[FULL COMMITTEE PRINT]

116TH CONGRESS, 1st Session | HOUSE OF REPRESENTATIVES | REPORT 116–XXX

DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS BILL, 2020

XXX , 2019.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Ms. DELAURO, from the Committee on Appropriations, submitted the following

R E P O R T

[To accompany H.R.]

The Committee on Appropriations submits the following report in explanation of the accompanying bill making appropriations for the Departments of Labor, Health and Human Services (except the Food and Drug Administration, the Agency for Toxic Substances and Disease Registry and the Indian Health Service), and Education, and the Committee for Purchase from People Who Are Blind or Severely Disabled, Corporation for National and Community Service, Corporation for Public Broadcasting, Federal Mediation and Conciliation Service, Federal Mine Safety and Health Review Commission, Institute of Museum and Library Services, Medicaid and CHIP Payment and Access Commission, Medicare Payment Advisory Commission, National Council on Disability, National Labor Relations Board, National Mediation Board, Occupational Safety and Health Review Commission, Railroad Retirement Board, and Social Security Administration for the fiscal year ending September 30, 2020, and for other purposes.

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SUMMARY OF ESTIMATES AND APPROPRIATIONS

The following table compares on a summary basis the appropriations, including trust funds for fiscal year 2020, the budget request for fiscal year 2020, and the Committee recommendation for fiscal year 2020 in the accompanying bill.

2020 LABOR, HHS, EDUCATION BILL

[Discretionary funding in thousands of dollars]

Budget Activity	Fiscal Year—			2020 Committee compared to—	
	2019 Enacted	2020 Budget	2020 Committee	2019 Enacted	2020 Budget
Department of Labor	$12,123,251	$10,905,405	$13,321,641	+1,198,390	+2,416,236
Department of Health and Human Services	90,490,781	78,085,971	99,014,512	+8,523,731	+20,928,541
Department of Education	71,448,416	64,005,915	75,891,812	+4,443,396	+11,885,897
Related Agencies	15,316,511	13,543,842	15,668,035	+351,524	+2,124,193

GENERAL SUMMARY OF THE BILL

For fiscal year 2020, the Committee recommends a total of $191,618,000 in current year discretionary funding, including offsets and adjustments. The fiscal year 2020 recommendation is an increase of $11,645,000,000 above the fiscal year 2019 enacted level.

The Labor-HHS-Education bill supports some of the nation's most critical programs that touch individuals and families throughout their lifespan, from Early Head Start to Social Security. Many of the bill's programs have been shortchanged over the past eight years, and the President's fiscal year 2020 budget request, if enacted, would do irreparable damage to critical programs that provide opportunities for millions of families. Instead, through this bill, the Committee is moving ambitiously to make up for lost ground by recommending increased investments to help provide every individual with a better chance at a better life—with a good education, a good job, and access to affordable health care.

The Committee recommends historic investments in education programs, including early childhood development, K–12 public education, Special Education, and postsecondary education.

The Committee continues to build on investments made over the past four years in biomedical research by increasing the National Institutes of Health (NIH), while also beginning a new multi-year initiative to rebuild Federal, State, and local public health capacity through a significant increase in the Centers for Disease Control and Prevention (CDC).

And the Committee invests in workforce training, and reverses years of eroding budgets at the Wage and Hour Division (WHD) and the Occupational Safety and Health Administration (OSHA), while continuing to protect retired workers by including a signifi-

cant increase for the Social Security Administration's operating expenses.

Some of the most notable initiatives in fiscal year 2020 include:

EARLY CHILDHOOD EDUCATION

The Committee includes nearly $20,000,000,000 for early childhood education programs through the Child Care and Development Block Grant, Head Start, and Preschool Development Grants—an increase of $4,000,000,000 over the fiscal year 2019 enacted level. This is the largest single-year increase ever provided for these programs.

Child care is one of the most critical needs of families with young children—but CCDBG currently reaches only 15 percent of the nearly 14 million children who are eligible to receive child care services. The increase included in this bill will provide CCDBG-funded child care for approximately 300,000 additional children, which will also enable more parents in low-income families to remain in the workforce.

The bill also provides an increase of $1,500,000,000 for Head Start, including increases of $750,000,000 for Quality Improvement Funding for Trauma-Informed Care and $525,000,000 for Early Head Start-Child Care Partnerships. Early Head Start reaches approximately seven percent of eligible children, but the increase in this bill will expand access to an additional 80,000 infants and toddlers from low-income families.

The Committee further recommends an increase of $100,000,000 for Preschool Development Grants to build State and local capacity to provide early childhood care and education for children birth through five from low- and moderate-income families. This would be the first increase for Preschool Development Grants since the program was initiated in fiscal year 2015 and it would enable continued support for additional States to implement or expand preschool programs.

INVESTING IN PUBLIC EDUCATION

The Committee is committed to increasing investments in core formula grant programs that support high-quality public education opportunities for all students. Our nation's public schools serve more than 50 million children, more than 50 percent of whom come from low-income families. Research shows that low-income students are more likely to struggle academically and often attend high-need schools with fewer resources, less experienced teachers, and more limited access to advanced coursework. At the same time, there is growing evidence that increases in education spending are correlated with improved educational outcomes. Unfortunately, support for federal K–12 formula programs has been relatively stagnant over the past decade, allowing inflation to erode the value of this vital assistance.

Overall, the Committee recommendation provides $42,222,117,000 for federal K–12 education programs, including Individuals with Disabilities Education Act (IDEA), an increase of $3,372,571,000 over the fiscal year 2019 enacted level and $8,126,130,000 over the fiscal year 2020 budget request. The recommendation is a nine percent increase over last year.

In particular, the Committee recommends an additional $1,000,000,000 over the fiscal year 2019 enacted level and the fiscal year 2020 budget request for Title I–Grants to Local Educational Agencies for a total of $16,859,802,000. Title I serves an estimated 25 million students in nearly 90 percent of school districts and nearly 60 percent of all public schools.

The Committee also increases investment in formula programs that have not seen any increase in several years. The Committee recommendation includes $2,555,830,000 for Supporting Effective Instruction State Grants (Title II–A), an increase of $500,000,000 over the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds provide States and school districts with a flexible source of funding to strengthen the skills and knowledge of teachers, principals, and administrators to enable them to improve student achievement. Title II–A represents the only dedicated funding stream for teacher professional development for many States and school districts. The Committee's recommended 24 percent increase would be the program's first increase since 2010.

The Committee recommends $980,000,000 for the English Language Acquisition program, which provides formula grants to States to serve English Leaners (EL), an increase of $242,600,000 over the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Federal data show that significant achievement gaps exist between ELs and their peers. However, funding to support these students has been flat since fiscal year 2015. At the same time, many States and school districts have experienced rapid growth in their EL populations.

The Committee recommends $13,364,392,000 for Individuals with Disabilities Education Act (IDEA) Part B Grants to States, which is $1,000,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request, reflecting the largest increase to the program in more than a decade. The Committee is concerned that the federal share of the excess cost of educating students with disabilities has declined and notes the critical role this increase will play in helping to reverse this trend.

SOCIAL-EMOTIONAL LEARNING INITIATIVE

The Committee includes a new initiative to support a landmark federal investment in social-emotional learning (SEL), "whole child" approaches to education, and community schools. A recent study by the Collaborative for Academic, Social, and Emotional Learning found that students who received SEL interventions showed lasting positive impacts on variables such as high school graduation rates and college attendance, and lower likelihoods of being arrested or being diagnosed with a clinical mental health disorder.

In total, the Committee recommends $260,000,000 for the initiative, which includes dedicated funding for SEL and "whole child" projects and activities across a variety of programs within the Department of Education. In particular, $170,000,000 is made available through the Education Innovation and Research program for grants for evidence-based, field-initiated innovations that address student social, emotional, and cognitive needs.

The Committee also recommends $25,000,000 through the Supporting Effective Educator Development (SEED) grant program for

a new competition to support professional development that helps educators incorporate SEL into teaching, and for pathways into teaching that provide a strong foundation in child development and learning, including skills for implementing SEL. The Committee also recommends $40,000,000, an increase of $22,500,000 over the fiscal year 2019 enacted level for the Full-Service Community Schools Program, which supports evidence-based models to meet the holistic needs of children and families. The fiscal year 2020 budget request proposes to eliminate this program.

In addition, $25,000,000 is provided within School Safety National Activities to increase the number of well-trained school counselors, social workers, psychologists, or other mental health professionals qualified to provide school-based mental health services. Research shows that building the capacity of students to develop social and emotional skills, and take responsibility for their community, can reduce bullying, violence, and aggressive behaviors, making schools safer.

SUPPORTING ACCESS TO AND COMPLETION OF POSTSECONDARY EDUCATION

The Committee recommendation includes robust increases to bolster the supports students need to access and complete postsecondary education, including sufficient funding to support an increase in the maximum Pell Grant by $150 over the fiscal year 2019 enacted level and the fiscal year 2020 budget request, from $6,195 to $6,345 to help the award keep up with inflation.

In addition, the Committee recommendation provides $1,434,000,000 for Federal Work Study, an increase of $304,000,000 over the fiscal year 2019 enacted level and $934,000,000 over the fiscal year 2020 budget request. The Committee recommendation also includes $1,028,000,000 for the Supplemental Educational Opportunity Grants, an increase of $188,000,000 over the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program.

To support a variety of outreach and support services to encourage low-income, often first-generation individuals, to enter and complete college, the Committee recommendation includes $1,160,000,000 for the TRIO programs, an increase of $100,000,000 over the fiscal year 2019 enacted level and $210,000,000 over the fiscal year 2020 budget request. The Committee also recommends $395,000,000 for the Gaining Early Awareness and Readiness for Undergraduate Programs, which is $35,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this funding stream and support similar activities through a modified TRIO program.

To help close gaps among racial and socioeconomic groups in college enrollment and degree attainment, the Committee recommendation includes a total of $917,464,000 for programs that serve high proportions of students of color, an increase of $250,910,000 over the fiscal year 2019 enacted level and $377,845,000 over the fiscal year 2020 budget request. This funding will help support institutions, such as Historically Black Colleges and Universities, Hispanic-Serving Institutions and Tribally Controlled Colleges and Universities.

NIH RESEARCH

The Committee includes $41,084,000,000 for the National Institutes of Health, an increase of $2,219,000,000 within this bill, which is a larger increase than the Committee has provided in three of the previous four fiscal years. This bill ensures a net increase of at least $2,000,000,000 over the previous year for NIH research, despite the loss of $219,000,000 due to reductions in funding made available through the CURES Act.

The Committee continues its ongoing support for NIH initiatives, including the Cancer Moonshot; the BRAIN Initiative; the "All of Us" Precision Medicine Initiative; Alzheimer's research; and research to develop a universal flu vaccine.

In addition, the bill includes sufficient funding to provide an across-the-board increase of approximately five percent for all Institutes and Centers (IC). The Committee is concerned that Congress has moved too far in the direction of targeted funding for specific initiatives, which has resulted in less funding being available for foundational research that may lead to unforeseeable scientific breakthroughs. This bill maximizes the across-the-board increase for all ICs, thereby ensuring a significant boost for the best peer-reviewed research across all scientific disciplines.

PUBLIC HEALTH SYSTEMS

The Committee makes a significant investment to improve the long-term capacity of Federal, State, and local public health systems. The bill includes $8,258,363,000 for the Centers for Disease Control and Prevention (CDC), an increase of $920,622,000 over the fiscal year 2019 enacted level.

The bill begins a multi-year initiative to modernize public health capacity at CDC and its public health partners at the state and local levels. A new investment of $100,000,000 will start to move our public health system away from antiquated data reporting to a common data platform that will enable the public health workforce to use real-time data to predict and prevent public health threats in the future.

The Committee also invests in existing programs to address some of the country's most costly chronic diseases. These conditions are costly in reduced quality of life as well as high medical costs. The bill includes a total increase of $44,700,000 to prevent Diabetes and Heart Disease; an increase of $37,500,000 to promote early detection and prevention of cancer; and an increase of $16,000,000 to expand targeted activities to reach underserved minority populations. The bill also includes an increase of $40,000,000 to expand efforts to reduce tobacco use, with an emphasis on the troubling increase in e-cigarette use among youth.

WOMEN'S HEALTH

The Committee makes a strong commitment to advance women's health after years of underfunding and deliberate attempts by the Administration to undermine programs that ensure access to health care for women in low-income communities.

The bill includes $400,000,000 for Title X Family Planning, an increase of $113,521,000 above the fiscal year 2019 enacted level and the 2020 budget request. Title X-funded health care providers

serve more than four million low-income women and men every year—offering contraceptive counseling and services, screening for STDs and HIV/AIDS, screening for cervical and breast cancer, and primary health care services. Two-thirds of Title X patients have incomes below the federal poverty level, and 60 percent of women who receive health care services from a Title X-funded clinic consider it their primary provider.

The bill also includes $110,000,000 for the Teen Pregnancy Prevention Program, an increase of $9,000,000 above the fiscal year 2019 enacted level and $110,000,000 above the 2020 budget request.

The Committee maintains last year's investment of $50,000,000 for an initiative to reduce maternal mortality rates while further bolstering that effort with an increase of $5,000,000 through the Maternal and Child Health Bureau; an increase of $2,500,000 to educate midwives to address the national shortage of maternity care providers; and increased funding through the Office on Women's Health.

And the Committee strongly supports the mission of the WISEWOMAN program, helping uninsured and under-insured low-income women ages 40 to 64 understand and reduce their risk for heart disease and stroke; by providing risk factor screenings; and connecting them with lifestyle programs, health counseling and other community resources that promote healthy behavior change. The Committee includes an increase of $25,650,000 to expand the program to all 50 States and the District of Columbia.

HIV INITIATIVE

The Committee invests in a new HIV initiative to reduce transmission of HIV by 90 percent in the next 10 years. The bill includes an increase of nearly $500,000,000 for HIV research, prevention, and treatment—almost twice the size of the increase requested by the Administration.

The bill includes an increase of $170,000,000 for HRSA programs—including Ryan White and Community Health Centers—to increase the use of pre-exposure prophylaxis (PrEP) among people at high risk for HIV transmission and to increase the use of antiretroviral therapy (ART) for individuals living with HIV.

The bill also includes $140,000,000 for CDC activities to diagnose people with HIV as early as possible after infection, link people to effective treatment and prevention strategies, and respond rapidly to clusters and outbreaks of new HIV infections. There is also an increase of $16,919,000 for School Health-HIV and an increase of $17,000,000 for the Minority AIDS Initiative, a cross-cutting initiative to improve prevention, care, and treatment for minority populations disproportionately affected by HIV.

