

Public Law 98-621
98th Congress

An Act

To provide for the assumption of selected functions, programs, and resources of Saint Elizabeths Hospital by the District of Columbia, to provide for the establishment of a comprehensive mental health care system in the District of Columbia, and for other purposes.

Nov. 8, 1984

[H.R. 6224]

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

Saint Elizabeths
Hospital and
District of
Columbia
Mental Health
Services Act.
24 USC 225 note.

SHORT TITLE

SECTION 1. This Act may be cited as the "Saint Elizabeths Hospital and District of Columbia Mental Health Services Act".

FINDINGS AND PURPOSES

SEC. 2. (a) The Congress makes the following findings:

24 USC 225.

(1) Governmentally administered mental health services in the District of Columbia are currently provided through two separate public entities, the federally administered Saint Elizabeths Hospital and the Mental Health Services Administration of the District of Columbia Department of Human Resources.

(2) The District of Columbia has a continuing responsibility to provide mental health services to its residents.

(3) The Federal Government, through its operation of a national mental health program at Saint Elizabeths Hospital, has for over 100 years assisted the District of Columbia in carrying out that responsibility.

(4) Since its establishment by Congress in 1855, Saint Elizabeths Hospital has developed into a respected national mental health hospital and study, training, and treatment center, providing a range of quality mental health and related services, including—

(i) acute and chronic inpatient psychiatric care;

(ii) outpatient psychiatric and substance abuse clinical and related services;

(iii) Federal court system forensic psychiatry referral, evaluation, and patient treatment services for prisoners, and for individuals awaiting trial or requiring post-trial or post-sentence psychiatric evaluation;

(iv) patient care and related services for designated classes of individuals entitled to mental health benefits under Federal law, such as certain members and employees of the United States Armed Forces and the Foreign Service, and residents of American overseas dependencies;

(v) District of Columbia court system forensic psychiatry referral, evaluation, and patient treatment services for prisoners, and for individuals awaiting trial or requiring post-trial or post-sentence psychiatric evaluation;

(vi) programs for special populations such as the mentally ill deaf;

(vii) support for basic and applied clinical psychiatric research and related patient services conducted by the National Institute of Mental Health and other institutions; and

(viii) professional and paraprofessional training in the major mental health disciplines.

(5) The continuation of the range of services currently provided by federally administered Saint Elizabeths Hospital must be assured, as these services are integrally related to—

(i) the availability of adequate mental health services to District of Columbia residents, nonresidents who require mental health services while in the District of Columbia, individuals entitled to mental health services under Federal law, and individuals referred by both Federal and local court systems; and

(ii) the Nation's capacity to increase our knowledge and understanding about mental illness and to facilitate and continue the development and broad availability of sound and modern methods and approaches for the treatment of mental illness.

(6) The assumption of all or selected functions, programs, and resources of Saint Elizabeths Hospital from the Federal Government by the District of Columbia, and the integration of those functions, resources, and programs into a comprehensive mental health care system administered solely by the District of Columbia, will improve the efficiency and effectiveness of the services currently provided through those two separate entities by shifting the primary focus of care to an integrated community-based system.

Home rule.

(7) Such assumption of all or selected functions, programs, and resources of Saint Elizabeths Hospital by the District of Columbia would further the principle of home rule for the District of Columbia.

(b) It is the intent of Congress that—

(1) the District of Columbia have in operation no later than October 1, 1991, an integrated coordinated mental health system in the District which provides—

(A) high quality, cost-effective, and community-based programs and facilities;

(B) a continuum of inpatient and outpatient mental health care, residential treatment, and support services through an appropriate balance of public and private resources; and

(C) assurances that patient rights and medical needs are protected;

(2) the comprehensive District mental health care system be in full compliance with the Federal court consent decree in *Dixon v. Heckler*;

(3) the District and Federal Governments bear equitable shares of the costs of a transition from the present system to a comprehensive District mental health system;

(4) the transition to a comprehensive District mental health system provided for by this Act be carried out with maximum consideration for the interests of employees of the Hospital and provide a right-of-first-refusal to such employees for employment at comparable levels in positions created under the system implementation plan;

Employment
and
unemployment.

(5) the Federal Government have the responsibility for the retraining of Hospital employees to prepare such employees for the requirements of employment in a comprehensive District mental health system;

Employment
and
unemployment.

(6) the Federal Government continue high quality mental health research, training, and demonstration programs at Saint Elizabeths Hospital;

Research and
development.

