ED 027 662 EC 003 460

A Summary of Selected Legislation Relating to the Handicapped, 1963-1967.

Department of Health, Education and Welfare, Washington, D.C.

Pub Date May 68

Note-49p.

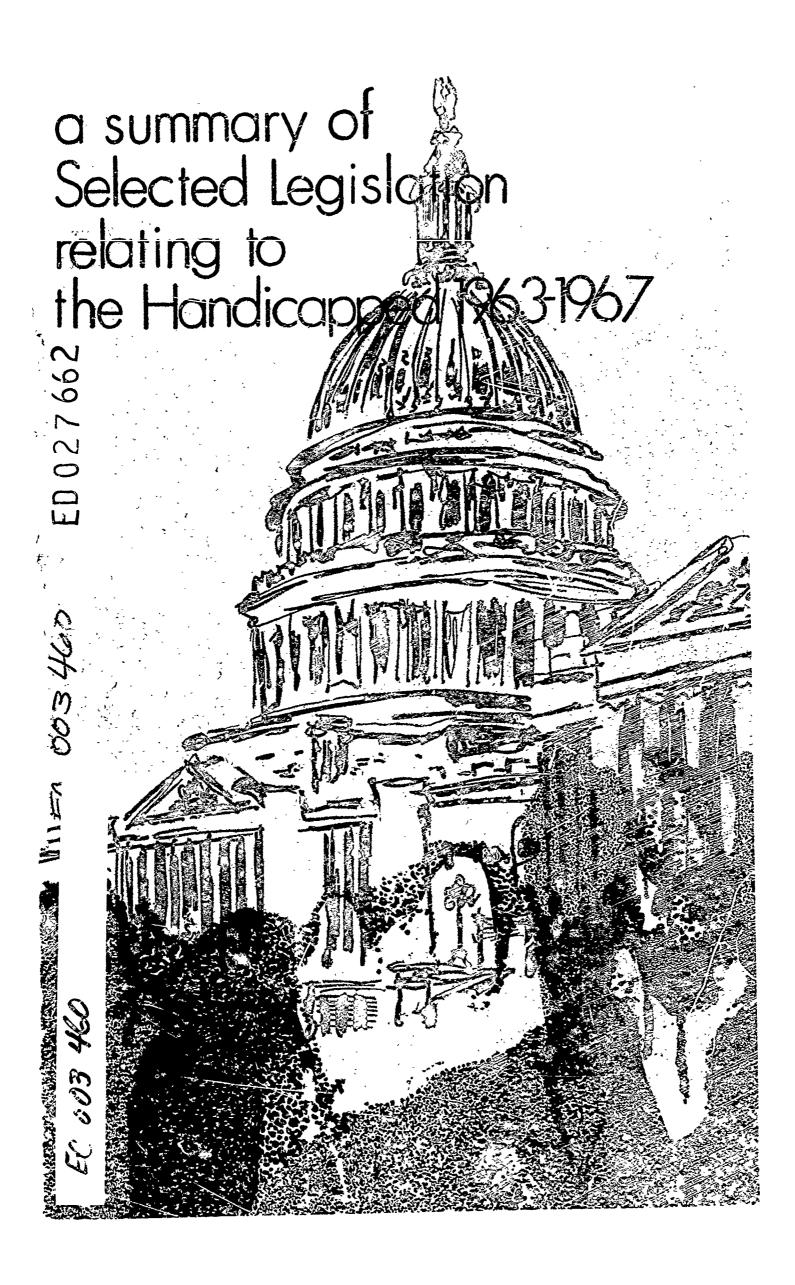
Available from Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402 (\$0.30).

EDRS Price MF-\$0.25 HC Not Available from EDRS.

Descriptors-Aurally Handicapped, Community Health Services, Disease Control, *Exceptional Child Services, Facilities, Federal Aid, Federal Legislation, Films, *Handicapped Children, Health Facilities, Higher Education, Insurance Programs, *Legislation, Library Services, Mental Health Clinics, Mentally Handicapped, Military Personnel, Secondary Schools, Technical Institutes, Vocational Rehabilitation

The 26 major laws enacted between 1963 and 1967 which affected the handicapped are considered. The historical development of four major laws includes the Social Security Act Amendments of 1963, 1964, 1965, and 1967; the Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963; the Elementary and Secondary Education Act of 1965; and the Vocational Rehabilitation Amendments of 1965 and 1967. Major provisions are given for the 26 laws which cover these areas: maternal and child health and mental retardation; hospital and medical facilities; social security; elementary and secondary education; the National Technical Institute for the Deaf; community health service; heart disease, cancer, and stroke; Captioned Films for the Deaf; federal assistance to state schools for the handicapped; vocational rehabilitation; library services; military medical benefits; comprehensive health planning; and mental health. A legislative history of the bills is included in tabular form. (L.E.)







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Title Vi of the Civil Rights Act of 1964 states: "No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." Therefore, the mental retardation grants program, like every program or activity receiving financial assistance from the Department of Health, Education, and Welfare, must be operated in compliance with this law.



A SUMMARY of SELECTED LEGISLATION RELATING to THE HANDICAPPED

1963 - 1967



U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Wilbur J. Cohen, Secretary
Alvin L. Schorr, Acting Assistant Secretary for
Individual and Family Services

Washington, D.C. 20201

May 1968

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE OFFICE OF EDUCATION

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Foreword

Programs designed to assist the handicapped have long formed a significant part of Federal support in the fields of health, education, welfare and vocational rehabilitation. However, the significant amount of substantive legislation in this field enacted during the past five years is without precedent.

The overall objectives of the Department of Health, Education, and Welfare programs for the handicapped are:

- to enable every handicapped person to benefit to the maximum degree from all available resources—and that this benefit be consistent with the individual's needs, requirements and total well-being;
- to assist in planning for the expansion of existing resources—personnel, facilities, and services—so that all handicapped persons can obtain all the services needed;
- to cooperate with other Federal, State and local public and nongovernmental agencies in making these objectives a reality.

The responsibility of the Department for handicapped children is the same as it is for all our youth—to assist them in fully developing their talents to prepare them to be responsible citizens in our society and to offer them opportunities for educational and cultural enrichment of their lives. We have taken many steps toward this goal in recent years. We believe we can look forward to still further accomplishments in the days ahead.

Wilbur J. Cohen Secretary





INTRODUCTION

During the period between the beginning of the 88th Congress, First Session (1963) and the ending of the 90th Congress, First Session (1967) there were 26 major laws enacted which affect the handicapped.

These laws comprise a program of action covering many aspects of the handicapped person's life. The legislation enacted provided funds for activities ranging from the construction of specialized facilities to the provision of income for persons unable to support themselves because of disability.

Such financial assistance programs have furnished incentive and inducement to public and private non-profit institutions and orge izations to develop and broaden numerous programs for the handicapped.

This publication is intended to help both the student and the interested observer better understand the role of the Federal Government in helping the handicapped achieve a measure of self-respect and dignity. It underscores the importance of legislative action in providing special services for persons in need of them.

Part I traces the historical development of four major laws which affect the handicapped.

Part II reviews in some detail 26 laws enacted from 1963 to 1967.

No attempt has been made here to include information on legislative intent or on special arrangements made in Congressional committees. Such information would, in itself, comprise a sizeable document and cannot be included.

It is for this reason that certain of the laws included herein will not contain specific reference to the handicapped. Such references will be found in the legislative history of the particular law.

A legislative history is included for those persons who wish to trace the development of a particular bill through the legislative process. This legislative history will be found in the Appendix on page 37.

All of the laws reviewed herein are administered by the U.S. Department of Health, Education, and Welfare with the exception of the Military Medical Benefits Amendments of 1966 (P.L. 89-614). This law is administered by the U.S. Department of Defense, with the cooperation of the Department of Health, Education, and Welfare.



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PART I A SUMMARY OF MAJOR LEGISLATION AFFECTING THE HANDICAPPED

PART I

LEGISLATIVE HIGHLIGHTS 1963-1967 -- A SUMMARY

1. SOCIAL SECURITY AMENDMENTS OF 1963 (P.L. 88-156)

Between 1935 and 1963 the Social Security Act has been developed by successive amendments to provide: (1) a general base of support for the aged and disabled on the insurance principle (social security); (2) cash assistance through the State welfare systems to those in dire need because of age, disability or blindness or dependence of children deprived of their fathers; and (3) an extension program of project grants and formula grants to the States to support such programs as Maternal and Child Health Services, Crippled Children's Services and Child Welfare Services.

The Amendments of 1963 authorized Federal expenditures of \$265 million over a five-year period beginning with fiscal year 1964; expanded maternal and child health and crippled children's services; authorized project grants to provide health care services for expectant mothers from low income disadvantaged areas; approved grants for research projects in maternal and child health and crippled children's services which might provide for breakthroughs in these programs; provided grants to the States to assist in a comprehensive planning action to combat mental retardation at the State and community level.

Under P.L. 88-641 (1964) the authority for Federal matching of payments for children placed in non-profit private child-care institutions was extended until June 30, 1967. This law also broadened the assistance program to permit matching of payments to needy children over age 18, but under 21 if in high school or vocational or technical training programs.

Public Law 88-650 (1964) permitted a disabled worker to establish the beginning of his disability for purposes of social security protection as of the date of his actual disablement; the law also allowed States to extend from the Listing 12 months up to a maximum of 36 months, the period within which specified amounts of income are exempted in determining need for aid to the blind.

The 1965 Social Security Amendments (P.L. 89-97) provided for major changes and expansions of chi'd health and other welfare programs, and also provided the first general increase in social security cash benefits since 1958.

Of significance were the "medicare" and "medicaid" provisions of the 1965 bill. The former provided: (1) a basic program of hospital insurance, extended care and home health services for the aged, financed through social security; (2) a voluntary supplemental program covering doctors' fees and some other health services. The Medicaid Program authorized in the new Title XIX expanded the Kerr-Mills program authorizing medical assistance for the needy aged, blind, disabled and dependent children, and



offered the States the option of extending medical assistance to the medically needy not in the foregoing categories.

A new section established a 5-year program of special project grants to provide comprehensive health care and services for needy children of school and pre-school age. Funds were also provided for the training of professional personnel in the care of crippled children, particularly mentally retarded children and children with multiple handicaps.

The 1967 Social Security Amendments (P.L. 90-248) placed special emphasis upon early casefinding services for children. The Amendments increased authorizations for child welfare services and consolidated the existing child health authorizations into a single authorization. Of the total authorization, 50 percent was designated for formula grants, 40 percent for project grants and 10 percent for training and research grants for the period July 1, 1968, to June 30, 1972. Until July 1972, project grants are authorized for: (1) the reduction of infant and maternal mortality and of the incidence of handicapping conditions associated with childbearing; (2) promotion of the health of school and pre-school age children; and (3) provision of dental care to children. Beginning in July 1972, the States will be responsible for carrying on these projects. The legislation amended Title XIX, Medical Assistance, to require early identification and treatment of physical or mental problems of children. Title XIX also requires agreements for utilization and reimbursement for services furnished by agencies or institutions participating in the various maternal and child health grant and project programs under Title V of the Social Security Act. The program of Special Projects for Maternity and Infant Care was increased and extended for four years.

The 1967 Amendments also placed special emphasis on the program of research projects relating to Maternal and Child Health Services and Crippled Children's Services, and an examination of the need, feasibility, cost and effectiveness of utilizing health personnel with varying levels of training in comprehensive health care programs. The training of health personnel to work in such projects was also authorized.