Furthermore, the Committee rejects the Administration's proposal to cut NIH's HIV research budget by more than $400,000,000. Instead, the Committee continues to invest in research that led to breakthroughs in current treatments such as PrEP and ART. The bill includes an increase of $149,000,000 for NIH to continue funding research that could lead to an HIV vaccine or a cure.

FIREARM INJURY AND MORTALITY PREVENTION RESEARCH

The Committee addresses the public health emergency of firearm violence for the first time in more than two decades. According to CDC data, there were nearly 40,000 firearm-related deaths in 2017. In addition, more than 130,000 non-fatal firearm injuries from assault or self-harm are treated annually in hospital emergency departments.

To address this public health emergency, the bill includes a total of $50,000,000 for research through CDC and NIH to better understand and prevent injury and death as a result of firearm violence. Research is intended to focus on activities that will have the greatest potential public health impact, including strengthening data collection to better understand firearm deaths and non-fatal injuries to help inform firearm injury prevention; and applied research projects and evaluation that align with the Institute of Medicine/National Research Council recommendations to better understand public health prevention strategies for reducing firearm injury and death.

In addition, the Committee includes increases of $13,000,000 for Project AWARE and $5,000,000 for Healthy Transitions. These programs began as a part of the 2013 "Now Is the Time" initiative and are designed to increase access to mental health treatment for youth and young adults reporting symptoms of major depression, serious psychological stress, and suicidal thoughts and actions.

PREPARING WORKERS FOR GOOD JOBS WITH FAIR WAGES

The biggest economic challenge of our time is that too many people are in jobs that do not pay them enough money to live on. More than two-thirds of adults do not have a four-year degree, and economic projections show that soon two out of three jobs will require some education and training beyond the high school level.

To that end, the Committee provides new investments in several areas of workforce training. Overall, the Committee recommendation includes $5,846,270,000 for programs authorized by the Workforce Innovation and Opportunity Act, an increase of $624,915,000, above fiscal year 2019 and $1,583,280,000 above the fiscal year 2020 budget request. In addition, the Committee recommendation provides $250,000,000, an increase of $90,000,000 over the fiscal year 2019 enacted level and fiscal year 2020 budget request, to expand the registered apprenticeship model and $1,868,655,000, an increase of $150,000,000 over the fiscal year 2019 enacted level and $853,072,000 over the fiscal year 2020 budget request for Job Corps. These programs, and others, will help in the effort to ensure everyone can benefit from the economic recovery, and that everyone has the training they need to get good jobs with fair wages.

To help meet local and regional labor market demand for a skilled workforce, the Committee includes a new $150,000,000 initiative to support community colleges—the Strengthening Community Colleges Training Grant (SCCTG) program—in providing training to workers in in-demand industries, such as manufacturing, information technology, health care, and energy among others. Community colleges are strategically placed to meet not only the educational needs of our country, but our workforce development needs, as well. SCCTGs will help community colleges and

other four-year colleges and universities through consortia build capacity and leverage their expertise and resources, so that more individuals are acquiring industry-recognized skills.

PROTECTING AMERICA'S WORKERS

The Committee recommends $1,840,453,000 for Department of Labor agencies responsible for worker protection and worker rights. This is an increase of $236,586,000 over the fiscal year 2019 enacted level and $462,961,000 over the fiscal year 2020 budget request.

WHD employs fewer investigators today than it did in 1948, despite the workforce having grown significantly in that time. To help make up for this lost ground, hold bad-acting employers accountable and defend working people so they receive the pay they earned and are legally entitled to, the Committee recommendation includes $298,131,000, an increase of $69,131,000 over fiscal year 2019 enacted level and an increase of $65,563,000 over the fiscal year 2020 budget request.

OSHA currently has the lowest number of health and safety inspectors in the agency's 48-year history. OSHA enforcement is critical to preventing workplace tragedies from occurring, which is why it is concerning that the number of OSHA investigations following a work-related fatality or catastrophe reached 929 investigations in fiscal year 2018, up almost 100 from the previous year, reflecting a ten-year high. To make up for years of flat funding and the erosion of capacity at OSHA, the Committee includes $660,908,000, an increase of $103,121,000 over the fiscal year 2019 enacted level and $103,375,000 over the fiscal year 2020 budget request for this critical worker protection agency.

The Committee also recommends $341,500,000 for the National Labor Relations Board, an increase of $67,276,000 over the fiscal year 2019 enacted level and $99,950,000 over the fiscal year 2020 budget request. This increase will address the 17 percent decline in field staff the Board has seen in over just two years by supporting 300 additional regional field staff and two unfilled regional director positions.

Oversight of the Executive Branch

The Subcommittee has also fulfilled its responsibility to maintain oversight of the Executive Branch by holding six oversight hearings—in addition to annual hearings on the fiscal year 2020 budget request. The Committee has focused on abuses in health care, education, and labor in addition to holding Administration officials accountable for their actions. These oversight hearings have informed many of the decisions in the fiscal year 2020 Labor-HHS-Education bill—including the first investment in firearm injury and mortality prevention research in more than two decades. Furthermore, the Subcommittee intends to hold additional oversight hearings throughout the rest of this Congress.

OVERSIGHT HEARINGS

Impact of the Administration's Policies Affecting the Affordable Care Act. The Committee held a hearing to examine the Administration's intentional policies to undermine the Affordable Care Act, which have raised prices for Americans already struggling with

skyrocketing health care costs. Moreover, the fiscal year 2020 budget request makes clear that the Administration has not abandoned its attacks on the ACA or protections for people with preexisting conditions. The Committee examined those policies, specifically with regards to affordability, the increasing number of uninsured, and the quality of health insurance benefits. As a result of the Committee's hearing, this bill directs the Centers for Medicare & Medicaid Services (CMS) to allocate no less than $100,000,000 of carryover funds in fiscal year 2020 to support the ACA Navigators program, as well as outreach, enrollment assistance, and advertising during the next ACA open enrollment period.

Reviewing the Administration's Unaccompanied Children Program. The Committee held a hearing to examine the Administration's cruel and immoral policy of family separation, which led to thousands of immigrant children being forcibly separated from their parents, with no plan to reunify them. Many of these children were less than 12 years old, and some were less than 12 months old. Furthermore, the Administration's policies led to tens of thousands of children spending additional months in federal custody instead of being placed in a home with relatives willing to care for them. These intentional policies also caused hundreds of millions of dollars in cost overruns, forcing the Secretary to transfer or reprogram $385,000,000 from other HHS programs. As a result of the Committee's hearing, this bill places legal conditions on funding for the Unaccompanied Children program to return the program to its core mission of taking care of vulnerable children and placing them with sponsors, rather than acting as an extension of the Administration's failed immigration policies.

Protecting Student Borrowers: Loan Servicing Oversight. Today, 44.7 million people owe $1,500,000,000,000 in student loans, more than credit card debt or car loans. During the Subcommittee's oversight hearing on loan servicing, Members of Congress heard from a panel of experts on the critical role loan servicing plays in assisting these individuals with paying off their debt. Unfortunately, there are serious concerns that these servicing companies are failing and that the Department of Education is asleep at the wheel. In particular, the Subcommittee heard from the Assistant Inspector General for Audit in the Office of the Inspector General (OIG) at the Department, who testified that between 2015 and 2017, loan servicers were out of compliance in 61 percent of the Federal Student Aid (FSA) monitoring reports analyzed. According to the OIG report, "by not holding servicers accountable for instances of noncompliance with Federal loan servicing requirements, FSA did not provide servicers with an incentive to take actions to mitigate the risk of continued servicer noncompliance that could harm students." Such noncompliance includes loan servicers failing to provide borrowers with accurate information about their repayment options, miscalculating how much students should be paying through income-based repayment, and putting borrowers into forbearance without first informing them of other, less costly options.

As a result, the Committee recommendation includes new bill language requiring the Department to award student loan servicer contracts on the basis of their past performance and compliance with Federal and state law. It also requires the Department to prioritize services to help borrowers avoid delinquency or default in

contract solicitations and for the Department to include accountability measures that account for the performance of the portfolio and contractor compliance with FSA guidelines.

Addressing the Public Health Emergency of Gun Violence. The Committee held the first appropriations hearing in more than two decades on the public health emergency of gun violence. In 2017 alone, guns killed nearly 40,000 Americans, including 24,000 suicide deaths. It is imperative that our foremost public health and medical research agencies are engaged to better understand this crisis. As a result of the Committee's hearing, this bill includes $50,000,000 for the CDC and NIH to support firearm injury and mortality prevention research, with the potential to identify interventions that will save hundreds of thousands of lives in the future.

Oversight of For-Profit Colleges: Protecting Students and Taxpayer Dollars from Predatory Practices. The Subcommittee held a hearing on predatory for-profit colleges. The Subcommittee has a vested interest in conducting rigorous oversight of these schools as they receive nearly 14 percent of all Pell Grant funding, and while accounting for only 9 percent of all students enrolled in postsecondary education, they account for more than a third of all defaults. In addition, during the hearing, the Subcommittee heard testimony from a disabled veteran who was assured by a for-profit college that he would not take out any student loans to enroll and would only use grant aid and GI Bill benefits to attend; however, he came to find out that he now owes approximately $100,000 in student loan debt, and was unable to find employment in his field of study after graduating from the for-profit institution. His story is not an outlier.

For-profit colleges prey on servicemembers and veterans with aggressive marketing and recruiting because of a loophole, known as 90/10, that allows for-profit colleges to exclude from the cap on federally derived institutional revenue any Federal aid and educational benefits from sources other than the Department of Education. To shine a light on this problem and assist in identifying solutions, the Committee directs the Secretary of Education to submit a report to the Committees on Appropriations providing an analysis of all for-profit institutions receiving 85 percent or more of their revenue from Department of Education sources as well as revenue from the Department of Veterans Affairs (VA) and Department of Defense (DoD), as later described in the Committee report.

In addition, the Committee is deeply concerned by the Secretary of Education's agenda to roll back regulations that protect the well-being of students and taxpayers. While a court has ordered the Secretary to implement the 2016 Borrower Defense regulation, which provides relief to students who were defrauded and misled by institutions of higher education, the Secretary recently testified that not one claim has been approved since June 2018. To conduct further oversight, the Committee directs the Secretary to provide updates to the Borrower Defense to Repayment Report on FSA's Data Center on a monthly basis and directs the Secretary to submit a report to the Committees on Appropriations on the number of claims and the total amount of the loans covered by those claims by school and institutional type, as later described in the Committee report.

Combatting Wage Theft: The Critical Role of Wage and Hour Enforcement. The Subcommittee held an oversight hearing on wage theft and heard testimony from a panel of experts on how pay-related violations by employers cost workers billions of dollars annually. In addition, the Subcommittee discussed how the WHD employs fewer investigators today than it did in 1948, despite the workforce having grown significantly in that time. To help make up for this lost ground, hold bad-acting employers accountable and defend working people so they receive the pay they earned and are legally entitled to, the Committee recommendation for the WHD includes $298,131,000, an increase of $69,131,000 over the fiscal year 2019 enacted level and an increase of $65,563,000 over the fiscal year 2020 budget request.

TITLE I—DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

Appropriation, fiscal year 2019	$9,905,660,000
Budget request, fiscal year 2020	8,573,241,000
Committee Recommendation	10,614,487,000
Change from enacted level	+708,827,000
Change from budget request	+2,041,246,000

The Employment and Training Administration (ETA) administers Federal job training grant programs and Trade Adjustment Assistance and provides funding for the administration and oversight of the State Unemployment Insurance and Employment Service system.

TRAINING AND EMPLOYMENT SERVICES

Appropriation, fiscal year 2019	$3,502,700,000
Budget request, fiscal year 2020	3,247,407,000
Committee Recommendation	3,977,615,000
Change from enacted level	+474,915,000
Change from budget request	+730,208,000

Training and Employment Services provides funding for Federal job training programs authorized primarily by the Workforce Innovation and Opportunity Act of 2014 (WIOA).

Adult Employment and Training Activities.—For Adult Employment and Training Activities, the Committee recommends $900,000,000, which is $54,444,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Youth Employment and Training Activities.—For Youth Employment and Training Activities, the Committee recommends $964,000,000, which is $60,584,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

The Committee remains concerned with the challenges facing disconnected youth and encourages the Department to prioritize funding for such youth and develop new strategies, including how to market the Department's youth-based resources to disconnected and opportunity youth through social media, local advertisements and partnerships with local communities and workforce boards.

Dislocated Worker Employment and Training Activities.—For Dislocated Worker Employment and Training Activities, the Committee recommends $1,103,360,000, which is $62,500,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Dislocated Worker Assistance National Reserve.—The Committee recommends $370,859,000 for the Dislocated Workers National Reserve, an increase of $150,000,000 over the fiscal year 2019 enacted level and $236,142,000 over the fiscal year 2020 budget request.

Community colleges are strategically positioned to meet not only the educational needs of our country, but our workforce development needs as well. The Committee recommendation includes $150,000,000 for a new initiative—the Strengthening Community College Training Grants—to better align workforce development efforts in in-demand industries with postsecondary education. The Trade Adjustment Assistance Community College Career Training Grant (TAACCCT) Program made a major investment in community colleges between 2010 and 2014 and achieved success in helping more adults attain industry-recognized skills and credentials. Nearly 500,000 individuals enrolled in programs supported through TAACCCT and earned more than 320,000 credentials in areas of manufacturing, healthcare, information technology, energy, transportation and other industries. To build on lessons learned from this initiative, the Committee recommendation includes new funding to support a competitive capacity building grant program to again leverage community colleges in supporting local workforce development and industry needs and to collaborate with employers in the design and implementation of courses and programs.

Within 120 days of enactment of this Act, the Committee directs the Secretary to issue a Solicitation for Grant Applications (SGA) for this program. The Committee also directs the Secretary to make individual grants to community colleges of at least $1,500,000, unless grants are awarded in consortia to community colleges and other eligible institutions of higher education as defined in section 101(a) of the Higher Education Act. In making grant awards, the Committee directs the Secretary to ensure geographic diversity among grant recipients, to require a plan for third party evaluations in each individual grant proposal and to conduct a national assessment of all grantee proposals once complete. In addition, the Committee directs the Secretary to ensure grantees incorporate a plan for sustainability of funding under the grant proposal. While grants may be awarded to a consortium of institutions of higher education, including public and private, non-profit four-year institutions, the Committee directs the Secretary to ensure that the lead grantee in the consortium is a community college. The Committee directs the Secretary to report to the Committees on Appropriations not less than 45 days in advance of issuing the SGA with specific details of the SGA and 15 days in advance of announcing awards through this program. The Secretary is directed to update the Committees quarterly thereafter until all funds are expended.