(7) the District government establish and maintain accreditation and licensing standards for all services provided in District mental health facilities which assure quality care consistent with appropriate Federal regulations and comparable with standards of the Joint Commission on Accreditation of Hospitals; and

(8) the comprehensive mental health system plan include a component for direct services for the homeless mentally ill.

DEFINITIONS

SEC. 3. For the purpose of this Act:

24 USC 225a.

(1) The term "Hospital" means the institution in the District of Columbia known as Saint Elizabeths Hospital operated on the date of the enactment of this Act by the Secretary of Health and Human Services.

(2) The term "Secretary" means the Secretary of Health and Human Services.

(3) The term "Mayor" means the Mayor of the District of Columbia.

(4) The term "District" means the District of Columbia.

(5) The term "Federal court consent decree" means the consent decree in *Dixon v. Heckler*, Civil Action No. 74-285.

(6) The term "service coordination period" means a period beginning on the effective date of this Act and terminating on October 1, 1987.

(7) The term "financial transition period" means a period beginning on the effective date of this Act and terminating on October 1, 1991.

(8) The term "system implementation plan" means the plan for a comprehensive mental health system for the District of Columbia to be developed pursuant to this Act.

(9) The term "Council" means the Council of the District of Columbia.

DEVELOPMENT OF PLAN FOR MENTAL HEALTH SYSTEM FOR THE DISTRICT

SEC. 4. (a)(1) Subject to subsection (g) of this section and section 9(b)(1), effective October 1, 1987, the District shall be responsible for the provision of mental health services to residents of the District.

24 USC 225b.

(2) Not later than October 1, 1991, the Mayor shall complete the implementation of the final system implementation plan reviewed by the Congress and the Council in accordance with the provisions of this Act for the establishment of a comprehensive District mental health system to provide mental health services and programs through community mental health facilities to individuals in the District of Columbia.

(b)(1) The Mayor shall prepare a preliminary system implementation plan for a comprehensive mental health system no later than 3

months from the effective date of this Act, and a final implementation plan no later than 12 months from the effective date of this Act.

(2) The Mayor shall submit the preliminary system implementation plan to the Council no later than 3 months from the effective date of this Act. The Council shall review such plan and transmit written recommendations to the Mayor regarding any revisions to such plan no later than 60 days after such submission. The Mayor shall submit the revised preliminary plan to the Committee on the District of Columbia of the House of Representatives and the Committee on Labor and Human Resources and the Committee on Governmental Affairs of the Senate for review and comment in accordance with the provisions of this Act.

(3) The final system implementation plan shall be considered by the Council consistent with the provisions of section 422(12) of the District of Columbia Self-Government and Governmental Reorganization Act.

(4) After the review of the Council pursuant to paragraph (3), the Mayor shall submit the final implementation plan to the Committee on the District of Columbia of the House of Representatives and the Committee on Labor and Human Resources and the Committee on Governmental Affairs of the Senate for review and comment in accordance with the provisions of this Act.

(c) The system implementation plan shall—

(1) propose and describe an integrated, comprehensive, and coordinated mental health system for the District of Columbia;

(2) identify the types of treatment to be offered, staffing patterns, and the proposed sites for service delivery within the District of Columbia comprehensive mental health system;

(3) identify mechanisms to attract and retain personnel of appropriate number and quality to meet the objectives of the comprehensive mental health system;

(4) be in full compliance with the Federal court consent decree in *Dixon v. Heckler* and all applicable District of Columbia statutes and court decrees;

(5) identify those positions, programs, and functions at Saint Elizabeths Hospital which are proposed for assumption by the District, those facilities at Saint Elizabeths Hospital which are proposed for utilization by the District under a comprehensive District mental health system, and the staffing patterns and programs at community facilities to which the assumed functions are to be integrated;

(6) identify any capital improvements to facilities at Saint Elizabeths Hospital and elsewhere in the District of Columbia proposed for delivery of mental health services, which are necessary for the safe and cost effective delivery of mental health services; and

(7) identify the specific real property, buildings, improvements, and personal property to be transferred pursuant to section 8(a)(1) of this Act needed to provide mental health and other services provided by the Department of Human Services under the final system implementation plan.

(d)(1) The Mayor shall develop the system implementation plan in close consultation with officials of Saint Elizabeths Hospital, through working groups to be established by the Secretary and the Mayor for that purpose.