2. MENTAL RETARDATION FACILITIES AND COMMUNITY MENTAL HEALTH CENTERS CONSTRUCTION ACT OF 1963 (P.L. 88-164)

This law provided for construction of research centers and training facilities relating to mental retardation, construction and establishment of community mental health centers, research and demonstration in the education of handicapped children, and amended P.L. 85-926 to provide training of personnel in all areas of education for the handicapped at all levels of preparation—from teacher training to the training of college instructors, research personnel, and the administrators and supervisors of teachers of the handicapped.

The 1965 Amendments (P.L. 89-105) closed a gap in the original legislation enacted in 1963 by authorizing a \$224 million program of grants for staffing community mental health centers during the first 51 months of their operations with technical and professional personnel. In addition, the 1965 Amendments extended and expanded the existing grant program for training teachers of handicapped children and for research and demonstrations in the education of handicapped children.

The Mental Retardation Amendments of 1967 (P.L. 90-170), (1) extended and expanded through June 30, 1970, the programs under which matching grants are made



for construction of university-affiliated mental retardation facilities and community retardation facilities; (2) established a new program of matching grants following the formula used in the Community Mental Health Centers Act to help meet the cost of initiating services in community mental retardation facilities; (3) extended until June 30, 1970, the provisions of P.L. 85-926 (as amended); and (4) provided for training of physical education and recreation personnel for mentally retarded and other handicapped children and for research and demonstration projects in these areas. The Research and Demonstration activities were extended until 1970 by the Elementary and Secondary Education Amendments of 1967 (P.L. 90-147).

3. THE ELEMENTARY AND SECONDARY EDUCATION ACT OF 1965 (P.L. 89-10)

This law authorized a total expenditure of \$1.33 billion for fiscal year 1966, which represented the greatest legislative commitment ever made by the Federal Government to the improvement of elementary and secondary education. The law authorized \$1 billion of assistance to local school agencies, to be provided through the States for use in programs to meet the special needs of educationally deprived children. It also authorized major programs to assist the States in the acquisition of library resources and textbooks; to create supplemental educational centers providing special scientific, cultural, and other educational resources; to increase educational research and to establish a series of national and regional educational research laboratories; and to strengthen State educational agencies.

Public Law 89-313 amended Title I of the Elementary and Secondary Education Act to provide grants to State agencies directly responsible a sviding free public education for handicapped children.

The 1966 Amendments (P.L. 89-750) amended the 1965 Act by adding a new Title VI which provided for assistance in the education of the handicapped children. To participate in the program a State must submit to the Commissioner of Education a State plan providing satisfactory assurance that funds paid to the State under this program would be expended either directly or through local education agencies solely to initiate, expand, or improve programs and projects (including pre-school programs and projects) which were designed to meet the special educational and related needs (findicapped children throughout the State. The programs and projects must of sufficient size and scope and quality as to give reasonable promise of substantial progress toward meeting these needs.

The 1966 Amendments also directed the Commissioner of Education to establish in the Office of Education a National Advisory Committee on Handicapped Children to make recommendations to him concerning programs carried on for handicapped children by the Office of Education. The Commissioner was also directed to establish and maintain within the Office of Education a bureau for the education and training of handicapped children which would be the principal agency in the Office of Education for administering and carrying out programs and projects relating to the education and training of handicapped children, including programs and projects for the training of teachers of the handicapped and for research in special education and training.

The 1967 Amendments (P.L. 90-247) broadened and extended the existing program of services to the handicapped. A program of Regional Resource Centers was authorized



which will provide testing and educational evaluation to determine special education needs of handicapped children referred to them, develop educational programs to meet those needs and assist schools and educational agencies in providing such educational programs through consultation, re-examination and re-evaluation, and technical services.

The legislation also authorized the establishment and operation of Centers for deaf-blind children. The Centers will provide comprehensive diagnostic and evaluation services; programs for education, orientation and adjustment; and consultative services for parents, teachers and others working with the deaf-blind. In addition, the legislation authorized grants and contracts for research, demonstrations and training in the area of the deaf-blind.

The 1967 Amendments also authorized a program designed to improve recruiting of educational personnel and to improve dissemination of information concerning educational opportunities for the handicapped.

The existing Instructional Media Program, which initially provided a loan service of captioned films for the deaf, was expanded to include the production and distribution of educational media for the use of all types of handicapped persons, their parents, employers, and other persons involved in the work for the advancement of the handicapped and the training of persons in the use of instructional media for the handicapped; and research in the use of educational and training films and other educational media for the handicapped.

Special earmarking of funds for the handicapped was also provided for in Title III beginning in fiscal year 1969.

The 1967 law also provided for full funding under Section 103(a)(5) of Title I for educational activities for children in State-operated or supported institutions for the handicapped.

The research activities authorized under P.L. 88-164 were extended by the 1967 law. Funds were authorized through June 30, 1970. The Commissioner of Education was given contract authority in addition to the grant authority he previously had and funds could be used for related purposes in addition to research and demonstrations. In addition, the Commissioner was permitted to directly conduct research, surveys and demonstrations in the area of education of the handicapped.

4. VOCATIONAL REHABILITATION ACT AMENDMENTS OF 1965 (P.L. 89-333)

The 1965 Amendments improved and expanded the existing vocational rehabilitation legislation by making possible more flexible financing and administration of State vocational rehabilitation programs, including provisions to allow Federal matching of local public funds made available to the States; provided a new formula for the allotment of Federal funds among the States; encouraged the development and extension of rehabilitation services by providing a program of innovation grants to States for the introduction of new techniques and the expansion of services, particularly for the severely disabled; established a new five-year program of grants for the construction of rehabilitation facilities and workshops, including assistance for planning, expansion, remodeling, renovation and initial equipment; authorized a five-year program of grants for the staffing of rehabilitation facilities.



The 1965 Amendments authorized a new five-year program of project grants for workshop improvement, including training projects (with allowances for trainees), operational improvement projects; authorized the Vocational Rehabilitation Administration to provide technical assistance to workshops; established a National Policy and Performance Council on workshop improvement; also created a National Commission on Architectural Barriers to Rehabilitation of the Handicapped; authorized grants for research and study into personnel practices and personnel needs in the field of correctional rehabilitation; authorized project grants to public and other non-profit agencies for the expansion of vocational rehabilitation services, as well as a new two-year program of grants to States for comprehensive planning. The Vocational Rehabilitation Administration was given specific authority for intramural research. States were given wider latitude in determining rehabilitation potential of individuals.

The 1967 Amendments (P.L. 90-99), amended the Vocational Rehabilitation Act and extended and expanded the authorization of grants to States for rehabilitation services; also authorized assistance in establishment and operation of a National Center for Deaf-Blind Youths and Adults. The 1967 Amendments further provided funds for projects which would extend rehabilitation services to handicapped migrant agricultural workers.



PART II A LEGISLATIVE REVIEW



PART II

A LEGISLATIVE REVIEW

1. MATERNAL AND CHILD HEALTH AND MENTAL RETARDATION PLANNING AMENDMENTS OF 1963. (P.L. 88-156)

Public Law 88-156 was enacted on October 24, 1963.

The amendments were designed to carry out a number of the recommendations made to the President and to the Nation by the President's Panel on Mental Retardation.

MAJOR PROVISIONS

Planning grants to the States:—The legislation authorized \$2.2 million for grants to States for comprehensive mental retardation planning. The funds appropriated were available for fiscal years 1964 and 1965. The grants were used to determine action needed to combat mental retardation in a State, to assess resources available to develop public awareness of the problem and to coordinate State and local efforts in education, employment, rehabilitation, welfare, health and the law for the prevention, treatment and amelioration of retardation. The Federal grant could not cover more than 75 percent of the cost of the project. A minimum of \$30,000 was allocated to each jurisdiction eligible to participate in the program.

Project grants for maternal and infant care:—Authorized a five-year program of grants to public health agencies for projects which would provide necessary health care for expectant mothers who were unlikely to receive such care either because they were from families with low income or for other reasons. Authorized grants totaled \$110 million — \$5 million in fiscal year 1964, \$15 million in 1965, and \$30 million each for fiscal years 1966-1968. The Federal grant could not exceed 75 percent of the cost of any project.

Increases in maternal and child health services:—Expanded the existing Federal-State program by raising to \$50 million over a seven-year period, beginning with fiscal year 1964, the annual ceiling of \$25 million on Federal funds.

Increases in crippled children's services:—Federal funds authorized for crippled children's services were also increased, over a seven-year period, from the existing \$25 million a year to \$50 million for fiscal year 1970 and subsequent years.

Grants for research relating to maternal and child health and crippled children's services:—Authorized up to \$8 million per year for grants, contracts, or jointly financed



cooperative arrangements for research projects related to maternal and child health and crippled children's services that showed promise of substantial contribution to the advancement of these programs.

See also P.L. 89-97 and P.L. 90-248.

2. MENTAL RETARDATION FACILITIES AND COMMUNITY MENTAL HEALTH CENTERS CONSTRUCTION ACT OF 1963. (P.L. 88-164)

Public Law 88-164 was enacted on October 31, 1963.

This legislation authorized appropriations of \$329 million over a five-year period to provide grants for: (a) construction of research centers and facilities related to mental retardation; (b) construction and establishment of community mental health centers; and (c) training of teachers of handicapped children.

MAJOR PROVISIONS

Construction of research centers and facilities for the mentally retarded (Title I):—Part A of this title authorized project grants for the construction of public or nonprofit centers for research that would develop new knowledge for preventing and combating mental retardation.

Part B authorized project grants to assist in the construction of public or nonprofit clinical facilities for the mentally retarded, associated with a college or university which: (1) provide, as nearly as practicable, a full range of inpatient and outpatient services; (2) aid in demonstrating provision of specialized services for diagnosis, treatment, training, or care; and (3) aid in the clinical training of physicians and other specialized personnel needed for research, diagnosis, treatment, training, or care.

Part C authorized Federal grants to States to assist in the construction of specially designed public and nonprofit facilities to provide diagnosis, treatment, education, training, custodial (personal) care and sheltered workshops for the retarded. The program is administered in each State by an officially designated State agency. Allotments to States are based on population, extent of need for facilities for the mentally retarded and financial need, with a minimum allotment of \$100,000 for any State.

Construction of community mental health centers (Title II):—Authorized grants to the States for the construction of public and other nonprofit community mental health centers—facilities providing services for the prevention or diagnosis of mental illness, or care and treatment of mentally ill persons, or rehabilitation of persons recovering from mental illness.

The provisions relating to allotments among the States and to the Federal share of the cost of projects are substantially the same as for construction grants for community mental retardation facilities (Part C of Title I).

Training of teachers of mentally retarded and other handicapped children (Title III):—Authorized grants to institutions of higher learning and to State educational agencies to extend and strengthen the existing programs for training teachers of mentally



retarded children and deaf children and to expand these programs to include the training of teachers of all handicapped children, including the visually handicapped, the speech impaired, the seriously emotionally disturbed, hearing impaired, crippled and other health impaired children.

Title III also authorized grants to States and to public and nonprofit educational or research agencies for research or demonstration projects relating to the education of the handicapped.

See also P.L. 89-105 and P.L. 90-170.

3. HOSPITAL AND MEDICAL FACILITIES AMENDMENTS OF 1964 (P.L. 88-443)

Public Law 88-443 was enacted on August 18, 1964.

These amendments extended and revised the Hill-Burton hospital construction program.

MAJOR PROVISIONS

A total of \$1.34 billion was authorized for an expanded five year program of grants and loans to aid new construction, modernization, and replacement of hospitals, long-term care facilities, public health centers, diagnostic and treatment centers and rehabilitation facilities.