Native Americans.—For the Indian and Native American programs, the Committee recommends $55,000,000, which is $500,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program.

Migrant and Seasonal Farmworkers.—For the National Farmworker Jobs program, the Committee recommends $98,896,000, which is $10,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. The Committee recommendation includes sufficient funding for the first time to carry out Section 127(a)(1) of WIOA to support

farmworker youth activities. The Committee recommendation also includes new bill language that changes the availability of funds from July 1 to April 1 to improve administrative efficiencies and ensure grants are awarded in a timely manner.

YouthBuild.—For the YouthBuild program, the Committee recommends $127,500,000, which is $37,466,000 more than the fiscal year 2019 enacted level and $42,466,000 more than the fiscal year 2020 budget request.

Reintegration of Ex-Offenders.—The Committee recommends $100,000,000 for ex-offender retraining and reintegration activities, which is $6,921,000 more than the fiscal year 2019 enacted level and $21,676,000 more than the fiscal year 2020 budget request. The Committee directs the Department to ensure grantees establish formal partnerships with employers and that program participants receive industry recognized credentials and training in fields that prepare them for successful reintegration, including ensuring participants receive training and credentials in fields where their record is not a barrier to entry or continued employment. The Committee also directs the Department to consider the needs of communities that have recently experienced significant unrest.

Workforce Data Quality Initiative.—The Committee recommends $8,000,000 for the Workforce Data Quality Initiative, which is $2,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. The Committee supports the work of States in using these funds to create and utilize data to align preschool through workforce systems.

Apprenticeship Grants.—The Committee recommends $250,000,000 for the apprenticeship grants program, which is $90,000,000 more than the fiscal year 2019 enacted level and fiscal year 2020 budget request. The Committee established this program to expand work-based learning programs in in-demand industries through registered apprenticeships. Registered apprenticeships are a proven strategy for meeting the needs of our nation's workforce and industry simultaneously.

However, the Committee is deeply concerned that funds are being used to support unregistered apprenticeship programs, an untested, unproven, and duplicative version of registered apprenticeships. The Committee is also concerned that the funding under this program is not being used effectively to support State, regional, and local apprenticeship efforts, as well as efforts by intermediaries to expand registered apprenticeships into new industries and to expand opportunities for underserved or underrepresented populations.

Therefore, the bill includes new language clarifying that funds may only be used for registered apprenticeships and requires that funds be used by the Secretary to support State grants and for contracts and cooperative agreements for national and local apprenticeship intermediaries.

The Committee directs the Secretary to submit a report to the Committees on Appropriations providing details on entities awarded funding, selection criteria used, and the funding amount for each grant or contract awarded at the time such awards are made. Not later than 90 days after enactment of this Act, the Department shall provide the Committees on Appropriations a detailed spend

plan of anticipated uses of funds made available, including administrative costs.

While the Committee recognizes the important role of registered apprenticeship programs in developing our nation's workforce, more could be done to leverage registered apprenticeships in aligning our nation's workforce development and traditional educational systems. The Committee therefore requests a report, not later than 120 days from enactment of this Act, outlining how registered apprenticeships may be used to connect secondary and postsecondary systems with workforce development, providing examples, best practices for replication in the field, and an examination of postsecondary degree-apprenticeship and dual enrollment strategies, including dual enrollment for high school students through construction and manufacturing-oriented accredited apprenticeship colleges. The report should include information on the Department's efforts to expand apprenticeship programs to high school aged youth in order to connect such youth to professions in-demand fields facing shortages.

The Committee supports the use of apprenticeship grants that provide worker education in in-demand fields, including first responder, utility (water), as well as in goods movement sectors such as global logistics, rail and other freight-related employment.

Furthermore, the Committee is concerned with the persistent gender inequity in apprenticeship programs. While apprenticeships are an important path to the middle-class, women are often underrepresented in apprenticeship programs, and women who do participate often make far less than their male counterparts. The Committee encourages the Department to commit to addressing these inequalities within the apprenticeship programs and directs the Department to include an update on such efforts in its fiscal year 2021 Congressional Budget Justification.

Open Data Reporting.—The Committee encourages the Secretary, to the extent practicable, to disclose information related to registered apprenticeships, including through the Apprenticeship.gov website, or its successor website, and to be published using an open source description language to allow for public search and comparison of such data, including data on credentials earned through or as a result of registered apprenticeships.

National Defense Workforce Pipeline.—Over the next ten years, an estimated 15,000 new workers will be needed to support new submarine construction, with a particular focus on trades such as welding, pipefitting, electrical, machining, shipfitting, and carpentry, among others. The Committee encourages the Department to work with the Departments of Defense, Education, and Commerce to develop and implement a strategy for strengthening the workforce pipeline, including new submarine construction.

Engineering Programs.—The Committee encourages the Department to support programs based on engineering concepts for career transitioning professionals, returning veterans, and youth in underserved areas.

JOB CORPS

Appropriation, fiscal year 2019	$1,718,655,000
Budget request, fiscal year 2020	1,015,583,000
Committee Recommendation	1,868,655,000
Change from enacted level	+150,000,000
Change from budget request	+853,072,000

Job Corps is the nation's largest residential employment and workforce development program for youth, helping prepare thousands of young people ages 16 through 24 for jobs in in-demand occupations with good wages each year.

Operations.—For Job Corps Operations, the Committee recommends $1,603,325,000, which is the same as the fiscal year 2019 enacted level and $694,868,000 more than the fiscal year 2020 budget request.

Construction, Rehabilitation, and Acquisition.—The Committee recommends $233,000,000 for construction, rehabilitation, and acquisition activities of Job Corps centers, which is $150,000,000 more than the fiscal year 2019 enacted level and $157,984,000 more than the fiscal year 2020 budget request. The increase in funding is intended to support the elimination of Job Corps' maintenance backlog.

Administration.—The Committee recommends $32,330,000 for the administrative expenses of the Job Corps program, which is the same as the fiscal year 2019 enacted level and $220,000 more than the fiscal year 2020 budget request.

The Committee is concerned with the administration of the Job Corps program, including its financial management, the underutilization of centers relative to on-board strength, and performance incentives.

The Committee directs the Department to submit a report, within 90 days of enactment of this Act, on obligations, outlays, and unobligated funds for the current fiscal year and the most recent fiscal year to the Committees on Appropriations and to the authorizing committees of jurisdiction.

To better utilize Job Corps centers, the Committee directs the Department to include an update in the fiscal year 2021 Congressional Budget Justification on specific outreach and admissions efforts that includes the most recent geographic assignment plan required by Sec. 145(c) of the WIOA, including an analysis of Job Corps application and enrollment data to evaluate the relative efficacy of different outreach strategies for prospective Job Corps applicants and their families, including social media, national television or radio buys, and local outreach efforts. The Committee encourages the Department to hire additional Outreach and Admissions staff to increase recruitment efforts targeted at disconnected youth in large cities and rural areas.

The Committee requests an update in its fiscal year 2021 Congressional Budget Justification on how the Department will rebalance Job Corps incentive payments in order to ensure student outcomes are the highest priority, including a timeline for implementation.

The Department has announced plans to reduce Job Corps training opportunities in Florida by nearly half relative to the State's capacity five years ago, despite Florida having the fourth largest population of disconnected youth and annually sending hundreds of

youth out-of-state to receive Job Corps training. The Committee directs the Department to submit to the Committees on Appropriations, within 90 days of enactment of this Act, the most recent geographic assignment plan required by Sec. 145(c) of the WIOA, including the analyses required by Sec. 145(c)(2)(A) and (B), as well as a detailed plan for increasing Job Corps' Florida slot capacity to align with demand in the State.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

Appropriation, fiscal year 2019	$400,000,000
Budget request, fiscal year 2020	– – –
Committee Recommendation	463,800,000
Change from enacted level	+63,800,000
Change from budget request	+463,800,000

The Community Service Employment for Older Americans program provides grants to public and private non-profit organizations that subsidize part-time work in community service activities for unemployed persons aged 55 and older whose family income is below 125 percent of the poverty level.

The Committee recommends $463,800,000 for the Community Service Employment for Older Americans program, which is $63,800,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

Appropriation, fiscal year 2019	$790,000,000
Budget request, fiscal year 2020	680,000,000
Committee Recommendation	680,000,000
Change from enacted level	– 110,000,000
Change from budget request	– – –

The Trade Adjustment Assistance program (TAA) provides assistance to workers adversely affected by international trade. TAA provides training, income support, wage subsidies for older workers, job search and relocation allowances to groups of workers who file a petition and are certified as eligible to apply for such benefits due to job losses resulting from increases in imports or foreign trade.

The mandatory funding provided for this program is dependent upon the Administration's economic assumptions and the Committee's recommendation for fiscal year 2020 is lower than the fiscal year 2019 enacted level for this reason.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

Appropriation, fiscal year 2019	$3,335,649,000
Budget request, fiscal year 2020	3,475,986,000
Committee Recommendation	3,465,761,000
Change from enacted level	+130,112,000
Change from budget request	– 10,225,000

The total includes $3,381,695,000 from the Employment Security Administration Account from the Unemployment Trust Fund and $84,066,000 from the General Fund of the Treasury. These funds are used to support the administration of Federal and State unemployment compensation laws.

Unemployment Insurance Compensation.—For Unemployment Insurance (UI) Compensation, the Committee recommends

$2,618,230,000, which is $102,414,000 more than the fiscal year 2019 enacted level and $3,000,000 more than the fiscal year 2020 budget request.

The recommendation provides contingency funding for increased workloads that States may face in the administration of UI. The Committee recommendation includes new bill language so that, during fiscal year 2020, for every 100,000 increase in the total average weekly insured unemployment above 1,758,000, an additional $28,600,000 shall be made available from the Unemployment Trust Fund.

While the national unemployment rate has declined, investments in state unemployment systems are still critical for ensuring claimants receive timely processing of benefits. The Committee recommendation includes new bill language requiring the Secretary to provide any above-base State UI funds through supplemental funding opportunities to States, in order to improve operations and modernize State UI systems to help ensure that workers and their families receive fast and high-quality assistance in their time of need.

The Committee is aware that when a large worker dislocation occurs, an American Job Center (AJC) in a local area will experience a surge in the demand for services. The Committee expects the Department to continue assisting State agencies and AJCs, as appropriate, with Rapid Response activities to provide a surge response in these situations, so that impacted workers are provided necessary assistance without delay. The Committee directs the Department to work closely with States and local AJCs to understand if any difficulties in providing TAA services are related to service capacity issues and to include this information in its fiscal year 2021 Congressional Budget Justification.

The Committee includes $9,000,000, the same as the fiscal year 2019 enacted level and $3,000,000 more than the fiscal year 2020 budget request for the continued support of the UI Integrity Center of Excellence (UIICE), including $6,000,000 for the benefit of States to the entity operating the UIICE.

The Committee includes $117,000,000 for the Reemployment Services and Eligibility Assessments program, and an additional $58,000,000 is made available pursuant to the Bipartisan Budget Act of 2018 (P.L. 115–123), which is $25,000,000 more than the fiscal year 2019 enacted level and equal to the fiscal year 2020 budget request.

Unemployment Compensation National Activities.—The Committee recommends $12,000,000 for National Activities, which is the same as the fiscal year 2019 enacted level and $36,000,000 below the fiscal year 2020 budget request.

Employment Service.—The Committee recommends $680,000,000 for the Employment Service allotment to States, which is $16,948,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

The Committee also recommends $22,318,000 for Employment Service National Activities, which is $2,500,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The increase in funds is intended to help modernize, streamline and reduce the processing backlog for the Work Opportunity Tax Credit certification process.

Foreign Labor Certification.—The Committee recommends $70,560,000 for the Foreign Labor Certification (FLC) program, which is $8,250,000 more than the fiscal year 2019 enacted level and equal to the fiscal year 2020 budget request. The recommendation includes $56,278,000 for Federal administration and $14,282,000 for grants to States.

H–2A Program.—The H–2A program has tripled in size from approximately 80,000 approved H–2A jobs in fiscal year 2008 to more than 240,000 in fiscal year 2018. Given the program's growth, the program's requirements against adverse effects on U.S. workers, and the potential for U.S. worker displacement and exploitation of both U.S. and vulnerable foreign workers, the Committee directs the Secretary to submit a report to the Committees on Appropriations on the Department's implementation and enforcement of the H–2A program's requirements within 180 days of enactment of this Act. The report shall include a comprehensive analysis of inspections, audits, investigations, administrative complaints and judicial litigation and data regarding findings of violations of H–2A program; the actions taken following such findings; and the remedies sought and obtained.

One-Stop Career Centers/Labor Market Information.—The Committee recommends $62,653,000 for One-Stop Career Centers and Labor Market Information, which is equal to the fiscal year 2019 enacted level and $3,327,000 more than the fiscal year 2020 budget request.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

The Committee recommends such sums as necessary for Advances to the Unemployment Trust Fund and Other Funds. The funds are made available to accounts authorized under Federal and State unemployment insurance laws and the Black Lung Disability Trust Fund when the balances in such accounts are insufficient.

PROGRAM ADMINISTRATION

Appropriation, fiscal year 2019	$158,656,000
Budget request, fiscal year 2020	154,265,000
Committee Recommendation	158,656,000
Change from enacted level	– – –
Change from budget request	+4,391,000

The recommendation includes $108,674,000 from the General Fund of the Treasury and $49,982,000 from the Employment Security Administration Account in the Unemployment Trust Fund.

Office of Apprenticeship.—The Committee urges the Department to ensure that each of the State Offices of Apprenticeship are fully and adequately staffed. Further, the Committee directs the Department to include, in its fiscal year 2021 Congressional Budget Justification, information on what percentage of Program Administration funds are used to support registered apprenticeships and non-registered apprenticeships, respectively, in fiscal years 2019 and 2020, as well as the full-time equivalent staffing levels for each of these efforts.

EMPLOYEE BENEFITS SECURITY ADMINISTRATION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$181,000,000
Budget request, fiscal year 2020	193,500,000
Committee Recommendation	183,155,000
Change from enacted level	+2,155,000
Change from budget request	−10,345,000

The Employee Benefits Security Administration (EBSA) assures the security of retirement, health and other workplace-related benefits of working people.