(2) The Mayor and the Secretary shall establish a labor-management advisory committee, requesting the participation of Federal

87 Stat. 790.

Labor-
management
advisory
committee,
establishment.

and District employee organizations affected by this Act, to make recommendations on the system implementation plan. The committee shall consider staffing patterns under a comprehensive District mental health care system, retention of Hospital employees under such system, Federal retraining for such employees, and any other areas of concern related to the establishment of a comprehensive District system. In developing the system implementation plan the Mayor shall carefully consider the recommendations of the committee. Such advisory committee shall not be subject to the Federal Advisory Committee Act.

5 USC app.

(3) The Mayor and such working groups shall, in developing the plan, solicit comments from the public, which shall include professional organizations, provider agencies and individuals, and mental health advocacy groups in the District of Columbia.

(e)(1) The Mayor and the Secretary may, during the service coordination period, by mutual agreement and consistent with the requirements of the system implementation plan direct the shift of selected program responsibilities and staff resources from Saint Elizabeths Hospital to the District. The Secretary may assign staff occupying positions in affected programs to work under the supervision of the District. The Mayor shall notify the Committee on the District of Columbia of the House of Representatives and the Committee on Labor and Human Resources and the Committee on Governmental Affairs of the Senate in writing of any planned shift in program responsibilities or staff resources not less than 30 days prior to the implementation of such shift.

(2)(A) Except as provided in subparagraph (B), after October 1, 1984, and during the service coordination period, no request for proposals may be issued by the Secretary for any areas of commercial activity at the Hospital pursuant to Office of Management and Budget circular A-76.

Prohibition.

(B) The limitation under subparagraph (A) shall not apply to studies initiated pursuant to such circular prior to October 1, 1984.

(f)(1) To assist the Mayor in the development of the system implementation plan, the Secretary shall contract for a financial audit and a physical plant audit of all existing facilities at the Hospital to be completed by January 1, 1986. The financial audit shall be conducted according to generally accepted accounting principles. The physical plant audit shall recognize any relevant national and District codes and estimate the useful life of existing facility support systems.

Audit.

(2)(A) Pursuant to such physical plant audit, the Secretary shall initiate not later than October 1, 1987, and complete not later than October 1, 1991, such repairs and renovations to such physical plant and facility support systems of the Hospital as are to be utilized by the District under the system implementation plan as part of a comprehensive District mental health system, as are necessary to meet any applicable code requirements or standards.

(B) At a minimum until October 1, 1987, the Secretary shall maintain all other facilities and infrastructure of the Hospital not assumed by the District in the condition described in such audit.

(g) During the service coordination period, the District of Columbia and the Secretary, to the extent provided in the Federal court consent decree, shall be jointly responsible for providing citizens with the full range and scope of mental health services set forth in such decree and the system implementation plan. No provision of this Act or any action or agreement during the service coordination

period may be so construed as to absolve or relieve the District or the Federal Government of their joint or respective responsibilities to implement fully the mandates of the Federal court consent decree.

CONGRESSIONAL REVIEW OF SYSTEM IMPLEMENTATION PLAN

24 USC 225c.

SEC. 5. (a) The Committee on the District of Columbia of the House of Representatives and the Committee on Labor and Human Resources and the Committee on Governmental Affairs of the Senate shall review the preliminary system implementation plan transmitted by the Mayor pursuant to section 4 of this Act to determine the extent of its compliance with the provisions of section 2(b) and section 4 of this Act, and transmit written recommendations regarding any revisions to the preliminary plan to the Mayor not later than 60 days after receipt of such plan.

(b) The Committee on the District of Columbia of the House of Representatives and the Committee on Labor and Human Resources and the Committee on Governmental Affairs of the Senate shall, within 90 days of submission of the final system implementation plan by the Mayor pursuant to section 4 of this Act, review such plan to determine the extent to which it is in compliance with the provisions of section 2(b) and section 4 of this Act.

TRANSITION PROVISIONS FOR EMPLOYEES OF THE HOSPITAL

Retirement.
24 USC 225d.

SEC. 6. (a) Employees of the Hospital directly affected by the assumption of programs and functions by the District government who meet the requirements for immediate retirement under the provisions of section 8336(d) of title 5, United States Code, shall be accorded the opportunity to retire during the 30-day period prior to the assumption of such programs and functions.

(b)(1) The system implementation plan shall prescribe the specific number and types of positions needed by the District government at the end of the service coordination period.