Project grants were authorized to assist in the development of comprehensive regional, metropolitan, or other local area plans for health facilities.

Grant programs for chronic disease hospitals and nursing homes, previously separate, were combined under the category of "Facilities for Long Term Care" with an increased annual authorization of \$70 million.

States were allowed to use up to two percent of their allotments, or \$50,000, whichever is less, for purposes of administration of the State plan.

Between 1948 and 1963, \$12.9 billion was spent on the construction of hospitals and other health facilities; of this amount, \$4.5 billion was expended in projects receiving Federal assistance under the Hill-Burton legislation, with the Federal share averaging 35 percent, or a total of \$1.6 billion.

By bringing the previously separate categories of chronic disease hospitals and nursing homes into a single program, the legislation sought to overcome program and administrative problems that had arisen from attempts to plan separately for these two types of long-term care facilities in the past.

4. SOCIAL SECURITY AMENDMENTS OF 1964 (P.L. 88-641)

Public Law 88-641 was enacted on October 13, 1964.

This legislation extended and broadened the provisions of the Aid to Families with Dependent Children Program (AFDC) by (a) continuing Federal participation in payments for children requiring foster care, and (b) authorizing AFDC payments for children up to age 21, provided they were in school.



MAJOR PROVISIONS

Extended authority for Federal matching payments for children placed in non-profit, private child-care institutions until June 30, 1967.

Broadened the definition of "dependent child" to include children in high school, or in vocational or technical training programs up to age 21.

Foster Care:—To give the States an alternative to leaving children in unsuitable homes or caring for them elsewhere without Federal participation in the costs, the Congress in 1961 enacted a temporary provision for Federal participation, under limited circumstances, in the cost of care in foster family homes. This applied to children who had been receiving aid to dependent children but who had been removed by a court from homes found contrary to the welfare of the child.

The Public Welfare Amendments of 1962 made permanent the Federal participation in the cost of care in foster family homes and extended until September 30, 1964, the provision to include care in non-profit, private child-care institutions so that the most appropriate facility for a particular child may be used. The 1964 law extended this provision until June 30, 1967.

Extension of Age Limit:—The provision extending the age limit from 18 to 21 years of age recognized that children may remain dependent while they are pursuing an educational program. As noted by the Serate Report, "the . . .sharp cutoff at age 18 may have the effect of forcing just those children to leave school who are most in need of a high school education or vocational training if they are to become self-sufficient and stay off the welfare rolls."

See also P.L. 88-156, P.L. 88-650, P.L. 89-97, and P.L. 90-248.

5. SOCIAL SECURITY AMENDMENTS OF 1964 (P.L. 88-650)

Public Law 88-650 was enacted on October 13, 1964.

This law amended the Social Security Disability Insurance Program and the Public Assistance Program of Aid to the Blind.

MAJOR PROVISIONS

Amended the OASDI (Old-Age, Survivors, and Disability Insurance) program to permit a disabled worker to establish the beginning of his disability, for purposes of social security protection, as of the date of his actual disablement.

Amended Titles X and XVI of the Social Security Act and permitted States to extend from 12 months to 36 months the period within which specific amounts would be exempted in determining need under aid to the blind program.

Retroactivity of Disability Applications:—The Social Security Amendments of 1956 made benefits available to disabled workers, including those who had become disabled many years before, provided that, at the time the disability began, disability-insured status requirements were met. Subsequently a restriction on the retroactivity of disability



applications became effective; the beginning of a period of disability could not be established more than 1½ years before the application was filed.

Public Law 88-650 eliminated the restriction on the retroactivity of disability applications, and permitted disabled workers to establish the beginning of a period of disability as of the date of actual disablement, even though the application for disability benefits is filed much later, as under the original disability provisions.

The Public Welfare Amendments of 1962 amended Titles X and XVI of the Social Security Act to provide that, in determining eligibility in the aid to the blind program, a State shall, in addition to the specified exempted amount of earned income—the first \$85 per month plus one-half of other earned income—exempt such other amounts of income and resources for an individual who has a plan approved by the State agency for achieving self-support. The period of additional exemption could not exceed 12 months for any individual. Public Law 88-650 permitted a State to allow up to a total of 36 months for an individual who had such a State-approved plan.

See also P.L. 88-156, P.L. 88-164, P.L. 89-97 and P.L. 90-248.

6. ELEMENTARY AND SECONDARY EDUCATION ACT OF 1965 (P.L. 89-10)

Public Law 89-10 was enacted on April 11, 1965.

The heart of this legislation was a three-year program of Federal grants to the States for allocation to school districts having children in low income families. The funds are available for projects adding to the local educational agency's programs for "educationally disadvantaged" children. This term was defined by Congress to include handicapped children.

MAJOR PROVISIONS

The Elementary and Secondary Education Act of 1965 (P.L. 89-10) gave an enormous impetus to developing educational services for the handicapped. Title I authorized a three-year effort to encourage and support the creation, expansion, or improvement of special programs. This included the construction of facilities to meet the needs of culturally deprived children from low-income families, many of whom are diagnosed as mentally retarded or emotionally disturbed, but who actually are primarily lacking in educational experience and a sense of achievement. It is estimated that 50 percent or more of children with IQ's between 70 and 80 come from disadvantaged homes. Special teaching efforts for these children in the pre-school and early school years can make up for much of their scholastic shortcomings and possibly prevent functional mental retardation from becoming permanent.

Funds appropriated under this Act could be employed to finance home visits by teachers, counselors and social workers who, with the aid of key men and women from the neighborhood, would try to solicit parental interest and cooperation.

Once identified, the handicapped could be helped by special classes or could even be guided back into the mainstream of regular work with supplementary teaching materials designed to encourage the widest possible use of their latent physical and mental capacities. The aim would be to provide those enriching and stimulating experiences



which the normal child takes for granted. An important role was reserved under Title II for picture books, movies, and taped records of music and simple poetry. Programmed instruction, too, will play an increasing part as suitable curricula are developed for the handicapped child. Many children receive speech and hearing services to help them overcome the barriers to learning which are related to communication disorders.

Funds were provided under this Act for refresher training for supervisors and for

training and hiring teacher aides.

The handicapped, like other children, need variety in their lives, for psychological as well as intellectual reasons. This Act helped school districts provide educational summer camps or all day summer schools for mentally retarded children.

Title III of the Act recognized that one of the greatest challenges to improving educational quality for all students is the uneven distribution of scientific and cultural as well as purely "educational" facilities and resources. This inequality is particularly unfortunate for the handicapped. Among the variety of supplementary services that may make the difference between success and failure in teaching the handicapped are special instruction in science, languages, music, and the arts, and regular, easy access to museums, laboratories, art galleries and theaters. Title III opened up these opportunities to the handicapped on a fairly large scale for the first time.

Educational centers were also set up to establish model programs which could mark the beginning of wholly new approaches to teaching the culturally deprived and handicapped. Because the education of the handicapped is constantly changing, teachers in this field need to experiment with new ideas and materials and test them under actual classroom conditions. The Centers enhance such experimental teaching. The use of auxiliary teams of psychologists and social workers can be weighed, organic defects and environmental conditioning can be evaluated, and appropriate curricula and methods prepared in these special centers.

Title IV of the Act amended the Cooperative Research Act to authofize the training of research personnel and the development of improved methods of disseminating research findings to other education centers and local school districts. Private non-collegiate research organizations and professional associations were eligible to participate

in this training effort.

Title V of the Elementary and Secondary Education Act authorized a five-year program to stimulate and assist in strengthening the leadership resources of State education departments.

See also P.L. 89-313, P.L. 89-750 and P.L. 90-247.

7. NATIONAL TECHNICAL INSTITUTE FOR THE DEAF ACT (P.L. 89-36)

Public Law 89-36 was enacted on June 8, 1965.

This legislation provided for a residential facility to give post-secondary technical training and education for the deaf to prepare them for successful employment. A twelve-member, ad hoc Advisory Board on Establishment of the National Technical Institute for the Deaf was appointed by the Secretary of Health, Education, and Welfare to review proposals from institutions of higher education which offered to enter into an agreement with the Secretary for the construction and operation of a National Technical Institute for the Deaf, to make recommendations with respect to such proposals and with



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respect to the establishment and operation of the Institute. After the Secretary had entered into the agreement, the Board would cease to exist.

The National Technical Institute for the Deaf will provide a broad, flexible curriculum suited to the individual needs of young deaf adults with potential for further education and training. Successful operation of such a technical training program for the deaf will depend upon the availability of adequately trained staff, resourceful and imaginative in meeting the challenge of the special problems involved.

MAJOR PROVISIONS

The Institute will enroll at least 200 students per year to a capacity of 600, with provisions for further expansion.

The principal objective of the Institute is the employment of the student upon his completion of a prescribed educational program.

The National Technical Institute for the Deaf will be located in a large metropolitan industrial area to serve the special needs of deaf youth from any community. The area will have a wide variety of nationally representative types of industrial activities available for training experience that will prepare the student to return home for employment. The Institute will be affiliated with a major university for the administration of its program.

The curriculum will be flexible enough to permit a variety of adaptations-tailor-made for individual students, without having to conform to traditional accreditation standards.

The program will be broad enough to include a basic remedial program, a supplementary curriculum of the social sciences and humanities, and a technical science curriculum.

In addition to serving as a practice teaching center for the training of teachers, instructors, and rehabilitation counselors for the deaf, the Institute will serve as a research facility for the study of educational problems of the deaf. The National Technical Institute for the Deaf will be an excellent proving ground for the development of new educational techniques that can be applied to all programs where deaf children are taught.

8. SOCIAL SECURITY AMENDMENTS OF 1965 (P.L. 89-97)

Public Law 89-97 was enacted on July 30, 1965;

Funds were authorized for training professional personnel for the care of crippled children, \$5 million for fiscal year 1967, \$10 million for 1968, and \$17.5 million for each fiscal year thereafter. The program has helped reduce the severe shortage of professional personnel to deal with mentally retarded children and children with multiple handicaps.

A five-year program of special project grants for low-income school and pre-school children has provided comprehensive health care and services for children of school age and for pre-school children, particularly in areas with concentrations of low-income families.

Grants of \$2.75 million a year for 1966 and 1967 were authorized to assist States in following up and implementing the comprehensive plans to combat mental retardation that have been developed under legislation enacted in 1963.



Federal funds to the States were authorized for aid to the needy aged in mental or tuberculosis institutions, effective January 1, 1966. Mentally retarded residents of institute institutes as benefited from this provision.

MAJOR PROVISIONS

Training of Professional Personnel for the Care of Crippled Children:-P.L. 89-97 authorized appropriations of \$5,000,000 for fiscal year 1967, \$10,000,000 for fiscal year 1968 and \$17,500,000 for each fiscal year thereafte. for grants to be used in the training of professional personnel for the care of crippled children, particularly mentally retarded children and children with multiple handicaps.

Grants have been made to institutions of higher learning for training professional personnel such as physicians, psychologists, nurses, dentists, and social workers.

Project Grants for the Health of School and Pre-School Children:—Children of low-income families have benefited from the comprehensive medical care program provided in Section 532 of the Social Security Act. In order to promote the health of children and youth, particularly in areas with concentrations of low-income families, P.L. 89-97 amended Section 532 by authorizing \$15,000,000 for the fiscal year 1966, increasing to \$50,000,000 for the fiscal year 1970 to provide up to 75% of the costs of comprehensive projects which must include screening, diagnosis, preventive services, treatment, correction of defects and aftercare, both medical and dental. The services provided under such projects are required to be coordinated with other State or local health, welfare, and educational programs for these children.