The Committee recommends $183,155,000 for EBSA, which is $2,155,000 more than the fiscal year 2019 enacted level and $10,345,000 less than the fiscal year 2020 budget request.

On October 11, 2018, DOL–OIG issued a report entitled "EBSA Can Provide Greater Oversight of the Thrift Savings Plan by Strengthening its Audit Program." The Committee is concerned with the DOL–OIG finding that despite identifying significant IT security weaknesses, of all recommendations made in the Thrift Savings Plan (TSP) audit reports EBSA issued from 2010 through 2017, 73 percent remain open. In response, the Committee provides $2,155,000 for EBSA to perform a comprehensive, detailed review of the TSP's IT operating environment—specifically to review the adequacy of controls at contractor sites and over contractor IT personnel and monitor the agency's progress in remediating previously identified issues. The Committee directs EBSA to provide a summary of the review's findings to the Committees on Appropriations, and to publicly post the review on its website, once it is complete. The Committee is encouraged that EBSA agrees with DOL–OIG's recommendations and directs the agency to update the Committees on Appropriations on the status of their implementation within 90 days of the enactment of this Act.

The Committee is deeply concerned by the Department of Labor's efforts to sabotage the Affordable Care Act (ACA) and strip access to affordable, comprehensive health coverage from millions of Americans through its association health plan (AHP) rule. The AHP rule seeks to expand skimpy plans that do not provide consumers with access to the care they need or financial protection against the high cost of many medical conditions. The rule will increase costs for consumers and destabilize the health insurance marketplace by cherry-picking healthier, lower cost individuals, while leaving older, sicker, and more expensive consumers in the traditional market with skyrocketing costs. This will be devastating for patients with pre-existing conditions, who the Administration already tried to abandon by refusing to defend the ACA and its key patient protections in court. The Committee agrees with a Federal judge's recent conclusion that the AHP rule "is clearly an end-run around the ACA" and that that it "does violence" to the Employee Retirement Income Security Act. Therefore, the bill does not include the Administration's requested increase for the administration of AHPs under the new rule.

PENSION BENEFIT GUARANTY CORPORATION

Appropriation, fiscal year 2019	$445,363,000
Budget request, fiscal year 2020	452,858,000
Committee Recommendation	452,858,000
Change from enacted level	+7,495,000
Change from budget request	– – –

Congress established the Pension Benefit Guaranty Corporation to insure the defined-benefit pension plans of working people.

The recommendation includes new bill language that extends the period of availability for administrative expenses to ensure the agency has sufficient time to manage a large, unanticipated influx of participants.

WAGE AND HOUR DIVISION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$229,000,000
Budget request, fiscal year 2020	232,568,000
Committee Recommendation	298,131,000
Change from enacted level	+69,131,000
Change from budget request	+65,563,000

WHD enforces Federal minimum wage, overtime pay, recordkeeping, and child labor requirements of the Fair Labor Standards Act. WHD also has enforcement and other administrative responsibilities related to the Migrant and Seasonal Agricultural Worker Protection Act, the Employee Polygraph Protection Act, the Family and Medical Leave Act, the Davis Bacon Act, and the Service Contract Act.

On April 9, 2019, the Subcommittee on Labor-HHS-Education-Related Agencies held a hearing entitled "Combatting Wage Theft: The Critical Role of Wage and Hour Enforcement," during which the Subcommittee heard from a panel of national experts how pay-related violations by employers cost workers billions of dollars annually. The Subcommittee discussed how WHD employs fewer investigators today than it did in 1948, despite the workforce having grown significantly in that time, and how the agency's lack of resources hinders efforts to make sure workers receive their promised wages. By the end of the hearing, there was bipartisan consensus that increased funding was needed to make sure WHD has the resources to carry out its statutory mission and protect workers. Panelists also discussed how agencies such as WHD can implement a strategic enforcement approach to use limited resources to sustainably change employer behavior.

To address these urgent needs, the Committee provides an increase of $69,131,000 over the fiscal year 2019 enacted level and $65,563,000 over the fiscal year 2020 budget request. The Committee directs WHD to hire at least 500 additional investigators with the increased funding. This increase would bring WHD to roughly 1,300 investigators, to reverse the impacts of years of flat funding that have eroded and reduced investigative capacity. The Committee also urges WHD to explore and expand strategic enforcement approaches to the agency's work to make the most of this increase.

When the Payroll Audit Independent Determination (PAID) program was first announced in March 2018, the Department pledged

to do an evaluation of it after six months before expanding it, which is why the Committee is concerned that the PAID program was expanded in October 2018 without any prior evaluation or knowledge of its effectiveness. The Department frequently cites the $304,000,000 in wages WHD recovered in fiscal year 2018 as a justification for its actions; however, the agency has not disclosed how much of that amount was recovered through the PAID program. In addition, the Department has not disclosed how much the PAID program costs to administer or how many businesses participate. To provide needed transparency, the Committee directs WHD to provide a report to the Committees on Appropriations within 30 days of enactment of this Act, and quarterly thereafter, detailing administrative expenditures on PAID, amounts recovered through PAID, and the number of businesses participating in PAID since March 2018.

The Committee is also deeply concerned with recently proposed regulatory rollbacks at WHD. The Department's proposed overtime rule would take away basic benefits from roughly three million workers that were protected under the 2016 overtime rule, which would have raised the overtime salary threshold to $47,476 with automatic annual increases. The proposed joint employer rule would limit corporate liability when contractors and franchisees commit wage theft. Further, efforts to revise and repeal protections for 16- and 17-year-olds in health care professions would put teenagers at risk of injury. Taken together, these proposals reflect a systematic effort to tip the scales to benefit powerful corporate interests at the expense of working people. The Committee strongly urges WHD to adjust course and abandon misguided proposals that stand in conflict with the agency's mission to protect workers.

OFFICE OF LABOR-MANAGEMENT STANDARDS

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$41,187,000
Budget request, fiscal year 2020	49,134,000
Committee Recommendation	40,187,000
Change from enacted level	−1,000,000
Change from budget request	−8,947,000

The Office of Labor Management Standards (OLMS) administers the Labor-Management Reporting and Disclosure Act, which establishes safeguards for union democracy and union financial integrity, and requires public disclosure reporting by unions, union officers, employees of unions, labor relations consultants, employers, and surety companies.

The Committee is aware that the Department chose to use transfer authority provided by the Committee to transfer $1,235,000 from the State Unemployment Insurance and Employment Service Operations appropriation to this account to support activities under the International Union Compliance Audit Program (I–CAP). The Committee acknowledges the Department's inconsistency in supporting enforcement efforts across the agency and believes this transfer reflects misplaced priorities. Therefore, the Committee recommendation includes a $1,000,000 decrease for OLMS below the 2019 enacted level and $8,947,000 below the fiscal year 2020 budg-

et request. The Committee rejects the budget request to provide funds that would support and expand I–CAP.

OFFICE OF FEDERAL CONTRACT COMPLIANCE PROGRAMS

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$103,476,000
Budget request, fiscal year 2020	103,576,000
Committee Recommendation	120,000,000
Change from enacted level	+16,524,000
Change from budget request	+16,424,000

The OFCCP ensures equal employment opportunity in the Federal contracting community through enforcement, regulatory work, outreach and education to workers and their advocates.

OFCCP is responsible, per Executive Order 11246 (EO 11246), for ensuring federal contractors and subcontractors take affirmative action to ensure that all individuals have an equal opportunity for employment, without regard to race, color, religion, sex, or national origin.

To support OFCCP's efforts to make sure contractors and subcontractors are adhering fully with EO 11246, the Committee provides an increase of $16,524,000 over the fiscal year 2019 enacted level, and $16,424,000 above the fiscal year 2020 budget request, to add personnel, expand enforcement, and ensure contactor and subcontractor compliance with reporting requirements.

In the fiscal year 2021 Congressional Budget Justification, the Committee directs OFCCP to detail the agency's compliance and enforcement efforts with regard to promoting equal opportunities for employment by contractors and subcontractors to the Federal government, including technology contractors and subcontractors.

OFFICE OF WORKERS' COMPENSATION PROGRAMS

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$117,601,000
Budget request, fiscal year 2020	117,782,000
Committee Recommendation	120,782,000
Change from enacted level	+3,181,000
Change from budget request	+3,000,000

The Office of Workers' Compensation Programs (OWCP) administers the Federal Employees' Compensation Act, the Longshore and Harbor Workers' Compensation Act, the Energy Employees Occupational Illness Compensation Program Act, and the Black Lung Benefits Act. These programs provide eligible injured and disabled workers and their survivors with compensation, medical benefits, and services including rehabilitation, supervision of medical care, and technical and advisory counseling.

The recommendation includes $118,609,000 in General Funds from the Treasury, $3,185,000 above the fiscal year 2019 enacted level and $3,000,000 above the fiscal year 2020 request, and $2,173,000 from the Special Fund established by the Longshore and Harbor Workers' Compensation Act.

The Committee continues to support the efforts of OWCP to reduce fraud and abuse related to the prescription of compound pharmaceuticals and opioids and encourages continued collaboration with the DOL–OIG on this critical issue.

SPECIAL BENEFITS

Appropriation, fiscal year 2019	$230,000,000
Budget request, fiscal year 2020	234,600,000
Committee Recommendation	234,600,000
Change from enacted level	+4,600,000
Change from budget request	– – –

These funds provide mandatory benefits under the Federal Employees' Compensation Act.

SPECIAL BENEFITS FOR DISABLED COAL MINERS

Appropriation, fiscal year 2019	$25,319,000
Budget request, fiscal year 2020	34,970,000
Committee Recommendation	34,970,000
Change from enacted level	+9,651,000
Change from budget request	– – –

These funds provide mandatory benefits to coal miners disabled by black lung disease, to their survivors and eligible dependents, and for necessary administrative costs.

The Committee recommends $34,970,000 for Special Benefits for Disabled Coal Miners. This amount is in addition to the $14,000,000 appropriated in fiscal year 2019 as an advance for the first quarter of fiscal year 2020. The total program level recommendation is $9,651,000 more than the fiscal year 2019 enacted level and the same as the fiscal year 2020 budget request.

The Committee recommendation also provides $14,000,000 as an advance appropriation for the first quarter of fiscal year 2021. These funds ensure uninterrupted payments to beneficiaries.

ADMINISTRATIVE EXPENSES, ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION FUND

Appropriation, fiscal year 2019	$59,098,000
Budget request, fiscal year 2020	59,846,000
Committee Recommendation	59,846,000
Change from enacted level	+748,000
Change from budget request	– – –

These funds provide mandatory benefits to eligible employees or survivors of employees of the Department of Energy (DOE); its contractors and subcontractors; companies that provided beryllium to DOE; atomic weapons employees who suffer from a radiation-related cancer, beryllium-related disease, or chronic silicosis as a result of their work in producing or testing nuclear weapons; and uranium workers covered under the Radiation Exposure Compensation Act.

BLACK LUNG DISABILITY TRUST FUND

Appropriation, fiscal year 2019	$328,182,000
Budget request, fiscal year 2020	365,240,000
Committee Recommendation	365,240,000
Change from enacted level	+37,058,000
Change from budget request	– – –

The Black Lung Disability Trust Fund, supported with mandatory funding, pays black lung compensation, medical and survivor benefits, and administrative expenses when no mine operator can be assigned liability for such benefits, or when mine employment ceased prior to 1970. The Black Lung Disability Trust Fund is financed by an excise tax on coal, reimbursements from responsible

mine operators, and short-term advances from the Treasury. The Emergency Economic Stabilization Act of 2008 authorized a restructuring of the Black Lung Disability Trust Fund debt and required that annual operating surpluses be used to pay down the debt until all remaining obligations are retired.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$557,787,000
Budget request, fiscal year 2020	557,533,000
Committee Recommendation	660,908,000
Change from enacted level	+103,121,000
Change from budget request	+103,375,000

The Occupational Safety and Health Act of 1970 established the OSHA to assure safe and healthy working conditions by setting and enforcing standards and by providing training, outreach, education and assistance.

Within the total for OSHA, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
Safety and Health Standards	$23,100,000
Federal Enforcement	246,383,000
Whistleblower Programs	18,809,000
State Programs	123,233,000
Technical Support	30,597,000
Federal Compliance Assistance	86,623,000
State Consultation Grants	64,687,000
Training Grants	12,690,000
Safety and Health Statistics	41,168,000
Executive Direction and Administration	13,618,000

The Committee is concerned that the number of OSHA investigations following a work-related fatality or catastrophe reached 929 investigations in fiscal year 2018, up almost 100 from the previous year, reflecting a ten-year high. OSHA enforcement is critical to preventing workplace tragedies from occurring, which is why the Committee is concerned that OSHA currently has the lowest number of health and safety inspectors in the agency's 48-year history.

Further, the Committee notes that under OSHA's current staffing levels, it would take the agency an average of 165 years to inspect each employer within its jurisdiction just one time. To restore OSHA capacity to staffing levels in fiscal year 2010, when the average frequency for inspections was once every 129 years, the Committee provides an increase of $103,121,000 over the fiscal year 2019 enacted level and $103,375,000 more than the fiscal year 2020 budget request. To ensure OSHA makes adequate progress in hiring additional inspectors, the Committee directs the agency to submit quarterly reports on new hiring and overall personnel numbers to the Committees on Appropriations. The report shall include the number of inspector vacancies and the number of on-board inspectors.

The Committee is deeply concerned with the Department's failure to comply with a provision of the *Department of Labor Appropriations Act, 2018* requiring the Secretary to reserve not less than $4,500,000 for Capacity Building Developmental grants in the

Susan Harwood Training Program. After the Committee inquired on the funding status, the Department informed the Committee that OSHA was unable to satisfy the funding requirement because it received an insufficient number of eligible, qualified applications to award $4,500,000 for Capacity Building Developmental grants. Instead, OSHA used funds for five noncompetitive awards. To provide increased transparency and oversight, the Committee modifies the bill's noncompetitive reporting requirement to capture those instances, like Harwood, where there are several smaller awards that individually do not meet the reporting threshold but do in total. Further, the Committee directs OSHA to publish Funding Opportunity Notices for fiscal year 2020 funds for the Susan Harwood Training Grant program no later than June 30, 2020.

