subsection, nothing in this subsection shall be construed to delay or otherwise affect or impair the authority of the President, the [Administrator](#) of ATSDR, or the [Administrator](#) of EPA to exercise any authority vested in the President, the [Administrator](#) of ATSDR or the [Administrator](#) of EPA under any other provision of law (including, but not limited to, the imminent hazard authority of section 7003 of the Solid Waste Disposal Act [[42 U.S.C. 6973](#)]) or the response and abatement authorities of this chapter.

(13) All studies and results of [research](#) conducted under this subsection (other than health assessments) shall be reported or adopted only after appropriate peer review. Such peer review shall be completed, to the maximum extent practicable, within a period of 60 days. In the case of [research](#) conducted under the National Toxicology Program, such peer review may be conducted by the Board of Scientific Counselors. In the case of other [research](#), such peer review shall be conducted by panels consisting of no less than three nor more than seven members, who shall be disinterested scientific experts selected for such purpose by the [Administrator](#) of ATSDR or the [Administrator](#) of EPA, as appropriate, on the basis of their reputation for scientific objectivity and the lack of institutional ties with any person involved in the conduct of the study or research under review. Support services for such panels shall be provided by the Agency for Toxic Substances and Disease Registry, or by the Environmental Protection Agency, as appropriate.

(14) In the implementation of this subsection and other health-[related](#) authorities of this chapter, the [Administrator](#) of ATSDR shall assemble, develop as necessary, and distribute to the States, and upon request to medical colleges, physicians, and other health professionals, appropriate educational materials (including short courses) on the medical surveillance, screening, and methods of diagnosis and treatment of injury or disease related to exposure to [hazardous substances](#) (giving priority to those listed in paragraph (2)), through such means as the Administrator of ATSDR deems appropriate.

(15) The activities of the [Administrator](#) of ATSDR described in this subsection and [section 9611\(c\)\(4\) of this title](#) shall be carried out by the Administrator of ATSDR, either directly or through cooperative agreements with States (or political subdivisions thereof) which the Administrator of ATSDR determines are capable of carrying out such activities. Such activities shall include provision of consultations on health information, the conduct of health assessments, including those required under section 3019(b) of the Solid Waste Disposal Act [[42 U.S.C. 6939a\(b\)](#)], health studies, registries, and health surveillance.

(16) The President shall provide adequate personnel for ATSDR, which shall not be fewer than 100 [employees](#). For purposes of determining the number of [employees](#) under this subsection, an [employee](#) employed by ATSDR on a part-time career employment basis shall be counted as a fraction which is determined by dividing 40 hours into the average number of hours of such [employee](#)'s regularly scheduled workweek.

(17) In accordance with [section 9620 of this title](#) (relating to Federal facilities), the Administrator of ATSDR shall have the same authorities under this section with respect

to facilities owned or operated by a department, agency, or instrumentality of the United States as the Administrator of ATSDR has with respect to any nongovernmental entity.

(18) If the [Administrator](#) of ATSDR determines that it is appropriate for purposes of this section to treat a [pollutant or contaminant](#) as a hazardous substance, such [pollutant or contaminant](#) shall be treated as a hazardous substance for such purpose.

Appendix A3: Authorizing Legislation for NCEH

Public Health Service Act

http://www.house.gov/legcoun/Comps/PHSA_CMD.pdf

TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE PART A—RESEARCH AND INVESTIGATION IN GENERAL

SEC. 301. [§241]. (a) The Secretary shall conduct in the Service, and encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man, including water purification, sewage treatment, and pollution of lakes and streams. In carrying out the foregoing the Secretary is authorized to—

- 1) collect and make available through publications and other appropriate means, information as to, and the practical application of, such research and other activities;
- 2) make available research facilities of the Service to appropriate public authorities, and to health officials and scientists engaged in special study;
- 3) make grants-in-aid to universities, hospitals, laboratories, and other public or private institutions, and to individuals for such research projects as are recommended by the advisory council to the entity of the Department supporting such projects and make, upon recommendation of the advisory council to the appropriate entity of the Department, grants-in-aid to public or nonprofit universities, hospitals, laboratories, and other institutions for the general support of their research;
- 4) secure from time to time and for such periods as he deems advisable, the assistance and advice of experts, scholars, and consultants from the United States or abroad;
- 5) for purposes of study, admit and treat at institutions, hospitals, and stations of the Service, persons not otherwise eligible for such treatment;
- 6) make available, to health officials, scientists, and appropriate public and other nonprofit institutions and organizations, technical advice and assistance on the application of statistical methods to experiments, studies, and surveys in health and medical fields;
- 7) enter into contracts, including contracts for research in accordance with and subject to the provisions of law applicable to contracts entered into by the military departments under title 10, United States Code, sections 2353 and 2354, except that determination, approval, and certification required thereby shall be by the Secretary of Health, Education, and Welfare; and
- 8) adopt, upon recommendations of the advisory councils to the appropriate entities of the Department or, with respect to mental health, the National Advisory Mental Health Council, such additional means as the Secretary considers necessary or appropriate to carry out the purposes of this section.

March 13, 2013 \\143.231.149.13\DATA\COMP\PHSA\PHSA.003