

1 (d) USE OF FUNDS.—Any infant mortality pilot pro-
2 gram funded under this section may—

3 (1) include the development of a plan that iden-
4 tifies the individual needs of each community to be
5 served and strategies to address those needs;

6 (2) provide outreach to at-risk mothers through
7 programs deemed appropriate by the Director;

8 (3) develop and implement standardized sys-
9 tems for improved access, utilization, and quality of
10 social, educational, and clinical services to promote
11 healthy pregnancies, full term births, and healthy in-
12 fancies delivered to women and their infants, such
13 as—

14 (A) counseling on infant care, feeding, and
15 parenting;

16 (B) postpartum care;

17 (C) prevention of premature delivery; and

18 (D) additional counseling for at-risk moth-
19 ers, including smoking cessation programs,
20 drug treatment programs, alcohol treatment
21 programs, nutrition and physical activity pro-
22 grams, postpartum depression and domestic vio-
23 lence programs, social and psychological serv-
24 ices, dental care, and parenting programs;

1 (4) establish a rural outreach program to pro-
2 vide care to at-risk mothers in rural areas;

3 (5) establish a regional public education cam-
4 paign, including a campaign to—

5 (A) prevent preterm births; and

6 (B) educate the public about infant mor-
7 tality; and

8 (6) provide for any other activities, programs,
9 or strategies as identified by the community plan.

10 (e) LIMITATION.—Of the funds received through a
11 grant under this section for a fiscal year, an eligible entity
12 shall not use more than 10 percent for program evalua-
13 tion.

14 (f) REPORTS ON PILOT PROGRAMS.—

15 (1) IN GENERAL.—Not later than 1 year after
16 receiving a grant, and annually thereafter for the
17 duration of the grant period, each entity that re-
18 ceives a grant under subsection (a) shall submit a
19 report to the Secretary detailing its infant mortality
20 pilot program.

21 (2) CONTENTS OF REPORT.—The reports re-
22 quired under paragraph (1) shall include informa-
23 tion such as the methodology of, and outcomes and
24 statistics from, the grantee's infant mortality pilot
25 program.

1 (3) EVALUATION.—The Secretary shall use the
2 reports required under paragraph (1) to evaluate,
3 and conduct statistical research on, infant mortality
4 pilot programs funded through this section.

5 (g) DEFINITIONS.—For the purposes of this section:

6 (1) DIRECTOR.—The term “Director” means
7 the Director of the Centers for Disease Control and
8 Prevention.

9 (2) ELIGIBLE ENTITY.—The term “eligible enti-
10 ty” means a State, county, city, territorial, or tribal
11 health department that has submitted a proposal to
12 the Secretary that the Secretary deems likely to re-
13 duce infant mortality rates within the standard met-
14 ropolitan statistical area involved.

15 (3) TRIBAL.—The term “tribal” refers to an
16 Indian tribe, a Tribal organization, or an Urban In-
17 dian organization, as such terms are defined in sec-
18 tion 4 of the Indian Health Care Improvement Act.

19 (h) AUTHORIZATION OF APPROPRIATIONS.—To carry
20 out this section, there are authorized to be appropriated
21 \$10,000,000 for each of fiscal years 2011 through 2015.