(2) Notwithstanding section 3503 of title 5, United States Code, employees of the Hospital shall only be transferred to District employment under the provisions of this section.

(c)(1) While on the retention list or the District or Federal agency reemployment priority list, the system implementation plan shall provide to Hospital employees a right-of-first-refusal to District employment in positions for which such employees may qualify, (A) created under the system implementation plan in the comprehensive District mental health system, (B) available under the Department of Human Services of the District, and (C) available at the District of Columbia General Hospital.

(2) In accordance with Federal regulations, the Secretary shall establish retention registers of Hospital employees and provide such retention registers to the District government. Employment in positions identified in the system implementation plan under subsection (b) shall be offered to Hospital employees by the District government according to each such employee's relative standing on the retention registers.

(3) Employee appeals concerning the retention registers established by the Secretary shall be in accordance with Federal regulations.

(4) Employee appeals concerning employment offers by the District shall be in accordance with the District of Columbia Government Comprehensive Merit Personnel Act of 1978.

(d)(1) Notwithstanding any other provision of law, employees of the Hospital, while on the Federal agency reemployment priority list, shall have a right-of-first-refusal to employment in comparable available positions for which they qualify within the Department of Health and Human Services in the Washington metropolitan area.

(2) If necessary to separate employees of the Hospital from Federal employment, such employees may be separated only under Federal reduction-in-force procedures.

(3) A Federal agency reemployment priority list and a displaced employees program shall be maintained for employees of the Hospital by the Secretary and the Office of Personnel Management in accordance with Federal regulations for Federal employees separated by reduction-in-force procedures.

(4) The Mayor shall create and maintain, in consultation with the Secretary, a District agency reemployment priority list of those employees of the Hospital on the retention registers who are not offered employment under subsection (c). Individuals who refuse an offer of employment under subsection (c) shall be ineligible for inclusion on the District agency reemployment priority list. Such reemployment priority list shall be administered in accordance with procedures established pursuant to the District of Columbia Government Comprehensive Merit Personnel Act of 1978 (D.C. Law 2-139).

(5) Acceptance of nontemporary employment as a result of referral from any retention list or agency reemployment priority list shall automatically terminate an individual's severance pay as of the effective date of such employment.

(e) Any contract entered into by the District of Columbia for the provision of mental health services formerly provided by or at the Hospital shall require the contractor or provider, in filling new positions created to perform under the contract, to give preference to qualified candidates on the District agency reemployment priority list created pursuant to subsection (d) of this section. An individual who is offered nontemporary employment with a contractor shall have his or her name remain on the District agency reemployment priority list under subsection (d) for not more than 24 months from the date of acceptance of such employment.

Contracts.

CONDITIONS OF EMPLOYMENT FOR FORMER EMPLOYEES OF THE HOSPITAL

SEC. 7. (a) Each individual accepting employment without a break in service with the District government pursuant to section 6 shall—

24 USC 225e.

(1) except as specifically provided in this Act, be required to meet all District qualifications other than licensure requirements for appointment required of other candidates, and shall become District employees in the comparable District service subject to the provisions of the District of Columbia Government Comprehensive Merit Personnel Act of 1978, and all other statutes and regulations governing District personnel;

(2) meet all licensure requirements within 18 months of appointment by the District government;

(3) notwithstanding chapter 63 of title 5, United States Code, transfer accrued annual and sick leave balances pursuant to

5 USC 6301 et seq.

title XII of the District of Columbia Comprehensive Merit Personnel Act of 1978;

(4) have the grade and rate of pay determined in accordance with regulations established pursuant to title XI of the District of Columbia Comprehensive Merit Personnel Act of 1978, except that no employee shall suffer a loss in the basic rate of pay or in seniority;

(5) if applicable, retain a rate of pay including the physician's comparability allowance under the provisions of section 5948 of title 5, United States Code, and continue to receive such allowance under the terms of the then prevailing agreement until its expiration or for a period of 2 years from the date of appointment by the District government, whichever occurs later;

(6) be entitled to the same health and life insurance benefits as are available to District employees in the applicable service;

(7) if employed by the Federal Government before January 1, 1984, continue to be covered by the United States Civil Service Retirement System, under chapter 83 of title 5, United States Code, to the same extent that such retirement system covers District Government employees; and

(8) if employed by the Federal Government on or after January 1, 1984, be subject to the retirement system applicable to District government employees pursuant to title XXVI, Retirement, of the District of Columbia Government Comprehensive Merit Personnel Act of 1978.