These programs have served children with a wide variety of problems, and have contributed to the development of additional resources, especially in major population centers where there is frequently overcrowding in existing facilities.

Grants have been made to health departments, crippled children's agencies, schools of medicine and to teaching hospitals affiliated with such schools.

Changes in the Disability Program:—The requirement that a worker's disability must be expected to be of long-continued and indefinite duration was eliminated. The 1965 Amendments further provided that an insured worker was eligible for disability benefits if he had been under a disability which could be expected to result in death or which had lasted or could be expected to last for a continuous period of not less than 12 calendar months.

The 1965 Amendments provided for reimbursement from social security trust funds to State vocational rehabilitation agencies for the cost of rehabilitation services furnished to selected individuals who were entitled to disability insurance benefits or to disabled child's benefits.

The 1965 law modified the disability provisions with respect to the blind. The definition of disability was modified so that an individual would be considered disabled if he was between the ages of 55 and 65, and met the definition of "blindness" and was unable by reason of such blindness to engage in substantial gainful activities requiring skills or abilities comparable to those required in his past occupation or occupations.

The 1965 Amendments also provided an alternative insured status requirement for persons who were disabled before age 31 by reason of blindness.



Implementation of Mental Retardation Comprehensive Plans:—The "Maternal and Child Health and Mental Retardation Planning Amendments of 1963" (P.L. 88-156), authorized, for the first time, grants to States and Territories for comprehensive mental retardation planning. The planning was collaborative and interagency in nature, with participation of agencies responsible for services in education, employment, rehabilitation, welfare, health, and the law, including both community agencies and residential programs. Funds totaling \$2.2 million were made available for two fiscal years, 1964 and 1965.

Basic planning grants of \$30,000 each were allocated and awarded to all the States and Territories (except American Samoa), and supplemental planning funds, totaling \$579,998, were awarded to a total of 35 States and Territories for a variety of extended planning projects. These grants have made it possible for the States and Territories to begin comprehensive mental retardation planning. Close Federal-State liaison has been maintained in this effort.

P.L. 89-97 extended the grant program for comprehensive planning in mental retardation initiated under P.L. 88-156 to enable States to begin implementing their comprehensive plans to combat mental retardation. These grants are used to determine the action needed to combat mental retardation and the resources available for this purpose; to develop public awareness of the mental retardation problem and the need for combating it; to coordinate State and local activities relating to the various aspects of the problem; and to develop specific programs for implementing the recommendations of the comprehensive State plan. Appropriations of \$2.75 million were made in both fiscal years 1966 and 1967, to be available through 1968, and the minimum allotment to a State was \$35,000 out of each of the appropriations.

See also P.L. 88-156, P.L. 88-641, P.L. 88-650 and P.L. 90-248.

9. MENTAL RETARDATION FACILITIES AND COMMUNITY MENTAL HEALTH CENTERS CONSTRUCTION ACT AMENDMENTS OF 1965 (P.L. 89-105)

Public Law 89-105 was enacted on August 4, 1965.

The 1965 Amendments provided for a program of grants for staffing community mental health centers during the first 51 months of their operations with technical and professional personnel.

This Act also amended prior legislation which authorized programs in the area of the education of handicapped children. The legislation extended and expanded the training activities for teachers of handicapped children, extended and expanded research authority, and added construction authority to the program of research and demonstrations in this area.

MAJOR PROVISIONS

This legislation amended two existing laws which provided funds for training of teachers of handicapped children and research and demonstration projects related to special education. The law strengthened and expanded the programs for the mentally



retarded begun under prior legislation, and accelerated the national effort to provide the best possible education to mentally retarded children.

The program of training of teachers of mentally retarded and other handicapped children was extended for an additional three years. The existing law authorized the program through June 30, 1966. The 1965 Amendments extended it through June 30, 1969.

The research and demonstration program was also extended to 1969 with increased authorization for appropriations. The existing law authorized funds only through June 30, 1966. In addition, as part of the research and demonstration authority, the Commissioner of Education was authorized to make a grant to an institution of higher learning for the construction, equipping and operation of a facility for research and demonstration in the field of education of handicapped children.

Training of Teachers: —A major deterrent to the needed expansion of special education programs for our Nation's handicapped children has been the critical shortage of well-trained teachers and other related professional personnel. It is estimated that we have only one-fourth of the number of special education teachers that are currently needed.

During fiscal year 1968, 247 colleges and universities and 54 State or Territorial educational agencies were awarded grants in the training of teachers of the handicapped. About 12,000 students will receive support for either part-time or full-time study during the 1968-1969 school year.

Research and Demonstration in the Education of Handicapped Children:—P.L. 88-164 authorized a program of research and demonstration in the education of handicapped children. This program has grown from \$1 million in its first year of operation to \$11.1 million in fiscal year 1968. In addition to support of individual research projects, the program supports a national research and demonstration center at Columbia University in New York City and a network of 14 special education instructional material centers across the country.

See also P.L. 88-164, P.L. 90-31 and P.L. 90-170.

10. COMMUNITY HEALTH SERVICES EXTENSION AMENDMENTS OF 1965 (P.L. 89-109)

Public Law 89-109 was enacted into law on August 5, 1965.

The amendments extended four existing programs of the Public Health Service relating to health services: immunization, migratory worker health services, general health services, and special project grants for community health services.

MAJOR PROVISIONS

Immunization Programs: -P.L. 89-109 extended the provisions of the Vaccination Assistance Act of 1962 for three years, through fiscal year 1968, with no change in the authorized annual appropriations of \$11 million. The amendments also expanded the coverage of the program to include assistance in immunization programs against measles



and other diseases presenting a major public health problem. Eligible beneficiaries were changed from children "under the age of five years" to children "of preschool age."

During its three-year history, the Vaccination Assistance Act has contributed greatly to the reduction of the incidence of polio. At the time of the law's enactment, the Public Health Service estimated that only one-third of the children under five years of age had been immunized. Since its enactment in 1962, an estimated 58 million people have received three doses of oral polio vaccine and seven million children have been immunized against diphtheria, tetanus, and whooping cough. By September 1964, some two-thirds of all children under five years of age had been immunized against polio.

Since the enactment of the 1962 legislation, two measles vaccines have been developed. As other communicable diseases of childhood have increasingly come under control, there has been growing recognition of measles as a major health problem. An estimated four million cases occur each year, resulting in at least 500 deaths and in extensive complications and serious disabilities such as mental retardation, pneumonia, hearing disorders, and measles encephalitis (inflammation of the brain).

This law also authorized the Surgeon General to make grants for immunization programs against any infectious disease which can be practically eliminated through immunization with preventive agents which may become available in the future, and which he finds to represent a major public health problem. Under this authority, new immunization programs can be established without further legislative action by the Congress.

Migratory Workers Health Services:—The amendments extended for three years, through fiscal year 1968, the project grant program which provided community health services for domestic migratory agricultural workers and their families. A total of \$24 million was authorized for a three-year period. Under the Migrant Health Act of 1962, the Public Health Service has assisted 60 county or multi-county projects in 29 States and the Commonwealth of Puerto Rico. Project grants have paid part of the costs in 100 counties of such public health services as immunizations, pre- and post-natal clinics, dental services, and case finding and treatment for communicable diseases. The amendments also provided that the services that may be financed with Federal assistance include necessary hospital care.

General Health Services: -P.L. 89-109 extended for one year, through fiscal year 1967, the program of formula grants for general health services authorized by Section 314(c) of the Public Health Service Act. Funds authorized for general health grants were used largely for establishing and maintaining basic health services in State and local public health organizations, such as mental health services, radiological health services, dental health services, and services for the chronically ill and aged. Under this authority, grants also were made to schools of public health for the provision of public health training.

Project Grants for Community Health Services:—The Community Health Services and Facilities Act of 1961 added Section 316 to the Public Health Service Act, establishing a program of project grants to State or local public agencies or nonprofit private agencies to finance studies, experiments, and demonstrations for the development of improved methods of providing health services, particularly for the chronically ill or aged. This authority, which would have expired June 30, 1966, was extended for one year, with no change in the annual appropriation authorization of \$10 million.

See also P.L. 89-749 and P.L. 90-174.



11. THE HEART DISEASE, CANCER, AND STROKE AMENDMENTS OF 1965 (P.L. 89-239)

Public Law 89-239 was enacted on October 6, 1965.

Passage of the Heart Disease, Cancer, and Stroke Amendments of 1965 (P.L. 89-239) marked the launching of a major assault on the Nation's three major killing diseases.

The Amendments implemented the major recommendations of the 1964 Presidential Commission to study the problems and recommend means to achieve significant advances in the prevention, diagnosis, and treatment of three disease groups which exact such a staggering toll of human life and suffering.

The principal purpose of this program was to provide the medical profession and medical institutions of the Nation greater opportunity to make available to their patients the latest advances in the diagnosis and treatment of heart disease, cancer, stroke, and related diseases. This was to be accomplished through the establishment of regional programs of cooperation in research, training, continuing education, and demonstration activities in patient care among medical schools, clinical research institutions, and hospitals.

MAJOR PROVISIONS

To accomplish these goals, P.L. 89-239 authorized a three-year, \$340 million program of grants for the planning and establishment of regional medical programs. These grants provided support for cooperative arrangements which linked major medical center—usually consisting of a medical school and affiliated teaching hospitals—with clinical research centers, local community hospitals, and practicing physicians of the Nation. Grants have been made for planning and for feasibility studies, as well as for pilot projects to demonstrate the value of these cooperative regional arrangements and to provide a base of experience for further development of the program.

The legislation authorized appropriations of \$50 million for fiscal year 1966, \$90 million for fiscal year 1967, and \$200 million for fiscal year 1968, the funds for each fiscal year to remain available until the end of the following fiscal year. Grants could be made to pay all or part of the cost of the planning and other activities related to establishment of the regional medical programs. Funds for renovations and built-in equipment, however, could not exceed 90 percent of the cost.

A National Advisory Council on Regional Medical Programs was appointed to advise and assist the Surgeon General in the formulation of policy and regulations regarding the regional medical programs, and to make recommendations to him concerning approval of applications and amounts of grant awards.

To assist physicians and other interested persons, the Surgeon General was directed to establish and maintain a current list of facilities in the United States equipped and staffed to provide the most advanced methods and techniques in the diagnosis and treatment of heart disease, cancer, and stroke. The Surgeon General was also directed to maintain a record of the advanced specialty training available in these institutions, along with other information he deems necessary. In order to make this information as useful as possible, the legislation requires the Surgeon General to consult with interested national professional organizations.



The Surgeon General was also required to make a report to the President and the Congress by June 30, 1967. In addition to recounting the activities carried out as a result of this legislation, the report was to analyze the effectiveness of the activities in meeting the stated objective of the regional medical programs, as well as recommendations for extension and modification of this program.

12. CAPTIONED FILMS FOR THE DEAF ACT (P.L. 89-258)

Public Law 89-258 was enacted on October 19, 1965.

MAJOR PROVISIONS

P.L. 89-258 made possible a total approach to the communication problems of the deaf.

In addition to educational and training films, other educational media (including tapes, transparencies, programmed instruction, etc.) and all of the devices of modern instruction could be acquired and distributed. To use media more effectively, provision was made for the training of personnel and conduct of research.

Educational media were also made available to persons directly involved in assisting the deaf (parents, rehabilitation workers, placement officers, and actual or potential employers) as well as to the deaf themselves.

The amendments authorized an increase in appropriations from a level of \$1.5 million in fiscal year 1965 to \$3 million each for fiscal years 1966 and 1967, \$5 million each for fiscal years 1968 and 1969, and \$7 million annually thereafter.