Whistleblowers are this nation's eyes and ears, identifying and helping to control not only hazards facing workers at jobsites, but also practices that endanger the public's health, safety, or well-being. According to OSHA's own data, since fiscal year 2014, the number of whistleblower investigators has declined 24 percent while the number of complaints has grown by 29 percent, and in fiscal year 2018, the backlog of cases has grown to 2,540 pending cases. To assure that claims are processed in a timely manner, the Committee directs OSHA to maintain all current regional supervisory positions in the whistleblower program.

The Committee notes it is OSHA's responsibility under the law to approve and monitor State-run OSHA plans. If the agency removes on the ground oversight, it will make it increasingly difficult for OSHA to effectively oversee State programs. OSHA regional and area offices work directly with States to set inspection goals, taking into account staffing and funding levels in each State. Regional and area officials review State-run program performance reports and meet with State officials to monitor their progress toward meeting their inspection goals. OSHA's regions also conduct reviews of each State-run program called Federal Annual Monitoring Evaluation reviews. Removing this on the ground oversight would have significant negative consequences for worker safety. Therefore, the Committee directs OSHA to maintain all regional full-time equivalent staff that monitor State plans. Within 90 days of enactment of this Act, and every six months thereafter, OSHA shall report staffing levels for those monitoring State plans to the Committees on Appropriations.

In February of 2019, the GAO published a report on safety and health records of Department of Defense (DoD) contractors that found that among the sample of contractors they studied, 80 percent of DoD contractors inspected by OSHA had received a citation for an OSHA violation, and that some involved serious worker injuries or fatalities. The report also found that some contractors continued to receive contracts after receiving OSHA citations for serious workplace safety and health violations. Of great concern, GAO also found that the DoD contracting offices did not know how to access and use the data on OSHA's website to learn about safety and health violations or severe injuries of prospective or current contractors. Further, GAO found that the incidence of OSHA violations among all inspected companies with DoD contracts cannot be determined because "OSHA does not require its staff to obtain and enter a corporate identification number in its inspection data, which is

needed to match contracting data to inspection data." To educate DoD procurement officers on how to use the OSHA website to find citation and other records, the Committee directs OSHA, in consultation with DoD, to develop a webinar for DoD procurement officers on how to use OSHA's website to find OSHA violations and Severe Injury Reports. This webinar shall be developed and provided to DoD within 180 days of enactment of this Act and shall be sent to the Committees on Appropriations. In addition, within 360 days of enactment of this Act, the Committee directs OSHA compliance officers to gather the Employee Identification Number from all inspections of worksites with more than 20 employees.

The Committee is concerned that it does not receive information about how much OSHA spends on its Voluntary Protection Programs (VPP); therefore, within 180 days of enactment of this Act, the Committee directs OSHA to submit to the Committees on Appropriations how much was spent on VPP annually since fiscal year 2015. In addition, OSHA shall include VPP spending information in its fiscal year 2021 Congressional Budget Justification. To make sure there is adequate funds control within VPP, the Committee recommendation includes new bill language allowing not more than $3,500,000 for VPP.

The Committee recognizes the challenge of ensuring adequate enforcement in remote geographical areas, such as the Pacific territories, and that there have been worker fatalities and injuries in areas where there is no permanent enforcement presence. The Committee encourages OSHA to ensure compliance safety and health officers are adequately serving these territories and to provide an assessment of need for areas with no permanent enforcement presence in its fiscal year 2021 Congressional Justification.

The Committee is deeply concerned that OSHA is failing to move forward to develop and issue needed standards on major safety and health problems. One issue of particular concern is workplace violence, a serious and growing problem that has reached epidemic levels. Workplace violence is now the third leading cause of death and is responsible for nearly 30,000 serious injuries every year. Nurses, medical assistants, emergency responders and social workers face some of the greatest threats, suffering more than 70 percent of all workplace assaults. Women workers are at particular risk, suffering two out of every three serious workplace violence injuries. In January 2017, OSHA committed to developing and issuing a workplace violence standard, but the agency has not yet completed a required small business review, and there is no estimated date for the issuance of a proposed or final rule. The Committee believes issuing a workplace violence standard to protect workers in health care and social services should be a top priority for the Department. In order to monitor the agency's progress on this important rule, the Committee directs OSHA to brief the Committees on Appropriations, within 90 days of enactment of this Act, on a schedule for moving this rule to completion, including the dates on which a proposed rule and final rule will be issued.

Although occupational noise is a leading cause of hearing loss, which, in turn, is one of the most commonly recorded occupational illnesses, the current OSHA Noise Standard for occupational noise has not been updated since its inception in 1983. Accordingly, to better protect U.S. employees and reduce noise-induced hearing

loss, OSHA should explore updating the more than 35-year old standard to the level currently required by the DoD and many U.S. employers.

The Committee strongly urges OSHA not to revoke ancillary provisions from the 2017 final rule limiting exposure to beryllium that protect workers in shipyard and construction industries. Such an effort would reflect the first time OSHA has proposed to weaken a standard protecting workers against a known human carcinogen, and it would leave construction and shipyard workers vulnerable to life-threatening beryllium-related diseases.

MINE SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$373,816,000
Budget request, fiscal year 2020	376,043,000
Committee Recommendation	417,290,000
Change from enacted level	+43,474,000
Change from budget request	+41,247,000

The Mine Safety and Health Administration (MSHA) enforces the Federal Mine Safety and Health Act in underground and surface coalmines and metal/non-metal mines.

The Committee notes MSHA's budget has been frozen over the past six years, which has eroded the agency's capacity to protect mine workers. To restore MSHA's capacity, the Committee provides an increase of $43,474,000 over the fiscal year 2019 enacted level and $41,247,000 more than the fiscal year 2020 budget request. This increase will support MSHA's enforcement of the 2014 respirable dust rule and expanded monitoring of operator compliance with its existing silica rule. In addition, the Committee strongly encourages MSHA to develop a more protective silica monitoring standard.

The Committee continues bill language designating up to $2,000,000 for mine rescue recovery activities, and provides for the retention of fees up to $2,499,000 for the testing and certification of equipment. The Committee includes $10,537,000 for State assistance training grants.

The Committee is concerned by MSHA's proposal to merge the Coal Mine Safety and Health budget activity with the Metal and Nonmetal Mine Safety and Health budget activity. Given the differences in complex safety and health issues between both categories of inspections, the Committee is concerned that a merger could compromise MSHA's mission and make workers less safe. Therefore, the Committee recommendation does not consolidate these two activities as proposed in the fiscal year 2020 budget request.

BUREAU OF LABOR STATISTICS

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$615,000,000
Budget request, fiscal year 2020	655,000,000
Committee Recommendation	675,800,000
Change from enacted level	+60,800,000
Change from budget request	+20,800,000

The Bureau of Labor Statistics (BLS) is an independent national statistical agency that collects, processes, analyzes, and disseminates essential economic data to the Congress, Federal agencies, State and local governments, businesses, and the public. Its principal surveys include the Consumer Price Index and the monthly unemployment series.

The Committee recommendation includes $610,800,000 from the General Fund of the Treasury and $65,000,000 from the Employment Security Administration Account in the Unemployment Trust Fund.

Within the total for BLS, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
Employment and Unemployment Statistics	$237,900,000
Labor Market Information	65,000,000
Prices and Cost of Living	222,900,000
Compensation and Working Conditions	88,400,000
Productivity and Technology	14,200,000
Executive Direction and Staff Services	47,400,000

The Committee is concerned that a decade of flat funding has left BLS in critical condition. Therefore, the Committee provides an increase of $60,800,000 over the fiscal year 2019 enacted level, and $20,800,000 over the fiscal year 2020 budget request, to make up for the loss of purchasing power and to take full advantage of advances in statistical methods to produce the high-quality statistics required for a thriving, 21st century economy. Specifically, the Committee direct BLS to spend $40,000,000 of the total increase to support the following essential investments:

- Modernize the Consumer Expenditure Survey and provide robust data to support the Supplemental Poverty measure;
- Provide an annual supplement to the Current Population Survey to allow for collection of data on contingent and alternative work arrangements every two years and data on other topics related to the labor force in the alternate years, including an occasional veterans supplement;
- Expand Job Openings and Labor Turnover Survey to provide greater industry detail and State-level data;
- Modernize Industrial Price and Import/Export Program systems;
- Modernize Quarterly Census of Employment and Wages systems for data collection and communication with States;
- Modernize infrastructure for BLS public internet and public database;
- Continue research and work toward a pilot test of a new Survey of Employer Provided Training;
- Continue research and work toward a pilot test of a quick-response employer survey (either Annual Refiling Survey or Employment Cost Index platform);
- Add a second Electronic Data Collection Facility to expand electronic collection and improve resilience; and,
- Invest in staff development, cybersecurity, and other computationally intensive or IT capacity related upgrades.

In addition, the Committee provides $10,000,000 for a new youth cohort for the National Longitudinal Survey of Youth (NLSY). The

Committee notes that the current NLSY 1979 and NLSY 1997 cohorts cannot provide information about teens and young adults under the age of 25, as they are entering the labor market—leaving critical gaps in data about the new generation of young workers. By establishing a new cohort, BLS will be able to better produce timely and relevant data on the U.S. labor workforce.

Furthermore, the Committee is aware of the development of artificial intelligence and encourages BLS to examine this trend's impact on the economy.

Finally, the Committee provides $10,000,000 to support BLS' eventual headquarters move.

OFFICE OF DISABILITY EMPLOYMENT POLICY

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$38,203,000
Budget request, fiscal year 2020	27,000,000
Committee Recommendation	38,500,000
Change from enacted level	+297,000
Change from budget request	+11,500,000

Office of Disability Employment Policy provides policy guidance and leadership to eliminate employment barriers to people with disabilities.

The Committee recommendation is $297,000 above the fiscal year 2019 enacted level and $11,500,000 above the fiscal year 2020 budget request.

DEPARTMENTAL MANAGEMENT

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$338,064,000
Budget request, fiscal year 2020	266,866,000
Committee Recommendation	382,939,000
Change from enacted level	+44,875,000
Change from budget request	+116,073,000

The Departmental Management appropriation provides funds for the staff responsible for Departmental operations, management, and policy development.

The recommendation includes $382,631,000 from the General Fund of the Treasury, $44,875,000 above the fiscal year 2019 enacted level and $116,073,000 above the fiscal year 2020 budget request, and $308,000 from the Employment Security Administration Account in the Unemployment Trust Fund.

Within the total for Departmental Management, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
Program Direction and Support	$30,250,000
Departmental Evaluation	8,040,000
Legal Services	128,374,000
International Labor Affairs	122,125,000
Administration and Management	29,004,000
Adjudication	35,000,000
Women's Bureau	17,750,000
Civil Rights Activities	6,880,000
Chief Financial Officer	5,516,000

Of the $122,125,000 recommended for the International Labor Affairs Bureau (ILAB), the Committee directs the Secretary to allocate not less than $36,000,000 in grants to build the capacity of countries to enforce labor rights to promote a more level playing field for workers in the United States, including as a priority Mexico, while maintaining existing grant funding for combatting child labor.

The Committee is concerned by a GAO report, which found that limited resources have prevented more proactive monitoring of trade partner compliance under 14 trade agreements with 20 countries, as well as monitoring of trade preference programs with 120 countries. In response, the Committee directs ILAB to provide an increase of $3,500,000 over fiscal year 2019 to the Office of Trade and Labor Affairs (OTLA) to fund an additional 20 U.S.-based full-time equivalent employees to increase monitoring and enforcement activities, and directs ILAB to spend an increase of $2,500,000 to fund no fewer than five additional labor attaches in critical U.S. Embassies to increase field-based and international monitoring and labor compliance facilitation, including two in Mexico and one each in Bangladesh, Vietnam, and Geneva, Switzerland, for engagement with the International Labor Organization. In addition, ILAB is directed to continue its work on three key reports including DOL's Findings on the Worst Forms of Child Labor; the List of Goods Produced by Child Labor or Forced Labor; and the List of Products Produced by Forced or Indentured Child Labor.

The Committee is also concerned with violence and threats shown towards activists around the world, including gender-based violence targeted towards women activists, particularly in nations with which we have trade agreements with enforceable labor and environmental protections. The Committee urges ILAB to more actively engage with trade partner nations to end these human rights violations so as to better comport with the labor provisions of trade agreements.

Of the $17,750,000 appropriated to the Women's Bureau, the Committee provides $4,994,000 for the Women in Apprenticeship and Nontraditional Occupations (WANTO) program, an increase of $4,000,000 over fiscal year 2019. The Committee rejects the fiscal year 2020 budget request's proposal to eliminate WANTO. This program helps employers and labor unions recruit, train, and retain women for nontraditional employment opportunities. These resources are essential in helping women overcome traditional barriers to entry and supporting women's full participation in the labor force.

The Committee directs the Department to submit its annual Operating Plan to the Committees on Appropriations within the 45-day statutory deadline.

There are concerns about the breakdown of the normal flow of information from some areas of the Department to the Committee. The Committee expects the Department to correct these shortcomings. If no improvement is made, the Committee will evaluate the resources spent on the offices and staff involved in the unacceptable delays regarding the transmission of information to the Committee and whether the resources are better allocated to other areas of the bill.

The Committee understands that, as the largest advertiser in the U.S., the Federal government should work to ensure fair access to its advertising contracts for small disadvantaged businesses and businesses owned by minorities and women. The Committee directs the Department to include the following information in its fiscal year 2021 budget justification: Expenditures for fiscal year 2019 and expected expenditures for fiscal years 2020 and 2021, respectively, for (1) all contracts for advertising services; and (2) contracts for the advertising services of (I) socially and economically disadvantaged small business concerns (as defined in section 8(a)(4) of the Small Business Act (15 U.S.C. 637(a)(4)); and (II) women- and minority-owned businesses.

The Committee directs the Department to provide a report not later than 30 days after the conclusion of each quarter detailing the number of full-time equivalent employees and attrition by principal office and appropriations account.

The Committee directs the Department to provide a report to the Committees on Appropriations within 120 days of enactment of this Act on the number of full-time equivalent employees and funds obligated for personnel, training, equipment and travel to provide security for the Secretary and others covered under applicable security detail provisions within this Act for fiscal years 2018 and 2019. In addition, the Department shall submit a report to the Committees reflecting projected costs for fiscal years 2020 and 2021 in the fiscal year 2021 Congressional Budget Justification.