(b) An individual appointed to a position in the District government without a break in service, from the retention list, or from the District or Federal agency reemployment priority lists shall be exempt from the residency requirements of title VIII of the District of Columbia Government Comprehensive Merit Personnel Act of 1978.

(c) An individual receiving compensation for work injuries pursuant to chapter 81 of title 5, United States Code, shall—

(1) continue to have the claims adjudicated and the related costs paid by the Federal Government until such individual recovers and returns to duty;

(2) if medically recovered and returned to duty, have any subsequent claim for the recurrence of the disability determined and paid under the provisions of title XXIII of the District of Columbia Comprehensive Merit Personnel Act of 1978.

(d) The District government may initiate or continue an action against an individual who accepts employment under section 6(c) for cause related to events that occur prior to the end of the service coordination period. Any such action shall be conducted in accordance with such Federal laws and regulations under which action would have been conducted had the assumption of function by the District not occurred.

(e) Commissioned public health service officers detailed to the District of Columbia mental health system shall not be considered employees for purposes of any full-time employee equivalency total of the Department of Health and Human Services.

(f) For purposes of this section, Hospital employees shall include former patient employees occupying career positions at the Hospital.

5 USC 8301 *et seq.*

5 USC 8101 *et seq.*

PROPERTY TRANSFER

SEC. 8. (a)(1) Except as provided in paragraph (2), on October 1, 1987, the Secretary shall transfer to the District, without compensation, all right, title, and interest of the United States in all real property at Saint Elizabeths Hospital in the District of Columbia together with any buildings, improvements, and personal property used in connection with such property needed to provide mental health and other services provided by the Department of Human Services identified pursuant to section 4(c)(7) of this Act.

Effective dates.
24 USC 225f.

(2) Such real property as is identified by the Secretary by September 30, 1987, as necessary to Federal mental health programs at Saint Elizabeths Hospital under section 2(b)(5) shall not be transferred under this subsection.

(b) On or before October 1, 1991, the Mayor shall prepare, and submit to the Committee on the District of Columbia of the House of Representatives and the Committees on Governmental Affairs and Labor and Human Resources of the Senate, a master plan, not inconsistent with the comprehensive plan for the National Capital, for the use of all real property, buildings, improvements, and personal property comprising Saint Elizabeths Hospital in the District of Columbia not transferred or excluded pursuant to subsection (a) of this section. In developing such plan, the Mayor shall consult with, and provide an opportunity for review by, appropriate Federal, regional, and local agencies. Such master plan submitted by the Mayor shall be approved by a law enacted by the Congress within the twelve-month period following the date such plan is submitted to the Committee on the District of Columbia of the House of Representatives and the Committees on Governmental Affairs and Labor and Human Resources of the Senate. Immediately upon the approval of any such law, the Secretary shall transfer to the District, without compensation, all right, title, and interest of the United States in and to such property in accordance with such approved plan. The real property, together with the buildings and other improvements thereon, including personal property used in connection therewith, known as the Oxon Cove Park and operated by the National Park Service, Department of the Interior, shall not be transferred under this Act.

Development
plan.

(c) On October 1, 1985, the Secretary shall transfer to the District, without compensation, all right, title, and interest of the United States to lot 87, square 622, in the subdivision made by the District of Columbia Redevelopment Land Agency, as per plat recorded in the Office of the Surveyor for the District of Columbia, in liber 154 at folio 149 (901 First Street N.W., the J.B. Johnson Building and grounds).

FINANCING PROVISIONS

SEC. 9. (a) There are authorized to be appropriated for grants by the Secretary of Health and Human Services to the District of Columbia comprehensive mental health system, \$30,000,000 for fiscal year 1988, \$24,000,000 for fiscal year 1989, \$18,000,000 for fiscal year 1990, and \$12,000,000 for fiscal year 1991.

Appropriation
authorization.
Grants.
24 USC 225g.

(b)(1) Beginning on October 1, 1987, and in each subsequent fiscal year, the appropriate Federal agency is directed to pay the District of Columbia the full costs for the provision of mental health diagnostic and treatment services for the following types of patients:

(A) Any individual referred to the system pursuant to a Federal statute or by a responsible Federal agency.