The P.L. 89-258 amendments also provided for a National Advisory Committee on Education of the Deaf to advise the Secretary of Health, Education, and Welfare.

Basic Act of 1958 and Amendments of 1962:—The 1958 legislation (P.L. 85-905) permitted the U.S. Office of Education to purchase, lease, or accept films, caption and distribute them through State schools for the deaf or other appropriate agencies. The 1958 Act focused on the provision of recreational films. The 1962 Amendments (P.L. 87-815) included the production of captioned films, the training of persons in their use, and conducting research to improve the quality and effectiveness of production and broad utilization of the film medium.

See also P.L. 90-247 and P.L. 89-511.

13. FEDERAL ASSISTANCE TO STATE OPERATED AND SUPPORTED SCHOOLS FOR THE HANDICAPPED (P.L. 89-313)

Public Law 89-313 was enacted on November 1, 1965.

MAJOR PROVISIONS

Public Law 89-313 amended Title I of the Elementary and Secondary Education Act to provide grants to State agencies directly responsible for providing free public education for handicapped children.



Students in State operated and supported schools for the handicapped have benefitted from a wide variety of services funded by this Act.

Funds authorized under this Act for fiscal year 1966 totaled \$15.9 million, for fiscal year 1967, \$15.0 million, and for fiscal year 1968, \$24.7 million.

See also P.L. 89-10, P.L. 89-750 and P.L. 90-247.

14. VOCATIONAL REHABILITATION ACT AMENDMENTS OF 1965 (P.L. 89-333)

Public Law 89-333 was enacted on November 8, 1965.

MAJOR PROVISIONS

Expansion of Programs for Vocational Rehabilitation Services:—This amendment provided for a 5-year incentive grant program to States and other nonprofit groups to plan and initiate a further expansion of rehabilitation programs in States which seem to have a high potential for increasing the number of persons who could be rehabilitated and employed.

The provision for comprehensive State planning has made possible an inventory and review of existing vocational rehabilitation resources. This has included analysis of the extent to which available services for the handicapped may need to be supplemented or redirected to achieve the training and placement of greater numbers of severely disabled people each year.

Rehabilitation Facilities:—One of the basic requirements for effective service to the severely disabled is to have available modern rehabilitation facilities. Under the Hill-Burton Facilities Construction Program, a substantial beginning has been made in improving rehabilitation clinics and centers associated with hospitals.

A comparable effort is needed in connection with those facilities which are primarily of a vocational nature, along with workshops in which the disabled person's work potential can be evaluated and job training given.

This legislation authorized a 5-year program involving Federal assistance to plan, build, equip, and initially staff rehabilitation facilities and workshops.

Workshops for the handicapped can include such construction as may be necessary to provide residential accommodations for use in connection with the rehabilitation of these individuals.

Experimental Projects (Locally financed):—In many communities local public funds from a variety of sources such as the school systems, hospitals, and welfare departments can be made available to the States to help in the rehabilitation of handicapped local residents. Heretofore, these resources ordinarily have not been used for the vocational rehabilitation of their residents.

This amendment waived certain requirements for Statewide operations and permitted Federal matching of such funds in the same manner and at the same rate as other State funds are matched. Local rehabilitation resources have been expanded, improvements made in existing services, and the numbers of disabled people given services have increased.



Innovation Projects:—Under Sec. 3 of the 1954 Amendments, State rehabilitation agencies have developed numerous projects for the extension and improvement of rehabilitation services. These projects have contributed significantly to the development of specialized programs needed in the rehabilitation of the severely disabled and other hard-to-rehabilitate cases. This amendment extended up to 5 years the time, during which the favorable rate of Federal funds for these developmental projects could be paid. The Federal rate was increased to 90% of cost during the first 3 years and 75% of cost during the next two years. At the request of the State, such payments would be at a lower percentage.

Services to Determine Rehabilitation Potential of the Disabled:—This amendment permitted Federal funds to be used to help provide vocational rehabilitation services for a period of 6 months to certain handicapped persons whose vocational capabilities could not be predicted as favorable at the outset.

In the case of mentally retarded persons and other persons with disabilities especially designated by the Secretary, the period may be extended to 18 months. During this time a more adequate evaluation of their real capacity can be undertaken. Their eligibility for more and complete help toward employment can be determined.

Workshop Improvement Programs:—Under these amendments the Secretary was able to undertake several new activities in connection with workshops. These amendments were designed to help improve the Nation's workshops as resources for the vocational rehabilitation of greater numbers of disabled persons.

The Secretary was directed to establish a National Policy and Performance Council to advise him with respect to policies and programs designed to improve workshops.

Improvement grants have been made to workshops on a project basis to help pay part of the cost of analyzing, improving, or increasing professional services to clients or improving their business operations. Project grants have been made to certain workshops to enable them to pay the cost of training services, including allowances, for handicapped persons undergoing training. The programs for grants for workshop improvements and training allowances were each authorized for a 5-year period.

Research and Information:—This amendment extended the authority of the Secretary to undertake research, studies and demonstrations and to make reports upon such new knowledge. Existing authority to establish and operate a substantially augmented program of information service was supplemented.

See also P.L. 90-99.

15. LIBRARY SERVICES AND CONSTRUCTION ACT AMENDMENTS OF 1966 (P.L. 89-511)

Public Law 89-511 was enacted on July 19, 1966.

The handicapped have benefitted from the provisions of this Act which active to the effectiveness and efficiency of the nation's library system.

MAJOR PROVISIONS

Part A of Title IV authorized a program to assist the States in providing library services in State institutions for inmates, patients, and residents, as well as physically or



mentally handicapped students who are in residential schools for the handicapped operated or substantially supported by the State.

Federal funds may be used by the State library agency to plan and initiate programs to provide books, other library materials and library services for such students. An Advisory Council composed of representatives of eligible institutions assists the State library agency to develop its State plan under this title. The authorization was \$5 million for fiscal year 1967, \$7.5 million for fiscal year 1968, \$10 million for fiscal year 1969, \$12.5 million for fiscal year 1970, and \$15 million for fiscal year 1971.

Part B of Title IV made Federal funds available to State agencies for the establishment and improvement of library services for individuals who are certified by competent authority as unable to read or to use conventional printed materials as a result of physical limitations. Such services may be provided through public or nonprofit library agencies or organizations. An Advisory Council composed of representatives of eligible agencies, acts in an advisory capacity to the Stage agency.

16. MILITARY MEDICAL BENEFITS AMENDMENTS OF 1966 (P.L. 89-614)

Public Law 89-614 was enacted on September 30, 1966.

This law provided major updating of the Dependents' Medical Care Act which deals primarily with health care benefits for the dependents of active duty members of the uniformed services (the Army, Navy, Marine Corps, Air Force, Coast Guard and the commissioned corps of the Public Health Service and the Environmental Science Services Administration).

MAJOR PROVISIONS

Included in the expanded benefits authorized by this law was a financial assistance program for active duty members who have a spouse or child who is moderately or severely mentally retarded or who has a serious physical handicap.

Under this law, spouses or children with the type of conditions referred to above are eligible under a new government-sponsored program for: diagnosis; inpatient, outpatient and home treatment; training, rehabilitation and special education; institutional care in public and private nonprofit institutions and facilities and, when appropriate, transportation to and from such installations and facilities.

The law provides for a sliding scale of monthly deductibles payable by the active duty member, based upon his pay grade. Those in the lowest enlisted pay grade are required to pay the first \$25 each month of expenses incurred by their dependents. Four-star generals and admirals are similarly required to pay the first \$250. All other active duty members with participating dependents pay amounts in between these two amounts, as determined by the Secretary of Defense and the Secretary of Health, Education, and Welfare. The law provided that the government's share of the monthly costs can not exceed \$350 per month. Consequently, the active duty member in some cases has to pay an amount in addition to the deductible in order to meet the remaining difference between the government's share and the internal monthly charge.

The handicapped portions of the law stemme. : m recognition of the fact that payment for care, training and special education of mentally retarded and physically



handicapped dependents is frequently such a drain on the financial resources of the serviceman as to make it impossible for him to maintain an acceptable standard of living.

These portions of the law became effective January 1, 1967. The Army, as Executive Agent for the Department of Defense and the Department of Health, Education, and Welfare has operated the new program for all seven uniformed services.

17. MODEL SECONDARY SCHOOL FOR THE DEAF ACT (P.L. 89-694)

Public Law 89-694 was enacted on October 15, 1966.

MAJOR PROVISIONS

Public Law 89-694 authorized the Secretary of Health, Education, and Welfare, after consultation with the National Advisory Committee on Education of the Deaf, to enter into an agreement with Gallaudet College to establish (including construction and equipment) a model secondary school for the deaf, to serve primarily residents of the District of Columbia and nearby States.

This high school, while serving primarily the needs of the National Capital Area and nearby States, will also provide a model for the development of similar programs across the country. In addition, the formulation of new educational methods and educational technology and specific curriculum offerings will contribute to the Nation's total educational program for the deaf.

It is expected that the concept of this model school will grow to the extent that every deaf high school age student will eventually have the opportunity for an education equal to that of his hearing peers and commensurate with his abilities and desires.

18. COMPREHENSIVE HEALTH PLANNING AND PUBLIC HEALTH SERVICES AMENDMENTS OF 1966 (P.L. 89-749)

Public Law 89-749 was enacted on November 3, 196

Significant and extensive Federal legislation enacted in the last three years has enabled the States to assume sizeable new function, and responsibilities in the field of health services. However, the development of coordination mechanisms has not kept pace with the growth and diversity of the Federally-aided health programs. The provisions of P.L. 89-749 have contributed significantly to meeting this need.

MAJOR PROVISIONS

This legislation authorized a total of \$24 million for a two-year program of grants for comprehensive health planning. These funds have been used to develop the intelligence and the administrative techniques necessary for such planning. The Act also authorized \$62.5 million for a one-year program of formula grants to States for comprehensive public health services; a redirected, flexible support to more clearly focus health program activities on bringing services to people. Health services for the mentally



retarded are among those which have been supported with these funds. An additional sum of \$62.5 million was provided for a one-year program of health service developmental grants. These funds have been used to continue existing project grants, as well as to stimulate and initially support innovative health service programs, which include programs for the mentally retarded and other handicapped persons. The sum of \$5 million was authorized for fiscal year 1968 for continuation of grants to schools of public health for comprehensive professional training and technical assistance in the field of public health. Temporary interchange of Federal and State personnel engaged in health-related work was authorized in this Act.

The law establishes a statutory framework for the revitalization and expansion of Federal-State-local cooperative efforts to make maximum use of national health resources, and strengthens State and local capacity and initiative by modifying existing patterns of Federal financial assistance to States. This revision of the Federal health grant structure made Federal grant funds available to States, and through them to local communities on a flexible basis, thus enabling these groups to focus on the needs of individuals and on families in their area. Communities have been better able to provide services for maintenance of good health as well as for rehabilitation following disease. Through the support of training and the interchange of Federal and State health personnel, competency and strength necessary for planning and administration of comprehensive health services can be improved.

See also P.L. 89-109 and P.L. 90-174.

19. ELEMENTARY AND SECONDARY EDUCATION ACT AMENDMENTS OF 1966 (P.L. 89-750)

Public Law 89-750 was enacted on November 3, 1966.

P.L. 89-750 amended Title VI, Elementary and Secondary Education Act, to provide authorizations of \$51.5 million for fiscal year 1967, and \$154.3 million for fiscal year 1968 for the purpose of assisting the States in the initiation, expansion and improvement of programs and projects for the education of handicapped children. This includes children at the preschool, elementary and secondary school levels. A State's proportion of these funds was based on the number of children in the State aged 3 to 21 inclusive as it bears on the number of such children in all States. A special provision was made for Puerto Rico, Guam, American Samoa, the Virgin Islands, the Trust Territories of the Pacific Islands.