The Committee supports targeted investments in impoverished areas, particularly in persistent poverty counties and in other high-poverty census tracts. To understand how anti-poverty programs funded through the Department are serving these particular areas, the Committee directs the Department to submit a report to the Committees on Appropriations on the percentage of funds allocated by such programs in fiscal years 2017, 2018 and 2019 and estimates for fiscal year 2020 to areas serving individuals living in persistent poverty counties, as defined as a county that has had 20 percent or more of its population living in poverty over the past 30 years, as measured by the 1990 and 2000 decennial censuses and the most recent Small Area Income and Poverty estimates, and high-poverty areas, as defined as any census tract with a poverty rate of at least 20 percent as measured by the 2013–2017 5-year data series available from the American Community Survey of the Census Bureau. The Department shall report this information to the Committees within 90 days of such data being available and provide a briefing to the Committees not later than 180 days of enactment of this Act on how the Department is carrying out this directive.

The Committee is supportive of efforts by the Department to consider evidence of effectiveness in grant competitions.

The Committee continues to support efforts to improve customer service in accordance with Executive Order 13571—Streamlining Service Delivery and Improving Customer Service. The Committee directs the Secretary to develop standards to improve customer service and incorporate the standards into the performance plans required under 31 U.S.C. 1115.

The Committee directs the Department to comply with title 31 of the United States Code, including the development of organiza-

tional priority goals and outcomes such as performance outcome measures, output measures, efficiency measures, and customer service measures.

VETERANS EMPLOYMENT AND TRAINING

Appropriation, fiscal year 2019	$300,041,000
Budget request, fiscal year 2020	306,041,000
Committee Recommendation	316,341,000
Change from enacted level	+16,300,000
Change from budget request	+10,300,000

The recommendation includes $60,000,000 from the General Fund of the Treasury and $256,341,000 from the Employment Security Administration Account in the Unemployment Trust Fund.

The Veterans Employment and Training (VETS) program serves America's veterans and separating service members by preparing them for meaningful careers, providing employment resources and expertise, and protecting their employment rights.

Within the total for VETS, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
State Administration Grants	$180,000,000
Transition Assistance Program	29,379,000
Federal Administration	43,548,000
Veterans Employment and Training Institute	3,414,000
Homeless Veterans Reintegration Program	60,000,000

The Committee recommendation includes $29,379,000 for the Transition Assistance Program, which is $6,000,000 more than the fiscal year 2019 enacted level and the same as the fiscal year 2020 budget request. The additional funding will enhance the quality of employment support services for transitioning service members and allow VETS to develop and implement a course curriculum to help military spouses overcome the challenges they face related to employment and career development.

The Committee includes $60,000,000 for the Homeless Veterans Reintegration Program to further support the needs of veterans experiencing homelessness.

The Committee includes $500,000 to support the HIRE Vets Medallion Program authorized by the Honoring Investments in Recruiting and Employing American Military Veterans Act of 2017.

The Committee recommendation includes $300,000 within Federal Administration to establish a Disabled Veteran Program (DVP) to address the high unemployment and low labor force participation rate of veterans with service-connected and non-service-connected disabilities. The DVP will help increase employment and advancement opportunities for veterans with disabilities by working with federal, state, and private partners to promote the hiring of veterans with disabilities, improve coordination of available employment services and supports, and to identify and share employment best practices for hiring, retaining, and advancing veterans with disabilities in the workforce.

INFORMATION TECHNOLOGY MODERNIZATION

Appropriation, fiscal year 2019	$23,269,000
Budget request, fiscal year 2020	37,000,000
Committee Recommendation	37,000,000
Change from enacted level	+13,731,000
Change from budget request	– – –

Information Technology (IT) Modernization provides a dedicated source of funding for Department-wide IT modernization projects together with funding through the Department's Working Capital Fund.

The Committee provides an increase of $13,731,000 over the fiscal year 2019 enacted level, and the same level as the fiscal year 2020 budget request, to support Department-wide IT initiatives. While the Committee is supportive of the Department's efforts to seek efficiencies and meet IT needs within a longer-term plan, the Committee rejects the Department's requests for additional transfer authority.

OFFICE OF INSPECTOR GENERAL

Appropriation, fiscal year 2019	$89,147,000
Budget request, fiscal year 2020	90,121,000
Committee Recommendation	96,121,000
Change from enacted level	+6,974,000
Change from budget request	+6,000,000

The DOL–OIG conducts audits of Department programs and operations in order to determine that they comply with the applicable laws and regulations, that they use resources effectively, and that they are achieving their intended results.

The recommendation includes $90,461,000 from the General Fund of the Treasury, $6,974,000 above the fiscal year 2019 enacted level and $6,000,000 above the fiscal year 2020 budget request, and $5,660,000 from the Employment Security Administration Account in the Unemployment Trust Fund.

The Committee supports the DOL–OIG efforts to reduce fraud and abuse in the Workers' Compensation programs related to the prescription of compound pharmaceuticals and opioids, among other areas.

GENERAL PROVISIONS

Sec. 101. The Committee continues a provision to prohibit the use of Job Corps funds for the salary of an individual at a rate in excess of Executive Level II.

(TRANSFER OF FUNDS)

Sec. 102. The Committee modifies a provision providing the Secretary with the authority to transfer up to one percent of discretionary funds between appropriations, provided that no appropriation is increased by more than three percent by any such transfer.

Sec. 103. The Committee continues a prohibition on use of funds to purchase goods that are in any part produced by indentured children.

Sec. 104. The Committee continues a provision related to grants made from funds available to the Department under the American Competitiveness and Workforce Improvement Act.

Sec. 105. The Committee continues a provision to prohibit recipients of funds provided to the Employment and Training Administration from using such funds for the compensation of any individual at a rate in excess of Executive Level II.

(TRANSFER OF FUNDS)

Sec. 106. The Committee continues a provision providing the Secretary with the authority to transfer funds made available to the Employment and Training Administration to Program Administration for technical assistance and program integrity activities.

(TRANSFER OF FUNDS)

Sec. 107. The Committee continues a provision allowing up to 0.75 percent of discretionary appropriations provided in this Act for specific Department of Labor agencies to be used by the Office of the Chief Evaluation Officer for evaluation purposes consistent with the terms and conditions in this Act applicable to such office.

Sec. 108. The Committee modifies a provision relating to surplus property and apprenticeship programs.

Sec. 109. The Committee includes a new provision providing an additional year for the expenditure of funds for unemployment insurance projects carried out in fiscal years 2015 through 2019 by State consortia.

Sec. 110. The Committee continues a provision relating to the Secretary's security detail.

Sec. 111. The Committee modifies a provision relating to the Treasure Island Job Corps Center.

Sec. 112. The Committee includes a new provision ensuring that the proceeds of any sale of a Job Corps center are returned to the program under 158(g) of the WIOA.

TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES

HEALTH RESOURCES AND SERVICES ADMINISTRATION

Appropriation, fiscal year 2019	$6,843,503,000
Budget request, fiscal year 2020	5,841,352,000
Committee Recommendation	7,316,109,000
Change from enacted level	+472,606,000
Change from budget request.	+1,474,757,000

The Health Resources and Services Administration (HRSA) supports programs that provide health services to disadvantaged, medically underserved, and special populations; decrease infant mortality rates; assist in the education of health professionals; and provide technical assistance regarding the utilization of health resources and facilities.

PRIMARY HEALTH CARE

Appropriation, fiscal year 2019	$1,626,522,000
Budget request, fiscal year 2020	1,626,522,000
Committee Recommendation	1,676,522,000
Change from enacted level	+50,000,000
Change from budget request.	+50,000,000

Health Centers

The Committee recommends $1,676,522,000 for the Health Centers program, which is $50,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

The Committee includes bill language providing up to $120,000,000 for the Federal Tort Claims Act program, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Domestic HIV Initiative.—The Committee includes $50,000,000 within the Health Centers program for the first year of the initiative to reduce the transmission of HIV by 90 percent over the next ten years. Funds will be distributed to Health Centers in high-need jurisdictions to increase the use of pre-exposure prophylaxis (PrEP) among people at high risk for HIV transmission.

Behavioral Interventions for Pain Management.—In addressing the opioid epidemic, the Committee recognizes the growing need for highly trained professionals to deliver evidence-based behavioral interventions for pain management. The Committee encourages HRSA to invest in programs that expand access to treatment for substance use disorders in Federally-Qualified Health Centers (FQHCs) and requests a report within 180 days of enactment of this Act about continued gaps in the behavioral health workforce and whether graduate-level health service psychologists in FQHCs could improve health outcomes.

Health Professional Shortage Area.—The Committee directs HRSA to submit a report within 180 days of enactment of this Act examining the impact of rotating residents on the calculation of health care providers' Health Professional Shortage Area (HPSA) scores.

Improving Integration of Health Centers and Home Visiting.—The Committee supports HRSA's continued promotion of expanded partnerships between Health Centers and evidence-based home visiting programs to improve maternal and child health outcomes in high-need communities. The Committee appreciates the Bureau's efforts to identify how these partnerships may fit within Health Centers' scope of practice, recognizing the ways in which home visiting programs can provide cost-effective benefits such as care coordination and service referral that help Health Centers achieve community health goals.

Native Hawaiian Health Care Program.—The Committee provides $19,000,000 for the Native Hawaiian Health Care Program, an increase of $1,500,000 above the fiscal year 2019 enacted level. The Native Hawaiian Healthcare Systems helps improve the health status of Native Hawaiians by making health education, health promotion, disease prevention, and Native Hawaiian traditional healing services available.

Free Clinics Medical Malpractice

The Committee recommends $1,000,000 for carrying out responsibilities under the Federal Tort Claims Act, the same as fiscal year 2019 enacted level and the fiscal year 2020 budget request. The program provides medical malpractice coverage to individuals involved in the operation of free clinics to expand access to health care services to low-income individuals in medically underserved areas.

HEALTH WORKFORCE

Appropriation, fiscal year 2019	$1,096,695,000
Budget request, fiscal year 2020	304,714,000
Committee Recommendation	1,234,942,000
Change from enacted level	+138,247,000
Change from budget request	+930,228,000

Health Professional Staffing Shortages.—The Committee recognizes the current and growing shortage of primary care physicians, psychiatrists, behavioral health specialists, and geriatric medical professionals. The Committee requests a report within 120 days of enactment of this Act on ways HRSA can support efforts to recruit, train, and support health professionals in these fields, including existing workforce training opportunities and recommendations to address health professional staffing shortages.

Rural Health Workforce.—The Committee encourages HRSA to explore opportunities for collaboration and partnership with schools and programs that offer rural residencies, rural health certificates, or otherwise recognized rural curriculum in order to increase the placement of health care providers and professionals with rural health training in HRSA Health Workforce Programs.

Health Professions

The Committee recommends $854,942,000 for the Health Professions programs, which is $108,247,000 above the fiscal year 2019 enacted level and $550,228,000 above the fiscal year 2020 budget request. The Health Professions programs support grants for the development of the health workforce in fields challenged by a high need and insufficient supply of health professionals. Given that colleges and universities serve the dual role of training students and carrying out a majority of Federally-funded biomedical research, the Committee believes that they serve as an ideal setting to expose future clinicians to the evidence base that underlies their intended profession.

National Health Service Corps

The Committee includes $120,000,000 for the National Health Service Corps (NHSC), $15,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. NHSC supports qualified health care providers dedicated to working in underserved communities in urban, rural, and tribal areas through scholarships and loan repayment assistance.

The Committee directs HRSA to examine the application processes and eligibility requirements for both NHSC recruits and provider locations, including the HPSA qualification and scoring. The Committee requests a report within 120 days of enactment of this Act with recommendations on how the NHSC program, including the HPSA application and scoring process, may be modified to increase recruitment and field strength as well as diversify provider sites.

National Health Service Corps Loan Repayment Program.—The Committee encourages HRSA to conduct a review of the NHSC Loan Repayment Program with a specific focus on the qualifications for the program and whether those qualifications, including designation as an HPSA, alone capture candidates that effectively address the health care needs of the community.

Centers of Excellence

The Committee includes $25,000,000 for Centers of Excellence (COE), $1,289,000 above the fiscal year 2019 enacted level and $25,000,000 above the 2020 budget request. The Committee commends the Bureau of Health Workforce (BHW) on the continued implementation of COE and notes that partnerships with HRSA have allowed minority health professions institutions to address the need for diverse and culturally competent health professionals that contribute to the healthcare needs of underrepresented populations. The Committee asks that HRSA report within 120 days of enactment of this Act on the achievements and challenges of COE and the contribution COE makes to workforce development.

Health Careers Opportunity Program

The Committee includes $20,000,000 for the Health Careers Opportunity Program (HCOP), $5,811,000 above the fiscal year 2019 enacted level and $20,000,000 above the fiscal year 2020 budget request. The Committee notes that HCOPs have assisted students from minority and economically disadvantaged backgrounds to enter the health professions for decades by focusing on student development, retention, matriculation, and graduation. The Committee encourages BHW to continue its improvement of the diversity and distribution of needed health care professionals through National Health Career Opportunity Program Academies (NHCOPA) and report back to Congress within 120 days of enactment of this Act on the progress of the NHCOPA pipeline.

Faculty Loan Repayment

The Committee includes $1,190,000 for Faculty Loan Repayment, the same as the fiscal year 2019 enacted level and $1,190,000 above the fiscal year 2020 budget request.

Scholarships for Disadvantaged Students

The Committee includes $53,470,000 for Scholarships for Disadvantaged Students, $4,500,000 above the fiscal year 2019 enacted level and $53,470,000 above the fiscal year 2020 budget request. These scholarships provide financial stability to disadvantaged and non-traditional students and are an important resource to the influx of eligible students going into the health professions. Within this program, the Committee directs $2,500,000 to be set aside to educate midwives to address the national shortage of maternity care providers, and specifically the lack of adequate diversity in the maternity care workforce.

Primary Care Training and Enhancement

The Committee includes $48,924,000 for Primary Care Training and Enhancement, the same as the fiscal year 2019 enacted level and $48,924,000 above the fiscal year 2020 budget request.

Oral Health Training

The Committee recommends $40,673,000 for Oral Health Training programs, the same as the fiscal year 2019 enacted level and $40,673,000 above the fiscal year 2020 budget request. These programs serve to increase the number of medical graduates from minority and disadvantaged backgrounds and to encourage students

and residents to choose primary care fields and practice in underserved urban and rural areas.

Within the funds provided, the Committee includes not less than $12,000,000 for General Dentistry Programs and not less than $12,000,000 for Pediatric Dentistry programs. The Committee continues to support awards with a preference for pediatric dentistry faculty supervising dental students or residents and providing clinical services in dental schools, hospitals, and community-based affiliated sites.