(B) Any individual referred to the system for emergency detention or involuntary commitment after being taken into custody (i) as a direct result of the individual's action or threat of action against a Federal official, (ii) as a direct result of the individual's action or threat of action on the grounds of the White House or of the Capitol, or (iii) under chapter 9 of title 21 of the District of Columbia Code.

(C) Any individual referred to the system as a result of a criminal proceeding in a Federal court (including an individual admitted for treatment, observation, and diagnosis and an individual found incompetent to stand trial or found not guilty by reason of insanity). The preceding provisions of this paragraph apply to any individual referred to the system (or to Saint Elizabeths Hospital) before or after the date of enactment of this Act.

Compacts
between States.

(2) The responsibility of the United States for the cost of services for individuals described in paragraph (1) shall not affect the treatment responsibilities to the District of Columbia under the Interstate Compact on Mental Health.

(c)(1) During the service coordination and the financial transition periods, the District of Columbia shall gradually assume a greater share of the financial responsibility for the provision of mental health services provided by the system to individuals not described in subsection (b).

87 Stat. 813.

(2) Section 502 of the District of Columbia Self-Government and Governmental Reorganization Act is amended—

(A) by inserting "(a)" after "SEC. 502.", and

(B) by adding at the end the following:

Appropriation
authorization.

"(b)(1) Except as otherwise provided by paragraph (2), there are authorized to be appropriated, in addition to the amounts authorized to be appropriated under subsection (a), \$25,000,000 for fiscal year 1986, \$35,000,000 for fiscal year 1987, \$30,000,000 for fiscal year 1988, \$20,000,000 for fiscal year 1989, \$15,000,000 for fiscal year 1990, and \$10,000,000 for fiscal year 1991 to the District of Columbia for establishing and maintaining a comprehensive mental health system.

"(2) For each of the fiscal years 1986 through 1990 there is authorized to be appropriated, in addition to the amount authorized under paragraph (1), an amount equal to one-third of the amount authorized under paragraph (1) for the succeeding fiscal year. The amount authorized to be appropriated under paragraph (1) for any such succeeding fiscal year shall be reduced by the amount appropriated for the preceding fiscal year under the first sentence of this paragraph."

68 Stat. 434.

(d) Subject to section 4(f)(2), capital improvements to facilities at Saint Elizabeths Hospital authorized during the service coordination period shall be the shared responsibility of the District and the Federal Government in accordance with Public Law 83-472.

(e) Pursuant to the financial audit under section 4(f), any unassigned liabilities of the Hospital shall be assumed by and shall be the sole responsibility of the Federal Government.

Audit.

(f)(1) After the service coordination period, the Secretary shall conduct an audit, under generally accepted accounting procedures, to identify the liability of the Federal Government for accrued

annual leave balances for those employees assumed by the District under the system implementation plan.

(2) There is authorized to be appropriated for payment by the Federal Government to the District an amount equal to the liability identified by such audit.

Appropriation
authorization.

(g) Nothing in this Act shall affect the authority of the District of Columbia under any other statute to collect costs billed by the District of Columbia for mental health services, except that payment for the same costs may not be collected from more than one party.

(h) The Government of the United States shall be solely responsible for—

Claims.

(1) all claims and causes of action against Saint Elizabeths Hospital that accrue before October 1, 1987, regardless of the date on which legal proceedings asserting such claims were or may be filed, except that the United States shall, in the case of any tort claim, only be responsible for any such claim against the United States that accrues before October 1, 1987, and the United States shall not compromise or settle any claim resulting in District liability without the consent of the District, which consent shall not be unreasonably withheld; and

(2) all claims that result in a judgment or award against Saint Elizabeths Hospital before October 1, 1987.

REPEALS AND CONFORMING AMENDMENTS

SEC. 10. (a) Chapter 4 of title LIX of the Revised Statutes of the United States (24 U.S.C. 161, 165, 170, 191, 211, 211a, 211b, and 221, and D.C. Code 32-405 and 32-406) is repealed.

(b) The matter under the subheading "SAINT ELIZABETHS HOSPITAL," under the heading "DEPARTMENT OF THE INTERIOR," in the first section of an Act of June 5, 1920, chapter 235 of the laws of the second session of the 66th Congress, is amended by striking out the second sentence (24 U.S.C. 166).

41 Stat. 919.

(c) The matter under the subheading "SAINT ELIZABETHS HOSPITAL," under the heading "DEPARTMENT OF THE INTERIOR," in the first section of the Second Deficiency Appropriation Act, fiscal year 1920, is amended by striking out the second and third sentences (24 U.S.C. 168 and 176).