MAJOR PROVISIONS

A State, to participate, must submit to the Commissioner of Education a State plan which provides satisfactory assurance that funds paid to the State under this Title will be expended either directly or through local education agencies solely to initiate, expand, or improve programs and projects (including preschool programs and projects) which are designed to meet the special educational and related needs of handicapped children throughout the State. The programs and projects have to be of sufficient size and scope and quality as to give reasonable promise of substantial progress toward meeting these needs. They can include the acquisition of equipment and when necessary the



construction of school facilities. The plan also must provide satisfactory assurance that to the extent consistent with the number and location of handicapped children in the State who are enrolled in private, elementary and secondary schools, provision will be made for participation of such children in programs assisted or carried out under this Title.

Public Law 89-750 required the Commissioner of Education to establish in the Office of Education a National Advisory Committee on Handicapped Children which is to make recommendations to him concerning programs carried on for handicapped children by the Office of Education. P.L. 89-750 also required the Commissioner to establish and maintain within the Office of Education a bureau for the education and training of handicapped children which is to be the principal agency in the Office of Education for administering and carrying out programs and projects relating to the education and training of the handicapped, including programs and projects for the training of teachers of the handicapped and for research in special education and training.

See also P.L. 89-10 and P.L. 90-247.

20. HIGHER EDUCATION ACT AMENDMENTS OF 1966 (P.L. 89-752)

Public Law 89-752 was enacted on November 3, 1966.

MAJOR PROVISIONS

Student Financial Assistance:—Title IV of the Higher Education Act has helped to provide students attending colleges and universities with a program of student financial assistance opportunities. Educational opportunity grants, combined with low-interest insured loans and college work-study programs, have had a major impact in alleviating the financial burden of attending college.

The 1966 law amended the National Defense Education Act by providing for cancellation of loans made to students under this Act. Such loans made to students who later teach handicapped children could be cancelled at the rate of 15% of the loan for each year spent teaching the handicapped.

Teacher Programs:—Title V of the Higher Education Act of 1965 provided a variety of teacher training and preparation programs. For fiscal year 1966, \$9.5 million was appropriated for the National Teacher Corps. The Teacher Corps program aims at producing more teachers specially trained to work in the slums by setting up a two-year program which prepares interns with bachelor's degrees to be teachers with master's degrees with special academic and practical training in the character of poverty. Second, by involving colleges and universities throughout the country, it expects to perpetuate interest in special training for slum teachers long after the Teacher Corps itself is ended.

21. MENTAL HEALTH AMENDMENTS OF 1967 (P.L. 90-31)

Public Law 90-31 was enacted on June 24, 1967.

This legislation extended the authority for grants for construction and initial staffing of community mental health centers through fiscal year 1970. It also extended the program to include funds for acquisition or renovation of existing buildings for use as mental retardation facilities and community mental health centers.



MAJOR PROVISIONS

The legislation further provided that Public Health Service grants for research, training or demonstration projects be available to Public Health Service hospitals, Veterans' Administration, Bureau of Prisons and Saint Elizabeth's Hospital, on the same terms as non-Federal institutions. Funds authorized for Center Construction for fiscal years 1968-70 totaled \$180 million. The Acr authorized \$142 million for staffing for the 1968-70 fiscal years.

See also: P.L. 88-164, P.L. 89-105 and P.L. 90-170.

22. VOCATIONAL REHABILITATION ACT AMENDMENTS OF 1967 (P.L. 90-99)

Public Law 90-99 was enacted on October 3, 1967.

The 1967 Amendments to the Vocational Rehabilitation Act reflect a departure into several areas previously uncharted.

MAJOR PROVISIONS

Deaf-Blind Youth and Adults:—The 1967 Amendments, authorized funds for the establishment of a National Center for Deaf-Blind Youth and Adults. The Secretary of Health, Education, and Welfare was authorized (by grant or contract with a non-profit organization) to enter into arrangements to pay all or part of the cost of construction, equipment, staff, and other expenses for such a center. The deaf-blind will receive an intensive program of specialized services to prepare them for adult responsibilities, including employment wherever this is possible.

The National Center also will conduct extensive programs of research, professional training, family orientation and education, and an organized informational service for the public and interested groups and agencies. Later, with experience gained in this center, other centers may be developed at various locations in the country.

Handicapped Migratory Workers: - The plight of the Nation's migratory agricultural workers and their families has been well publicized in recent years.

To begin dealing with this situation, the 1967 changes in the rehabilitation law authorized a special system of project grants to the State rehabilitation agencies, to pay from Federal funds up to 90 percent of the cost of providing vocational rehabilitation services to handicapped migratory agricultural workers. Services also can be provided to family members, where necessary to the rehabilitation of the migratory worker. The Secretary of Labor was directed to establish the rules determining who are migratory workers for this purpose. The law also calls for coordination of this new program with other Federally-aided programs for migratory agricultural workers.

Continued Growth of the Federal-State Program:—The 1967 Amendments continued funds for the Federal-State program for another 2 years, through June 30, 1970. The amounts of Federal funds to be alloited among the States also were increased each year. From the level of \$400 million which the Act authorized for the fiscal year 1968, the 1967 law increased the amounts for allotment to \$500 million in 1969 and \$600 million in 1970.



State Planning for Rehabilitation:—In nearly all States, extensive planning is under way by groups appointed by the Governors to measure the needs of the disabled, the resources available (rehabilitation centers, hospitals, workshops, voluntary programs, etc.) and what needs to be done to meet the needs of all the disabled who need special help.

The 1967 Amendments authorized a final year of Federal support of this Statewide planning in rehabilitation.

Residence Requirements:—Most States have traditionally required that an individual furnish proof of his status as a resident of the State before services will be furnished. In some States, this is a flat requirement; in others the requirement is modified in certain ways under certain conditions.

Long experience in rehabilitation work for the disabled has shown that this frequently is a serious burden, and often a complete barrier, in trying to reach and restore handicapped people, and that it usually works to the greatest disadvantage among the poorest of the disabled people.

The 1967 Amendments to the Vocational Rehabilitation Act required that all States agree that no residence requirement will be imposed which excludes from vocational rehabilitation services otherwise-eligible handicapped persons who are present in the State. This assurance must be incorporated into the State plan, which is subject to approval by the Secretary of Health, Education, and Welfare before Federal funds can be made available to a State. This change must be in effect in all States not later than July 1, 1969. States may introduce the change earlier if they wish.

See also P.L. 89-333.

23. MENTAL RETARDATION AMENDMENTS OF 1967 (P.L. 90-170)

Public Law 90-170 was enacted on December 4, 1967.

In October 1963, Congress passed the Mental Retardation Facilities and Community Mental Health Centers Construction Act (P.L. 88-164) to provide assistance in combating mental retardation through grants for construction of facilities which would render new and expanded services for the mentally retarded and grants to initiate new training and research programs in special education.

The Mental Retardation Amendments of 1967: (1) extended through June 30, 1970, the programs under which matching grants are made for the construction of university-affiliated mental retardation facilities and community mental retardation facilities; (2) established a new grant program to pay a portion of the costs for compensation of professional and technical personnel in community facilities for the mentally retarded for initial operation of new facilities, or of new services in a facility; (3) extended until June 30, 1970, the existing program of training in the education of handicapped children; and (4) established a new program for training and research in physical education and recreation for the mentally retarded and other handicapped children.

MAJOR PROVISIONS

University-Affiliated Mental Retardation Facilities:—Public Law 90-170 provided for the extension of the university-affiliated construction program for three additional years, or until June 30, 1970, with authorization for appropriations of \$10 million for the fiscal



year 1968 and \$20 million each for the fiscal years 1969 and 1970. These funds may be used to pay up to three-fourths of the costs of construction of facilities providing a full range of inpatient and outpatient services for the mentally retarded which will provide the physical setting for demonstration of specialized services and for training efforts needed to alleviate the acute shortages of professional and technical personnel required to care for the mentally retarded.

The initial law was further amended by P.L. 90-170 to provide for: (1) the inclusion of persons with other neurological handicapping conditions that are related to mental retardation; (2) the inclusion of research incidental or related to the program of the facility; and (3) the use of up to 2% of funds appropriated to support university-a. filiated facility program planning grants, not to exceed \$25,000 each nor more than 75% of the planning costs.

Community Facilities for the Mentally Retarded:—The law extended the authority for construction of community facilities for the mentally retarded for an additional two years—through fiscal year 1970 and retained the present authorization of \$30 million for fiscal years 1968 and 1969. For the fiscal year 1970 there is an authorization of \$50 million.

The law authorized States to use up to 2 percent or \$50,000 of the funds appropriated for the construction of community mental retardation facilities to cover a portion of the cost of administering the program at the State level. The payment of funds for this purpose could not be approved if the States spend less than their 1967 level of funds for administration.

The law required that effective July 1, 1969, State plans for community mental retardation facilities provide enforcement of minimum standards of operation of these facilities.

Staffing of Community Mental Retardation Facilities:—In order to assure the continuum of services necessary to make real progress in the treatment and rehabilitation of the retarded, adequate staff must be available to the community facilities. Total sources of funds to support the operation of community mental retardation facilities are over-burdened. Potential sponsors of community facilities are frequently unable to provide the necessary operational support.

Since a major portion of operating expenses of community facilities is for staffing, the provisions of the 1967 law which permit grants for the cost of professional and technical personnel will provide significant assistance toward meeting total operating costs, and the means for attracting qualified personnel in mental retardation. Grants were authorized to meet a portion of the costs of professional and technical personnel for initial operation of new facilities or for new services in existing facilities for the mentally retarded.

This grant program provided for a declining Federal participation over a period of 4 years and 3 months with 75 percent Federal share for the first 15 months, 60 percent for the next year, 45 percent for the next year, and 30 percent for the last year.

Staffing grants can be made for the initial operation of new facilities and new services in existing facilities. Federal funds will be used to supplement and increase, to the extent practicable, the level of State, local and other non-Federal funds for mental retardation purposes.



An appropriation of \$7 million was authorized for the fiscal year 1968, \$10 million for fiscal year 1969 and \$14 million for the fiscal year ending June 30, 1970.

Education of Handicapped Children:—The law extended through fiscal year 1970 the authorization for the existing program of training teachers of handicapped children; \$55 million was authorized for fiscal year 1970 to carry out the program.

Physical Education and Recreation Personnel for Mentally Retarded and Other Handicapped Children:—

Preparation of Professional Personnel-

The vital role of exercise, sports and games in the growth and development of all children is well recognized. Research has shown that the children who need these activities most are the ones who get the least—the physically, emotionally and mentally handicapped. They need group play for social growth, skill achievement to build a positive self-image, and vigorous fitness activities to improve strength and endurance, areas in which they lag 2 to 6 years behind normal children. Also there is increasing evidence that motor activities can influence intellectual performance, particularly of the mentally retarded.

Most educators feel that the handicapped need specially adapted programs of physical education and recreation conducted by specially trained people.

Public Law 90-170 added a new Title V, which authorized the Secretary to make grants to public and nonprofit institutions of higher learning to assist them in providing professional or advanced training for personnel engaged or perparing to engage in employment as physical educators or recreation personnel for mentally retarded and other handicapped children. Also included are supervisors of such personnel who are engaged or preparing to engage in research or teaching in fields related to the physical education or recreation of such children.