Dental Faculty Loan Repayment.—Within the funds provided, the Committee provides not less than $2,000,000 for the Dental Faculty Loan Repayment program authorized by section 748 of the Public Health Service Act. The Committee directs HRSA to provide continuation funding for such grants initially awarded in fiscal years 2016, 2017, 2018, and 2019 and initiate new awards for eligible programs in general dentistry providing clinical services in dental clinics located in dental schools, hospitals, and community-based affiliated sites.

Area Health Education Centers

The Committee provides $41,250,000 for the Area Health Education Centers (AHEC) program, $2,000,000 above the fiscal year 2019 enacted level and $41,250,000 above the fiscal year 2020 budget request. AHEC facilitates the diversity of the healthcare workforce; increases access to healthcare; delivers vital patient care; reduces health disparities; improves health outcomes; and increases revenue by creating new jobs and services. The AHEC programs and centers play a critical national role in addressing health care workforce shortages, particularly those in primary care through an established infrastructure. The AHEC Program grantees support the recruitment and retention of physicians, students, faculty and other primary care providers in rural and medically underserved areas by providing local, community-based, interdisciplinary primary care training.

The Committee encourages HRSA to support AHEC oral health projects that establish primary points of service and address the need to help patients find treatment outside of hospital emergency rooms. The Committee encourages HRSA to work with programs that have already been initiated by some State dental associations to refer emergency room patients to dental networks.

Geriatrics Program

The Committee provides $43,384,000 for the Geriatrics Workforce Enhancement Program (GWEP), $2,647,000 above the fiscal year 2019 enacted level and $43,384,000 above the fiscal year 2020 budget request. This program provides grants for training across the provider continuum to integrate geriatrics and primary care delivery systems.

Mental and Behavioral Health Education Training Programs

The Committee includes $36,916,000 for Mental and Behavioral Health Education Training Programs (MBHET), the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides grants to institutions of higher edu-

cation and accredited training programs to recruit and train professionals and faculty in areas of mental and behavioral health.

Graduate Psychology Education.—Within the total for MBHET, the Committee includes $18,000,000 for the inter-professional Graduate Psychology Education (GPE) Program to increase the number of health service psychologists trained to provide integrated services to high-need, underserved populations in rural and urban communities.

Behavioral Health Workforce Education and Training

The Committee includes $85,000,000 for the Behavioral Health Workforce Education and Training Grant Program (BHWET), $10,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program establishes and expands internships or field placement programs in behavioral health serving populations in rural and medically underserved areas.

Peer Support Specialists in the Opioid Use Disorder Workforce.—Within the total for BHWET, the Committee includes $39,800,000, an increase of $10,000,000 above the fiscal year 2019 enacted level, for community-based experiential training for students preparing to become peer support specialists and other types of behavioral health-related paraprofessionals. This program provides training in the provision of opioid use disorder (OUD) and other substance use disorder (SUD) prevention, treatment, and recovery services in high-need and high-demand areas. The program will expand and improve access to quality treatment and foster an integrated approach to address OUD and other SUD treatment emphasizing the role of the family and lived experience of the consumer through academic, community, and non-traditional community organization partnerships.

Loan Repayment Program for Substance Use Disorder Treatment Workforce

The Committee includes $25,000,000 to establish the Loan Repayment Program for Substance Use Disorder Treatment Workforce, which was authorized under section 7071 of the SUPPORT for Patients and Communities Act (P.L. 115–271). This program will address shortages in the substance use disorder workforce by providing for the repayment of education loans for individuals working in a full-time SUD treatment job that involves direct patient care in either a Mental Health Professional Shortage Area or a county where the overdose death rate exceeds the national average.

Mental and Substance Use Disorder Workforce Training Demonstration

The Committee includes $10,000,000 to establish the Mental and Substance Use Disorder Workforce Training Demonstration, which was authorized under section 9022 of the 21st Century Cures Act (P.L. 114–255). The Committee recognizes that treating the over 20 million Americans with a substance use disorder (SUD) will require training that is too often lacking in our nation's current addiction workforce. HRSA has projected a workforce shortage of 250,000 providers in the SUD/mental health field by 2025. This program will make grants to institutions including but not limited to med-

ical schools and FQHCs to support training for medical residents and fellows in psychiatry and addiction medicine, as well as nurse practitioners, physician assistance, and others, to provide SUD treatment in underserved communities.

Workforce Information and Analysis

The Committee includes $5,663,000 for Workforce Innovation and Analysis, the same as the fiscal year 2019 enacted level and $1,000,000 above the fiscal year 2020 budget request.

Public Health and Preventive Medicine Programs

The Committee includes $19,000,000 for Public Health and Preventive Medicine Training Grant Programs, $2,000,000 above the fiscal year 2019 enacted level and $19,000,000 above the fiscal year 2020 budget request. Within this total, the Committee provides an increase of $1,500,000 for the Preventive Medicine Residency Training Program and an increase of $500,000 for Public Health Training Centers.

Advanced Education Nursing

The Committee includes $77,585,000 for the Advanced Education Nursing Workforce Program, $3,004,000 above the fiscal year 2019 enacted level and $77,585,000 above the fiscal year 2020 budget request. This program provides traineeships and curriculum and faculty development to improve advanced nursing education and increase the number of qualified nurses in the primary care workforce.

The Committee continues to provide $8,000,000 to award grants for the clinical training of sexual assault nurse examiners to administer medical forensic examinations and treatments to victims of sexual assault in hospitals, health centers, and other emergency healthcare service provider settings.

Nurse Practitioner Residency and Fellowship Training Program.—The Committee includes an increase of $20,000,000 to establish or expand accredited community-based nurse practitioner residency programs to train postgraduate nurse practitioners (NPs) as primary care, behavioral health or other types of specialized health care providers. The Committee directs HRSA to give preference to FQHCs, as defined by section 1861(aa)(4) of the Social Security Act. The Committee is concerned the nation is unprepared for healthcare provider shortages and recognizes that training postgraduate NPs in FQHCs across the country will help to address this problem. Patients need expert primary care and behavioral health providers prepared to manage the social and clinical complexities experienced in FQHCs. A key focus of the program will be training and professional development in the integration of primary care and behavioral health. The program will train NPs to a model of care consistent with both National Academy of Medicine principles and the needs of our nation's most vulnerable populations.

Nursing Education, Practice, Quality, and Retention

The Committee includes $43,590,000 for the Nurse Education, Practice, Quality and Retention (NEPQR) Program, $1,677,000 above the fiscal year 2019 enacted level and $43,590,000 above the

fiscal year 2020 budget request. The NEPQR program supports academic, service, and continuing education projects to enhance nursing education, improve the quality of patient care, increase nurse retention, and strengthen the nursing workforce. The program focuses on exposing students to enhanced curriculum and meaningful clinical experience and training in medically underserved areas, so that they will be more likely to choose to work in these settings after graduation.

Nursing Workforce Diversity

The Committee includes $18,037,000 for the Nursing Workforce Diversity (NWD) program, $694,000 above the fiscal year 2019 enacted level and $18,037,000 above the fiscal year 2020 budget request. The NWD program supports stipends, scholarships, and a variety of pre-entry preparation, advanced entry preparation, and retention activities for students from disadvantaged backgrounds.

NURSE Corps Scholarship and Loan Repayment

The Committee includes $90,620,000 for NURSE Corps, $3,485,000 above the fiscal year 2019 enacted level and $7,485,000 above the fiscal year 2020 budget request.

Nursing Faculty Loan Program

The Committee includes $29,640,000 for the Nursing Faculty Loan Program, $1,140,000 above the fiscal year 2019 enacted level and $29,640,000 above the fiscal year 2020 budget request. This program makes grants to schools of nursing who in turn provide student loans to graduate-level nursing students to increase the number of qualified nurse faculty.

Children's Hospitals Graduate Medical Education

The Committee recommends $350,000,000 for the Children's Hospitals Graduate Medical Education (CHGME) Payment program, $25,000,000 above the fiscal year 2019 enacted level and $350,000,000 above the fiscal year 2020 budget request. The CHGME Payment program helps eligible hospitals maintain graduate medical education programs, which support the training of residents to care for the pediatric population and enhance the supply of primary care and pediatric medical and surgical subspecialties.

Medical Student Education

The Committee includes $30,000,000 to expand support to colleges of medicine at public universities located in the top quintile of States projected to have a primary care provider shortage. This is $5,000,000 above the fiscal year 2019 enacted level and $30,000,000 above the fiscal year 2020 budget request. The Committee directs HRSA to maintain existing eligibility criteria for the second year of grants for this program.

National Practitioner Data Bank

The Committee assumes $18,814,000 for the National Practitioner Data Bank, which is the same as the fiscal year 2010 enacted level and the fiscal year 2020 budget request.

MATERNAL AND CHILD HEALTH

Appropriation, fiscal year 2019	$926,789,000
Budget request, fiscal year 2020	783,200,000
Committee Recommendation	972,751,000
Change from enacted level	+45,962,000
Change from budget request	+189,551,000

Maternal and Child Health Block Grant

The Committee recommends $705,000,000 for the Maternal and Child Health Block Grant, $27,300,000 above the fiscal year 2019 enacted level and $44,300,000 above the fiscal year 2020 budget request. States use the block grant to improve access to care for mothers, children, and their families; reduce infant mortality; provide pre-and post-natal care; support screening and health assessments for children; and provide systems of care for children with special health care needs.

Special Projects of Regional and National Significance

The Committee continues bill language identifying a specific funding level for Special Projects of Regional and National Significance (SPRANS). The Committee provides the following within SPRANS:

Budget Activity	FY 2020 Committee
Set-aside for Oral Health	$5,250,000
Set-aside for Epilepsy	3,642,000
Set-aside for Sickle Cell Disease	3,000,000
Set-aside for Fetal Alcohol Syndrome	477,000

Adverse Childhood Experiences.—The Committee is aware that childhood trauma and toxic stress have been linked to negative health outcomes through adulthood, including higher rates of diabetes, stroke, depression, lapses in cognitive abilities, and developmental delays, suicide, and substance misuse, among others. The Committee recognizes that promoting awareness to parents and health care providers around the impact of trauma on the developing brain and the importance of encouraging supportive and responsive relationships with caring adults as two promising strategies. The Committee encourages the Maternal and Child Health Bureau (MCHB) to develop protocols to train professionals to screen, diagnose, and provide evidence-based interventions to individuals suffering from adverse childhood experiences such as child abuse and neglect, witnessing interpersonal violence, family substance abuse, family separation, parental divorce, parental loss, and mental illness, to promote developmental resiliency.

Alliance for Maternal Health Safety Bundles.—The Committee includes $5,000,000, an increase of $2,000,000 above the fiscal year 2019 enacted level, to expand implementation of the Alliance for Innovation on Maternal Health program's maternal safety bundles to all U.S. States, the District of Columbia, and U.S. territories, as well as tribal entities. Maternal safety bundles are a set of targeted and evidence-based best practices that, when implemented, improve patient outcomes and reduce maternal mortality and severe maternal morbidity.

Breastfeeding Services and Supplies.—The Committee recognizes that exclusivity and duration of breastfeeding confers meaningful clinical benefits for babies and mothers and saves health care costs. The Committee remains committed to improving breastfeeding rates across the country and understands that there may be risk factors during pregnancy and delivery that can impact a mother's ability to meet her own breastfeeding duration goals. The Committee urges HRSA, during the next review of the Women's Preventive Services Guidelines for breastfeeding services and supplies, to incorporate into the clinical and implementation considerations section of the guideline: evidence of the critical timeframe for breastfeeding initiation following delivery; and recommendations for assessing risk factors, initiating milk production and ensuring that women are able to build supply and sustain breastfeeding in the early post-partum period (as well as during the antenatal, perinatal, and the postpartum period) in both pre-term and term infants.

Children's Health and Development.—The Committee continues to provide $3,500,000 to continue efforts to promote systemic change that would positively impact the policy of child-health-related institutions and systems in States with high levels of childhood poverty.

Hemophilia Treatment Centers.—The Committee provides level funding for Hemophilia Treatment Centers. The Regional Hemophilia Network Program uses a regional infrastructure of hemophilia treatment centers to promote and improve the comprehensive care of individuals with hemophilia and related bleeding disorders or clotting disorders.

Infant-Toddler Court Teams.—The Committee includes $10,000,000 for the third year of a cooperative agreement to support research-based Infant-Toddler Court Teams to change child welfare practices to improve well-being for infants, toddlers, and their families. The Committee expects this increase of $7,000,000 above the fiscal year 2019 enacted level to: (1) build upon the work of sites established through the Quality Improvement Center for Research-based Infant Toddler Court Teams, including by providing training and technical assistance in support of such court teams' efforts across the country, and (2) support additional outreach sites to start a court team.

Maternal Mortality Disparities.—The Committee is concerned about the finding from the Centers for Disease Control and Prevention (CDC) that black women experience maternal mortality at nearly four times the rate of white women. Black maternal mortality rates in the U.S. are similar to rates in developing countries at 40 deaths per 100,000. The Committee includes $23,000,000, the same as the fiscal year 2019 enacted level, for State Maternal Health Innovation Grants that will establish demonstrations to implement evidence-based interventions to address critical gaps in maternity care service delivery and reduce maternal mortality. The demonstrations will be representative of the demographic and geographic composition of communities most affected by maternal mortality. The Committee encourages HRSA to work with States to collect comprehensive data associated with all pregnancy-associated and pregnancy-related deaths, regardless of the outcome of the pregnancy.

Pediatric Hospice Care.—The Committee understands the unique conditions surrounding pediatric hospice care and grief support for families including the need to support family members, the recognition that child death can have more intense and longer grieving periods, and the need for development of best practices for counseling, support, medication, and other factors impacting the end of life experience for children. The Committee provides $1,000,000 within SPRANS to work with experienced hospice providers which are not conflicted by decisions of whether to provide hospice or curative treatments in the hospital to children nearing the end of life to establish a pilot program aimed at developing best practices.

Set-aside for Oral Health.—The Committee includes $250,000 to continue demonstration projects to increase the implementation of integrating oral health and primary care practice. The projects should model the core clinical oral health competencies for non-dental providers that HRSA published and initially tested in its 2014 report, Integration of Oral Health and Primary Care Practice. The Committee expects the Chief Dental Officer to continue to direct the design, monitoring, oversight, and implementation of these projects.