41 Stat. 513.

(d)(1) An Act of August 4, 1947, chapter 478 of the laws of the first session of the 80th Congress (24 U.S.C. 168a, 169, 169a, 185, and 195a), is repealed.

(2) The matter under the heading "Saint Elizabeths Hospital" in title II of the Departments of Labor, and Health, Education, and Welfare Appropriation Act, 1955, is amended by striking out all that follows "\$110,000" before the period.

68 Stat. 437.

(e) The matter under the subheading "GOVERNMENT HOSPITAL FOR THE INSANE," under the heading "UNDER THE DEPARTMENT OF THE INTERIOR," in the first section of an Act of August 24, 1912, chapter 355 of the laws of the second session of the 62d Congress, is amended by striking out the second sentence (24 U.S.C. 171).

37 USC 461.

(f) The first sentence under the subheading "GOVERNMENT HOSPITAL FOR THE INSANE," under the heading "MISCELLANEOUS OBJECTS," in the first section of an Act of August 7, 1882, chapter 433 of the laws of the first session of the 47th Congress, is amended by striking out—

22 Stat. 329.

(1) “; and that hereafter the surplus products and waste material of the hospital may be sold or exchanged for the benefit of the hospital, and proceeds to be used and accounted for the same as its other funds:” (24 U.S.C. 172), and

(2) the two provisos (24 U.S.C. 165 and 195), and by inserting in lieu thereof a period.

40 Stat. 19. (g) The matter under the subheading “SAINT ELIZABETHS HOSPITAL,” and that subheading under the heading “DEPARTMENT OF THE INTERIOR.” of the Act of April 17, 1917 (24 U.S.C. 175), are repealed.

34 Stat. 730. (h) The matter under the subheading “GOVERNMENT HOSPITAL FOR THE INSANE,” under the heading “UNDER THE DEPARTMENT OF THE INTERIOR.” in the first section of an Act of June 30, 1906, chapter 3914 of the laws of the first session of the 59th Congress, is amended by striking out the last three sentences (24 U.S.C. 177).

55 Stat. 760. (i) An Act of May 9, 1941, chapter 101 of the laws of the first session of the 77th Congress (24 U.S.C. 180), is repealed.

(j) The Act of November 15, 1941 (24 U.S.C. 181, 182, 183, and 184) is repealed.

39 Stat. 557. (k)(1) The matter under the heading “PAY, MISCELLANEOUS.” of an Act of August 29, 1916, chapter 417 of the laws of the first session of the 64th Congress, is amended by striking out “Hereafter interned persons and prisoners of war, under the jurisdiction of the Navy Department, who are or may become insane, shall be entitled to admission for treatment to the Government Hospital for the Insane.” (24 U.S.C. 192).

40 Stat. 373. (2) The matter under the subheading “SAINT ELIZABETHS HOSPITAL,” under the heading “DEPARTMENT OF THE INTERIOR.” in the first section of an Act of October 6, 1917, chapter 79 of the laws of the first session of the 65th Congress, is amended by striking out the third through sixth sentences (24 U.S.C. 192, 199, and 200).

23 Stat. 213. (l) The matter under the subheading “GOVERNMENT HOSPITAL FOR THE INSANE,” under the heading “MISCELLANEOUS OBJECTS,” of an Act of July 7, 1884, chapter 332 of the laws of the first session of the 48th Congress, is amended by striking out the second sentence (24 U.S.C. 194).

76A Stat. 699. (m) The matter under the heading “PANAMA CANAL.” in the first section of an Act of June 12, 1917, chapter 27 of the laws of the first session of the 65th Congress, is amended by striking out the following (24 U.S.C. 196):

“Upon the application of the Governor of the Canal Zone, the Secretary of Health, Education, and Welfare may transfer to Saint Elizabeths Hospital, in the District of Columbia, for treatment, any American citizen subject to a hospitalization order issued under section 1637 of title 5 of the Canal Zone Code, whose legal residence in one of the States, territories, the Commonwealth of Puerto Rico or the District of Columbia for the purpose of eligibility for public medical care it has been impossible to establish. Upon the ascertainment of the legal residence of persons so transferred to Saint Elizabeths Hospital, the superintendent of that hospital shall thereupon transfer them to their respective places of residence, and the expenses attendant thereon shall be paid from the appropriation for the support of Saint Elizabeths Hospital.”