Funds authorized for training personnel under Title V for the fiscal year 1968 total \$1 million, \$2 million was authorized for fiscal year 1969, and \$3 million for fiscal year 1970.

Research and Demonstration Projects-

Title V authorized \$1 million for fiscal year 1968 and \$1.5 million for fiscal year 1969 and 1970 to enable the Secretary to make grants to State or local educational agencies, public and nonprofit private educational or research agencies and organizations for research or demonstration projects relating to physical education or recreation for mentally retarded and other handicapped children.

The Secretary was also authorized to appoint panels of experts and an advisory committee consisting of seven members to assist in the administration of Title V.

See also P.L. 88-164, P.L. 89-105 and P.L. 90-31.

24. THE PARTNERSHIP FOR HEALTH AMENDMENTS OF 1967 (P.L. 90-174)

Public Law 90-174 was enacted on December 5, 1967.

MAJOR PROVISIONS

Comprehensive Health Planning and Services:—Federal-State cooperation in health is nearly as old as the Nation. But formal, continuing Federal assistance for the



development of State public health programs is much more recent; the Social Security Act of 1935 provided the first general support for State public health programs. This program was followed by others directed toward specific diseases—tuberculosis, cancer, heart disease—and earmarked for use only in State programs dealing with these problems.

The "Partnership for Health Act of 1966" removed almost all of the categorical limitations, giving the States much more flexibility in the use of Federal health grant funds. Project grants, which support targeted attacks on new or special health problems and stimulate development of new health services, were made available for the whole range of health activity.

The 1966 Act also recognized the necessity for the most effective marshalling of all health resources, public and private. It encouraged State comprehensive health planning as a means of determining needs and establishing priorities. Grants were also made available for area-wide planning projects.

The 1967 Amendments retained all of the innovative provisions of the "Partnership for Health Act," and extended them for two years, through June 30, 1970, and authorized larger expenditures. In addition, new and expanded authorities were provided for health services research and development and for improvement of clinical laboratories.

Research in Health Services:—Many efforts have been made in recent years to assure all Americans access to health services. Under the 1967 law, these efforts will be supplemented by an intensive research program to find better ways of organizing, financing and delivering health services.

Finding ways to contain medical costs, to bring all Americans into the mainstream of medical care, to increase the productivity of health personnel and facilities, are some of the purposes of research and development in health services.

To enlist the Nation's best minds and most vigorous institutions in a research and development program that encompasses every element of the health services system, a National Center for Health Services Research will be established within the Department of Health, Education, and Welfare. The Center will administer the program and disseminate carefully evaluated results to health service agencies and practitioners. It will also provide a Government-wide focal point for research in this vital area.

See also P.L. 89-109 and P.L. 89-749.

25. ELEMENTARY AND SECONDARY EDUCATION AMENDMENTS OF 1967 (P.L. 90-247)

Public Law 90-247 was enacted on January 21, 1968.

MAJOR PROVISIONS

Regional Resource Centers:—Regional Resource Centers will assist teachers and other school personnel by providing educational evaluation and assistance in developing specific educational strategies. In addition to providing direct services to the children, parents and teachers involved—the Centers will function to disseminate modern educational approaches. Schools that do not have special programs for the handicapped (about one-half the nation's school districts) will now receive assistance to develop special



education programs. Appropriations authorized for this program amount to \$7.5 million for fiscal year 1968. For fiscal year 1969, \$7.75 million is authorized and for fiscal year 1970, \$10 million is authorized.

Centers and Services for Deaf-Blind Children: – This program provides a major breakthrough in response to the needs of thousands of children affected by the rubella epidemic of several years ago, which resulted in approximately 20,000 to 30,000 babies being born with one or more handicapping conditions. It provides for the establishment and operation of Centers for deaf-blind children. The Centers will provide comprehensive diagnostic and evaluation services; programs for education, orientation and adjustment; and consultative services for parents, teachers and others working with the deaf-blind. In addition, the Secretary may make grants and contracts for training teachers and related specialists, for research and demonstration programs, and for dissemination activities. The Act authorized an appropriation of \$1 million for fiscal year 1968, \$3 million for fiscal year 1969, and \$1 million for fiscal year 1970.

Recruitment of Personnel and Information on Education of the Handicapped:— Under this program grants or contracts may be authorized to improve recruiting of educational personnel, and to improve dissemination of information concerning educational opportunities for the handicapped. Grants or contracts may be made to public or nonprofit agencies, organizations, or institutions. This program is intended to encourage students and professional personnel to work in various fields of education of handicapped children through developing and distributing imaginative or innovative materials, to assist in recruiting personnel for such careers, or publicizing existing forms of financial aid which might enable students to pursue such careers.

The information program is intended to disseminate information about programs, services and resources for the education of handicapped children, referral services for teachers, parents and others interested in the handicapped. Authorized appropriations for this program were \$1 million for fiscal year ending June 30, 1968, and \$1 million for each of the two succeeding fiscal years.

Expansion of Instructional Media Programs to Include all Handicapped Children:— This program expanded the existing program of the Bureau of Education for the Handicapped to provide, in addition to a loan service of captioned film for the deaf, the producing and distributing of educational media for the use of all types of handicapped persons, their parents, actual or potential employers, and other persons directly involved in work for the advancement of the handicapped, the carrying on of research in the use of educational media for the handicapped and the training of persons in the use of educational media for the instruction of the handicapped. Under this program, the handicapped were defined as deaf, mentally retarded, speech impaired, visually handicapped, seriously emotionally disturbed, crippled, or other health impaired persons.

Funds authorized for this program were increased from \$5 million to \$8 million for fiscal year 1968 and 1969, and for fiscal year 1970 the increase was from \$7 million to \$10 million.

Earmarking Title III of ESEA:—A major source of new support for innovation and for implementation of the newest in educational methodology related to education of the handicapped was made available by specifying that 15 percent of the funds of Title III of



the Elementary and Secondary Education Act be used for these purposes. This provision, which becomes effective in 1969, is expected to provide approximately \$30 million for that year on projects which will help bridge the gap between research findings and everyday classroom activities.

A change in the basic formula of Title III, effective in fiscal year 1969, will assign 75% of the appropriations for Title III to the States under a State plan formula. Twenty-five percent will be reserved for projects approved by the Commissioner of Education. The funds reserved for the Commissioner will be available in fiscal year 1969, for the support of new awards. In fiscal year 1970, funds reserved for the Commissioner will be used only to support the continuation costs of previously awarded projects. The intent of the new formula is to transfer control of approval for all projects to the States. The 15% of the funds "earmarked" for the handicapped will follow this overall pattern.

Title I Funds for Children in Institutions for the Handicapped:—The formula for support of educational activities for children in State-operated or supported institutions for the handicapped was amended to provide increased support for this program (commonly called the P.L. 89-313 program for the handicapped). Under this law, State agencies receive a maximum grant for the children they are educating through State-operated or supported schools. In fiscal year 1968, this amendment will provide approximately \$9 million in additional funds for new personnel, instructional materials, and other programs which reach into the State schools to aid the retarded, emotionally disturbed, deaf, etc., and bring education and hope to the children in these schools.

Schools for Indian Children Operated by the Department of the Interior and Defense Department Overseas Dependent's Schools in Title VI:—The Act authorized assistance for handicapped children in schools operated by the Department of Defense and Children on Indian reservations, serviced by schools operated by the Department of Interior.

Research in Education of the Handicapped:—The program for research and related purposes in education of the handicapped was extended and expanded to include authority to conduct research surveys and demonstrations and to award contracts for research, in addition to the grants which previously have been awarded. The intramural research program will be developed to support and complement the broader extramural program. The program will be designed to: assure optimum utilization of funds; study methods of improving the administration; fill the gaps in the extramural program; conduct or arrange for specific research activities and surveys which are national in scope; replicate promising activities; provide for integration of the extramural program; and allow staff members to maintain their research skills and pursue individual research interests.

The Act authorized the Commissioner of Education to contract, as well as provide grants to, private educational or research agencies and organizations. This change will allow the research program to take advantage of the expertise of private, as well as public, educational and research agencies and organizations. Also authorized was the training of research personnel. This program was extended through the fiscal year 1970, with \$18 million authorized to be appropriated for that year.



Authorizations for Grants to States and Minimum Allotment to States:—The act amended the provisions of Title VI authorizing grants to States for education of handicapped children by providing that no State receive less than \$100,000 or 3/10 of 1% of the appropriation, whichever is greater. This provision assures that each State will get a grant large enough to insure that programs will be of sufficient magnitude to be effective. The basic authorization for the grant to State programs was extended to \$162.5 million for fiscal year 1969 and \$200 million for fiscal year 1970.

See also P.L. 89-10, P.L. 89-750 and P.L. 89-313.

26. SOCIAL SECURITY AMENDMENTS OF 1967 (P.L. 90-248)

Public Law 90-248 was enacted on January 2, 1968.

MAJOR PROVISIONS

Advisory Council on Health Insurance for Disabled Beneficiaries to be Established:—The existing law made health insurance protection under social security (medicare) available to persons aged 65 and over. Under the 1967 amendments, the Secretary of Health, Education, and Welfare was directed to establish an advisory council to study the question of providing health insurance for disabled beneficiaries and report its findings and recommendations to the Secretary by January 1, 1969.

Child Welfare Services

Over one-half million children benefit each year from the services of professional child welfare workers with public agencies. Whenever possible, these workers enable children to stay in their own homes. They do this by counseling families on their problems, arranging for visiting homemakers, training mothers in homemaking and child-rearing, providing day care for children whose mothers must work, and in other ways.

When home care is impossible, child welfare workers arrange for foster or adoptive homes. They arrange special care for physically and mentally handicapped children, and help youngsters who have been discharged from institutions.

The 1967 Amendments authorized an increased appropriation for child welfare services. Additional Federal aid will enable States and com unities to provide more help to more children, particularly children in need of foster care.

Projects for Experimental and Special Types of Child Welfare Services:—State and local agencies need to strengthen their ongoing programs by trying different methods of providing services and testing them.

The 1967 legislation amended the child welfare research and demonstration authority of the Social Security Act to: make possible dissemination of research and demonstration findings into program activity through multiple demonstrations on a regional basis; encourage State and local agencies administering public child welfare services programs to develop and staff new and innovative services; and provide contract authority to make it possible to direct research into neglected and vital areas.



Improvement of Child Health

Early Casefinding and Treatment of Handicapping Conditions in Children

The number of children served under the crippled children's program has more than doubled since 1950.

Less than half the children served have orthopedic handicaps; the rest include mental retardation, epilepsy, hearing impairment, cerebral palsy, cystic fibrosis, heart disease and many congenital defects.

The 1967 Act authorized grants to State crippled children's agencies to assist them to extend and improve services for locating crippled children and for providing medical, surgical, corrective and other services for children who are crippled or who have conditions which may lead to crippling. State crippled children's agencies use their funds to locate handicapped children, to provide diagnostic services, and then to see that each child gets the medical care, hospitalization, and continuing care by a variety of professional people that he needs.

The 1965 Amendments to the Social Security Act required the States to make their services available to children in all parts of the State by 1975. In addition, the costs of the program were greatly increased beginning July 1, 1967, when hospital services must be paid for in accordance with reasonable cost.

The 1967 Amendments consolidated the existing separate authorizations into a single authorization and allocated 50 percent of the total authorization for formula grants, 40 percent for project grants and 10 percent for research and training. The consolidated authorization is \$250,000,000 for 1969, increasing to \$350,000,000 for 1973, and for each fiscal year thereafter.

One purpose of the 1967 legislation was to intensify the States' efforts to reach crippled children early and to give them the help they need.

The 1967 Amendments required the States to include in their plans a description of ways to increase casefinding so that diagnostic services and appropriate care and treatment can be given. Intensified casefinding procedures can be carried out through schools, day care centers, well-baby clinics, nursery schools, Head Start centers, etc. Birth certificates can be checked for reports on congenital malformations.

The legislation amended Title XIX, Medical Assistance, to require screening and treatment of children and arrangements for use and payment where appropriate of agencies administering maternal and child health services, services for crippled children, maternity and infant care projects or projects providing health services for children and youth.

Maternal and Child Health Services:—The 1965 Amendments to the Social Security Act required that States make maternal and child health services available to children in all parts of the State by 1975. This will mean extension of the program into cities, and into additional rural counties, many of which have only rudimentary programs. These Amendments also required payment of reasonable cost for hospital services, effective July 1, 1967. Both of these requirements add substantially to costs of the program.

States use Federal funds, together with State and local funds, to pay the costs of conducting prenatal clinics where mothers are examined by physicians and get medical advice; for visits by public health nurses to homes before and after babies are born; for well-baby clinics where mothers can bring their babies and young children for



examination and immunizations, where they can get competent advice on how to prevent illness and where their many questions about the care of babies can be answered.

These services have been instrumental in the reduction of maternal and infant mortality, especially in rural areas. Funds are used to make available physicians, dentists, and nurses to the schools for health examinations of school children. They are also used for immunizations.

The 1967 Amendments to the Social Security Act should help the States move toward the goal of extending maternal and child health services so that they will be reasonably available to children in all parts of a State by July 1, 1975. This would include the provision of preventive health services for more mothers and children. The greater availability of services should contribute to further reduction of infant and maternal mortality.

The 1967 Amendments, which consolidated the maternal and child health program and crippled children's services into one program, also increased the authorization for appropriations. The legislation also includes safeguards against reduction in the amounts of State and local funds provided for maternal and child health and crippled children's programs.

Special Projects for Maternity and Infant Care:—These projects are offering high quality care to high risk maternity patients and medical and intensive nursing care for prematurely born and other high risk infants. They have brought maternity clinics into the neighborhoods where the patients live and made available a broad spectrum of diagnostic and specialists consultation services.

Research in Maternal and Child Health and Crippled Children's Services:—Present and anticipated manpower requirements for medical personnel in obstetrics and pediatrics are such that comprehensive child health care on a wide scale will not be feasible unless ways are found to extend the services of such personnel.

The 1963 Amendments to the Social Security Act established a research grants program in Title V to support studies "which show promise of substantial contribution to the advancement..." of maternal and child health services or crippled children's services and authorized an annual appropriation up to \$8,000,000. The appropriation for fiscal year 1968 was \$5,900,000.

This legislation broadened the language to give emphasis to projects concerned with the need for feasibility, cost and effectiveness of health care programs making use of personnel with varying levels of training and to training of health personnel for work in comprehensive health care programs.



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Amendments to the Disability Program

Benefits for disabled widows and widowers:—The 1967 Amendments provided for benefits to disabled widows (including surviving divorced wives) and disabled dependent widowers after attainment of age 50.

Insured Status for workers disabled while young:—The 1967 law extended to all workers disabled before age 31—regardless of the nature of their disability—the alternative insured-status requirement provided under the existing law for workers disabled by blindness before age 31.

Extension of retroactivity of disability application:—The 1967 law provided a longer period of time after termination of disability for the filing of a disability freeze application by an individual whose mental or physical incapacity was the reason for his failure to file a timely application.

See also P.L. 88-641, P.L. 88-650 and P.L. 89-97.



APPENDIX

THE REPORT OF THE PROPERTY OF

HISTORY OF BILLS ENACTED INTO PUBLIC LAW (88th Congress. 1st Session to 90th Congress, 1st Session)

Law	No.	88-156	88-164	88-443	88-641	88-650
Public Law	Date Apprvd.	Oct 24	Oct 31	Aug 18	Oct 13	Oct 13
Date of Passage	House	Oct 12	May 27	Aug 1	Aug 31	Aug 31
Date	Senate	Aug 27	Sep 10	May 25	May 27	Apr 30
Con- onal d of age	Senate	S18666	S16653	S1770S	S21076	S21074
Page of Congressional Record of passage	House	Н16013	H:80	H11788	н12041	н9693
t No.	Senate	551	694	1274	1517	1516
Report No.	House	637	694	1340	1301	1279
ported	Senate	Oct 1	May 21	Jul 31	Aug 21	Aug 21
Date Reported	House	Aug 5	Aug 21	Apr 23	Mar 26	Mar 24
ittees •	Senate	Fin	LPW	LPW	nie.	Fin
Committees - Hearings	House	WM	IFC	IFC	WM	WW
Date Intro-		Jul 15 1963	May 21 1963	Feb 20	Mar 17 1964	Dec 9 1963
Bill No. 1		HR 7544 Jul 15	S 1576 May 21 1963	HR 10041 Feb 20	HR 10473 Mar 17	нк 9393
Title		88th Cong., 1st Sess. Social Security Act Amendments of 1963	Mental Retardation Facilities & Commu- nity Mental Health Centers Construction	88th Cong., 2nd Sess. Hospital & Medical Facilities Amend-	Social Security Amendments of 1964	Social Security Amendments of 1964

HISTORY OF BILLS ENACTED INTO PUBLIC LAW (88th Congress, 1st Session to 90th Congress, 1st Session) – Continued

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	Law	No.	89-10	98-36	89-97	89-105	89-109
	Public Law	Date Apprvd.	Apr 11	Jun 8	Jul 30	Aug 4	Aug 5
	age	House	Apr 9	May 26	Jul 9	Jun 28	Mar 11
	Date of Passage	Senate	Mar 26	May 17	Apr 8	May 4	May 3
	sge of Congressional Record of passage	Senate	87718	S11771	S16157	S14949	S4845
	Page of Congressional Record of passage	House	Н6152	H10608	H7444	Н9398	Н9141
	r No.	Senate	146	245	404	366	117
	Report No.	House	143	307	213	278	249
	ported	Senate	Apr 6	May 25	Jun 30	Jun 24	Mar 20
	Date Reported	House	Mar 8	May 6	Mar 29	Apr 15	Apr 15
	Committees- Hearings	Senate	LPW	LPW	Fin	LPW	LPW
	Comn	House	Ed L	Ed L	WW	IFC	IFC
	Date Intro-	qnceq	Jan 12 1965	Apr 1 1965	Mar 24 1965	Jun 18 1965	Jan 15 1965
	Bill No.		нк 2362	HR 7031 Apr 1 1965	HR 6675	HR 2985	S, 510 HR 2986
	Title		89t 1 Cong., 1st Sess. Flerientary & Second-HR 2362 Jan 12 Education Act of 1965	the	Social Security Amendments of 1965	Mental Retardation Facilities & Commu- nity Mental Health Centers Construction Act of 1965	Health nsion s of 1965

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Heart Disease, Cancer and Stroke Amendments of 1965	S. 596 HR 2986	Jan 15 1965	IFC	LPW	Sep 8	Jun 21	963	368	H25049	S14948	Sep 24	Jun 28	Oct 6	89-239
Captioned Films for the Deaf Act	S. 2232	Jun 36 1965	Ed L	LPW	Sep 20	Aug 26	1034	649	H25953	S22279	Oct 5	Aug 31	Oct 19	89-258
Federal Assistance to State Operated & Supported Schools for the Handicapped	HR 9022	Jun 14 1965	Ed L	ГРЖ	Jul 1	Sep 28	587	783	н22093	\$25856	Aug 30	Oct 1	Nov 1	89-313
Vocational Rehabilitation Act Amend- ments of 1966	IIR 8310	May 20 1965	Ed L	LPW	May 28	Sep 30	432	908	H18718	S25838	Jul 29	0ct 1	Nov 8	89-333
89th Cong., 2nd Sess.										•				
Library Services & Construction Act	HR 14050 Mar 29	Mar 29 1966	Ed L	LPW	May 4	Jun 21	1474	1291	H12042	\$13899	Jun 2	Jun 22	Jul 19	89-511
Military Medical Benefits Amendments of 1966	HR 14088 Mar 29	Mar 29 1966	AS	AS	Mar 31	Aug S	1407	1434	H10297	S19027	May 11	Aug 11	Sep 30	89-614
Model Secondary School for the Deaf Act	HR 17190 Aug 23 S. 3758 1966	Aug 23 1966	T P3	LPW	Oct 10	Oct 12	2214	1713	H26097	S26542	Oct 11	Oct 13	Oct 15	89-694
Comprehensive Health Planning & Public Health Services Amendments of 1966, "Partnership for Health."	S. 3008 HR 18231	Mar 2 1966	IFC	LPW	Oct 13	Sep 29	2271	1665	H27088	S24768	Oct 17	Oct 3	Nov 3	89-749
Elementary & Secondary Education Act Amendments of 1966	HR 13161 Mar 1 S. 3046 1966	Mar 1 1966	Ed L	LPW	Aug 5	Oct 3	1814	1674	H25589	\$25836	Oct 6	Oct 7	Nov 3	89-750

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HISTORY OF BILLS ENACTED INTO PUBLIC LAW (88th Congress, 1st Session to 90th Congress, 1st Session) – Continued

Title	Bill No.	Date Intro- duced	Committees Hearings	ittees- ıgs	Date R	Date Reported	Repo	Report No.	Page c gressi Reco pas	Page of Congressional Record of passage	Dat Pas	Date of Passage	Publi	Public Law
			House	Senate	House	Senate	House	Senate	House	Senate	Senate	House	Date Apprvd.	So.
Higher Education Act Amendments of 1966	HR 14644 Apr 26	Apr 26 1966	Ed L	LPW	Apr 29	Oct 5	1467	1677	Н9450	S25916	May 2	Oct 10	Nov 3	89-752
90th Cong., 1st Sess. Mental Health Amendments of 1967	HR 6431	Mar 1 1967	IFC	ТЬМ	Apr 25	Jun 7	212	294	Н5670	S57874	May 17	Jun 8	Jun 24	90-31
Vocational Rehabilitation Amendments of 1967	HR 12257 Aug 10	Aug 10 1967	Ed L	LPW	Aug 17	Sep 18	563	565	H10819	S13267	Aug 21	Sep 20	Oct 3	66-06
Mental Retardation Amendments of 1967	HR 6430	Mar 1 1967	IFC	LPW	Aug 17	Nov 4	562	725	H12221	S15873	Sep 20	Nov 6	Dec 4	90-170
Partnership for Health Amendments of 1967	HR 6418	Mar 1 1967	IFC	LPW	Aug 3	Nov 4	538	724	H12212	S15876	Sep 20	Nov 6	Dec 5	90-174
Elementary & Secondary Education Amendments of 1967	HR 7819	Apr 3 1967	T P3	LPW	Apr 11	Nov 6	188	726	Н6122	S18357	May 25	Dec 11	Jan 2	90-247

90-248 Nov 22 | Jan 2 | H10743 | S17037 | Aug 17 | 744 544 Nov 14 Aug 7 Fin W.W Social Security HR 12080 Aug 3 Amendments of 1967

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1 Where only one bill is shown the other body of Congress considered the same bill and passed it either with or without amendments.

Table of Committee Abbreviations:

Armed Services
Education and Labor
Finance
Interstate and Foreign Commerce
Labor and Public Welfare
Ways and Means

SOURCE: Congressional Record Proceedings and Debates of the: 88th Congress, First Session, 1963; 88th Congress, Second Session, 1964; 89th Congress, First Session, 1967.