(n) An Act of July 18, 1940, chapter 638 of the laws of the third session of the 76th Congress (24 U.S.C. 196b), is repealed.

(o) The matter under the subheading “GOVERNMENT HOSPITAL FOR THE INSANE,” under the heading “MISCELLANEOUS OBJECTS.” in the

first section of an Act of March 3, 1901, chapter 853 of the second session of the 56th Congress, is amended by striking out the second sentence (24 U.S.C. 197).

31 Stat. 1162.

(p) The first sentence in the matter under the subheading "MEDICAL AND HOSPITAL DEPARTMENT:" under the heading "MEDICAL DEPARTMENT." of an Act of May 11, 1908, chapter 163 of the laws of the first session of the 60th Congress, is amended by striking out the second proviso and the colon preceding and inserting in lieu thereof a period (24 U.S.C. 198).

35 Stat. 122.

(q) An Act of June 23, 1874, chapter 465 of the laws of the first session of the 43rd Congress (24 U.S.C. 212, 213, and 214), is repealed.

(r) The first sentence of section 4(a) of Public Law 86-571 (24 U.S.C. 324) is amended by striking out "Saint Elizabeths Hospital, at any other" and inserting in lieu thereof "any".

(s) Section 2104 of the Public Health Service Act (42 U.S.C. 300aa-3) is repealed.

(t)(1) The last sentence of section 206 of an Act of June 9, 1948, chapter 428 of the laws of the second session of the 80th Congress (D.C. Code 22-3508), is amended by striking out "Saint Elizabeths Hospital" and inserting in lieu thereof "an appropriate institution".

(2) Section 207 of that Act (D.C. Code 22-3509) is amended by striking out "the Superintendent of Saint Elizabeths Hospital" and inserting in lieu thereof "an appropriate supervisory official", and by striking out "the Superintendent of the hospital" and inserting in lieu thereof "that official".

(3) Section 208 of that Act (D.C. Code 22-3510) is amended by striking out "Saint Elizabeths Hospital" and inserting in lieu thereof "an institution".

(u) The first sentence under the subheading "GOVERNMENT HOSPITAL FOR THE INSANE." under the heading "INTERIOR DEPARTMENT." of an Act of March 3, 1877, chapter 105 of the laws of the second session of the 44th Congress, is amended by striking out the semicolon and all that follows before the period (D.C. Code 32-401).

24 USC 202.

(v) The first sentence under the subheading "GOVERNMENT HOSPITAL FOR THE INSANE." under the heading "MISCELLANEOUS OBJECTS." of an Act of March 3, 1879, chapter 182 of the laws of the third session of the 45th Congress, is amended by striking out the proviso and the colon preceding and inserting in lieu thereof a period (D.C. Code 32-402).

24 USC 203.

(w) The matter under the subheading "HOSPITAL FOR THE INSANE:" under the heading "DISTRICT OF COLUMBIA." of an Act of March 4, 1913, chapter 149 of the laws of the third session of the 62nd Congress, is amended by striking out the second sentence (D.C. Code 32-404).

(x) Sections 4 and 5 of an Act of June 22, 1948, chapter 597 of the laws of the second session of the 80th Congress (D.C. Code 32-415 and 32-416) are repealed.

(y) The matter under the subheading "GOVERNMENT HOSPITAL FOR THE INSANE." under the heading "UNDER THE DEPARTMENT OF THE INTERIOR." in the first section of an Act of March 4, 1911, chapter 285 of the laws of the third session of the 61st Congress, is amended by striking out the second sentence.

36 Stat. 1421.

24 USC 165.

EFFECTIVE DATES

24 USC 225 note.

SEC. 11. (a) Except as provided in subsection (b), this Act shall take effect on October 1, 1985.

(b) Section 10 shall take effect on October 1, 1987.

Approved November 8, 1984.

LEGISLATIVE HISTORY—H.R. 6224:

HOUSE REPORTS: No. 98-1024 and Pt. 2 (Comm. on the District of Columbia),
CONGRESSIONAL RECORD, Vol. 130 (1984):

Oct. 2, considered and passed House.

Oct. 5, considered and passed Senate, amended.

Oct. 9, House concurred in Senate amendments.

WEEKLY COMPILATION OF PRESIDENTIAL DOCUMENTS, Vol. 20, No. 45 (1984):
Nov. 9, Presidential statement.