Maternal and Child Health Programs

In addition to the Maternal and Child Health Block Grant, the MCHB supports several programs to improve the health of all mothers, children, and their families. These programs support activities that develop systemic mechanisms for the prevention and treatment of sickle cell disease; provide information and research on and promote screening of autism and other developmental disorders; provide newborn and child screening of heritable disorders; provide grants to reduce infant mortality and improve perinatal outcomes; fund States to conduct newborn hearing screening; and provide grants to improve existing emergency medical services.

Within the total for Maternal and Child Health Programs, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Sickle Cell Anemia Program	$7,000,000
Autism and Other Developmental Disorders	53,099,000
Heritable Disorders	22,000,000
Healthy Start	130,500,000
Universal Newborn Hearing	17,818,000
Emergency Medical Services for Children	22,334,000
Screening and Treatment for Maternal Depression	5,000,000
Pediatric Mental Health Access	10,000,000

Sickle Cell Anemia Demonstration Program

The Committee provides $7,000,000 for the Sickle Cell Anemia Demonstration Program, $2,545,000 more than the fiscal year 2019 enacted level and $7,000,000 more than the fiscal year 2020 budget request.

Autism and Other Developmental Disorders

The Committee recommends $53,099,000 for Autism and Other Developmental Disorders, $2,500,000 above the fiscal year 2019 enacted level and $53,099,000 above the fiscal year 2020 budget re-

quest. These programs seek to improve the health and well-being of children and adolescents with autism spectrum disorder and other developmental disabilities and to advance best practices for the early identification and treatment of autism and related developmental disabilities.

Leadership Education in Neurodevelopmental and Related Disabilities.—The Committee provides not less than $35,245,000 for the Leadership Education in Neurodevelopmental and Related Disabilities (LEND) program, an increase of $1,745,000 above the fiscal year 2019 enacted level. This funding will support the program's capacity to train professionals to screen, diagnose, and provide evidence-based interventions to individuals with autism spectrum disorder and other developmental disabilities as authorized by the Autism CARES Act (P.L. 113–157). This program provides advanced training to students and fellows from at least 12 disciplines in the identification, assessment, and treatment of children and youth with a wide range of developmental disabilities, including autism.

Heritable Disorders

The Committee provides $22,000,000 for the Heritable Disorders program, which is $5,617,000 above the fiscal year 2019 enacted level and $22,000,000 above the fiscal year 2020 budget request. This program supports activities that strengthen the newborn screening system to ensure infants born in every State receive rapid identification, early intervention, and potentially life-saving treatment.

Severe Combined Immune Deficiency.—Within the total amount for Heritable Disorders, the Committee provides $3,000,000, an increase of $1,000,000 above the fiscal year 2019 enacted level, for the third year of a grant to continue supporting wider implementation, education, and awareness of newborn screening for Severe Combined Immune Deficiency.

Healthy Start

The Committee recommends $130,500,000 for the Healthy Start program, $8,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The program provides grants to communities with high rates of infant mortality to support primary and preventive health care services for mothers and their infants.

Maternal Mortality.—The Committee recognizes the rising maternal mortality rate in the U.S. as a pressing public health issue. Analysis of maternal mortality review committee data indicates that over 60 percent of pregnancy-related deaths are preventable. The Committee includes $15,000,000, an increase of $3,000,000 above the fiscal year 2019 enacted level, for Healthy Start grantees to support nurse practitioners, certified nurse midwives, physician assistants, and other maternal-child advance practice health professionals within all program sites nationwide. Clinical staff will provide direct access to well-woman care and maternity care services to reduce barriers in access to maternity care and help address maternal health disparities among high-risk and underserved women. Clinical staff will also support health educators by conducting training on maternal early warning signs.

RYAN WHITE HIV/AIDS PROGRAM

Appropriation, fiscal year 2019	$2,318,781,000
Budget request, fiscal year 2020	2,388,781,000
Committee Recommendation	2,435,157,000
Change from enacted level	+116,376,000
Change from budget request	+46,376,000

The Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) program funds activities to address the care and treatment of persons living with HIV/AIDS who are either uninsured or underinsured and need assistance to obtain treatment. The program provides grants to States and eligible metropolitan areas to improve the quality, availability, and coordination of health care and support services to include access to HIV-related medications; grants to service providers for early intervention outpatient services; grants to organizations to provide care to HIV infected women, infants, children, and youth; and grants to organizations to support the education and training of health care providers.

Within the total for the Ryan White HIV/AIDS program, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
Emergency Assistance	$677,535,000
Comprehensive Care Programs	1,331,665,000
AIDS Drug Assistance Program	*912,017,000*
Early Intervention Program	207,567,000
Children, Youth, Women, and Families	76,047,000
AIDS Dental Services	13,296,000
Education and Training Centers	34,047,000
Special Projects of National Significance	25,000,000
Domestic HIV Initiative	70,000,000

Domestic HIV Initiative.—The Committee includes $70,000,000 within the Ryan White HIV/AIDS Program for the first year of an initiative to reduce the transmission of HIV by 90 percent over the next ten years. Funds will be distributed to high-need jurisdictions to increase linkage, engagement, and retention in care with the goal of increasing viral suppression among people living with HIV.

Minority AIDS Initiative.—The Committee includes $175,000,000 within the Ryan White program for the Minority AIDS Initiative, an increase of $5,923,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

HEALTH CARE SYSTEMS

Appropriation, fiscal year 2019	$115,193,000
Budget request, fiscal year 2020	111,018,000
Committee Recommendation	123,693,000
Change from enacted level	+8,500,000
Change from budget request	+12,675,000

These programs support national activities that enhance health care delivery in the U.S. Activities include maintaining a national system to allocate and distribute donor organs to individuals awaiting transplant; building an inventory of cord blood units; maintaining a national system for the recruitment of bone marrow donors; operating the 340B drug discount program; and operating a national toll-free poison control hotline.

Within the total for Health Care Systems, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
Organ Transplantation	$32,049,000
National Cord Blood Inventory	16,266,000
C.W. Bill Young Cell Transplantation Program	24,609,000
Office of Pharmacy Affairs	10,238,000
Poison Control Centers	24,846,000
Hansen's Disease Program	13,706,000
Hansen's Disease Buildings and Facilities	122,000
Hansen's Payment to Hawaii	1,857,000

Organ Transplantation

The Committee includes $32,049,000 for the Organ Transplantation program, which is $6,500,000 above the fiscal year 2019 enacted level and $4,500,000 above the fiscal year 2020 budget request.

Liver Transplantation Policy.—The Committee supports the new liver allocation policy that was recently passed by the Organ Procurement and Transplantation Network (OPTN) Board of Directors. The policy, called the "Acuity Model", reduces inequities by ensuring that transplants are prioritized by the medical need of patients wherever they may live (rural or urban), whatever their socioeconomic status, and regardless of the organ procurement infrastructure in their area.

National Living Donor Assistance Center Program.—The Committee includes $10,000,000 for the National Living Donor Assistance Center (NLDAC), an increase of $6,500,000 above the fiscal year 2019 enacted level. The NLDAC currently supports donation and expands access to transplantation through reimbursement of organ donor travel expenses. The Committee strongly supports HRSA's three-year demonstration project to assess the impact of reimbursement of lost wages on individuals' willingness to become living organ donors. The Committee urges HRSA to consider the expansion of NLDAC to reimburse a comprehensive range of living donor expenses for the greatest possible number of donors, including lost wages, childcare, eldercare, and similar expenses for donor caretakers and expansion of income eligibility for the program to allow as many donors as possible to qualify.

National Cord Blood Inventory

The Committee recommends $16,266,000 for the National Cord Blood Inventory (NCBI), the same as the fiscal year 2019 enacted level and $4,000,000 above the fiscal year 2020 budget request. The NCBI program builds a genetically and ethnically diverse inventory of high-quality umbilical cord blood for transplantation.

C.W. Bill Young Cell Transplantation Program

The Committee recommends $24,609,000 for the C.W. Bill Young Cell Transplantation program, the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides support to patients who need a bone marrow or umbilical cord blood transplant, which may be necessary for some patients who have leukemia, lymphoma, sickle cell anemia, or other inher-

ited metabolic or immune system disorders. The Committee appreciates HRSA's efforts to increase the diversity of the volunteer registry and encourages HRSA to expand efforts to improve the availability, efficiency, and safety of transplants and improve outcomes for all transplant recipients regardless of socioeconomic status, age, ethnic ancestry, or any other individually defining characteristic.

Regenerative Cell Therapy Pilot Registry.—The Committee looks forward to reviewing the state of the science report required by P.L. 114–104 on using adult stem cells and birthing tissues to develop new types of therapies for patients, for the purpose of considering the potential inclusion of such new types of therapies in the C.W. Bill Young Cell Transplantation Program.

Office of Pharmacy Affairs

The Committee provides $10,238,000 for the Office of Pharmacy Affairs, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The Office of Pharmacy Affairs oversees the 340B Drug Pricing Program, which requires drug manufacturers to provide discounts on outpatient prescription drugs to certain safety net health care providers.

The Committee reiterates the request included in H. Rept. 115–862 directing HRSA to conduct additional risk-based audits of covered entities, finalize guidance to clarify parameters of the 340B program, and complete the rulemaking process for areas where HRSA has regulatory authority. The Committee supports HRSA's continued engagement to provide updated and clearer program guidance to covered entities in the 340B program.

Poison Control Centers

The Committee recommends $24,846,000 for Poison Control Centers, which is $2,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program funds poison centers, supports a national toll-free number (800–222–1222), and implements a nationwide media campaign to educate the public and health care providers about poison prevention and poison center services.

Hansen's Disease Program

The Committee recommends $15,685,000 for the Hansen's Disease Program, Hansen's Disease buildings and facilities, and payment to Hawaii for treatment, which is the same as the fiscal year 2019 enacted level and $2,175,000 above the fiscal year 2020 budget request. The Hansen's Disease Program provides medical care, education, and research for Hansen's disease (leprosy) and related conditions.

RURAL HEALTH

Appropriation, fiscal year 2019	$317,794,000
Budget request, fiscal year 2020	188,645,000
Committee Recommendation	317,794,000
Change from enacted level	– – –
Change from budget request	+129,149,000

Rural Health programs provide funding to improve access, quality, and coordination of care in rural communities; for research on rural health issues; for technical assistance and recruitment of

health care providers; for screening activities for individuals affected by the mining, transport, and processing of uranium; for the outreach and treatment of coal miners and others with occupation-related respiratory and pulmonary impairments; and for the expansion of telehealth services.

Attracting Health Care Providers to Rural Communities.—Rural healthcare providers ensure that essential health care services are made available to people living in rural and underserved communities, many of whom are seniors. However, the rural hospital closure crisis is leaving millions of patients without access to healthcare providers. Since 2010, nearly 104 rural hospitals have closed and one-in-three rural hospitals is financially vulnerable. The Committee requests an update in the fiscal year 2021 Congressional Justification on the best practices and strategies to attract healthcare practitioners to rural clinics and hospitals in areas with healthcare professional shortages.

Coordinating with USDA.—The Committee notes the passage of the Agriculture Improvement Act and increased use of United States Department of Agriculture (USDA) programs to help better deliver health care services and improve health outcomes in rural America. The Committee further notes the Agriculture Improvement Act creates a new Rural Health Liaison position which is directed to consult with HHS in coordinating activities at the USDA that could impact health in rural America. The Committee encourages HRSA, namely the Federal Office of Rural Health Policy, to coordinate with USDA and, when established, the Rural Health Liaison to ensure communities have access to the full suite of federal resources and those resources are used effectively to improve health outcomes.

Rural Health Outreach Programs

The Committee includes $84,609,000 for Rural Health Care Services Outreach, Network, and Quality Improvement Grants, which is $7,109,000 above the fiscal year 2019 enacted level and $43,798,000 above the 2020 budget request. These programs fund activities that improve access to and coordination of care in rural communities, with a focus on building sustainable health programs that continue beyond Federal funding. Outreach programs focus on supporting rural community needs related to issues such as behavioral health, oral health, care coordination, quality improvement, workforce training, chronic disease management and enhancing the rural health care delivery system of rural hospitals, clinics and other safety net providers.

Telementoring Training Center.—The Committee includes $3,000,000 within the total for Rural Health Outreach Programs to support a telementoring training center to train academic medical centers and other centers of excellence in the creation of technology-enabled telementoring learning programs that facilitate the dissemination of best practice specialty care to primary care providers and care teams across the country. To ensure access to quality healthcare for underserved populations, there is a need for cost-effective, long-term professional education and support of primary care providers in rural and underserved areas, especially for treatment of complex conditions such as diabetes, addiction (particularly concerning the opioid epidemic), hypertension, obesity, and HIV/

AIDS, among others. The Committee directs HRSA to give preference to models of professional education and support that are adaptable to culturally and regionally diverse populations.

Rural Health Research and Policy Development

The Committee includes $9,351,000 for Rural Health Research, the same as the fiscal year 2019 enacted level and $4,351,000 above the fiscal year 2020 budget request.

Rural Hospital Flexibility Grants

The Committee includes $59,000,000 for the Rural Hospital Flexibility Grants program and the Small Rural Hospital Improvement program, which is $5,391,000 above the fiscal year 2019 enacted level and $59,000,000 above the fiscal year 2020 budget request.

State Offices of Rural Health

The Committee includes $12,500,000 for State Offices of Rural Health, $2,500,000 above the fiscal year 2019 enacted level and $12,500,000 above the fiscal year 2020 budget request.

Black Lung Clinics

The Committee includes $12,000,000 for Black Lung Clinics, $1,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Telehealth

The Committee includes $28,500,000 for Telehealth, an increase of $4,000,000 above the fiscal year 2019 enacted level and $18,500,000 above the fiscal year 2020 budget request. Within the funds provided for Telehealth, the Committee provides $6,000,000 for Telehealth Centers for Excellence, an increase of $2,000,000 above the fiscal year 2019 enacted level. These Centers identify best practices, serve as national training resources, and test the efficacy of different telehealth clinical applications. Telehealth can provide rural patient access to quality primary and specialty care that would otherwise require patients to travel long distances for diagnosis and treatment. The Centers of Excellence serve to promote the adoption of telehealth programs across the country by validating technology, establishing training protocols, and by providing a comprehensive template for states to integrate telehealth into their state health provider network. Additional funding for the Centers of Excellence will serve to promote the adoption of telehealth services nation-wide and thus help to address the access to care issue faced by rural America.

In addition, the Committee provides $2,000,000 to support a comprehensive evaluation of telehealth investments to date on rural areas and populations, to include an assessment of access, cost, experience, and effectiveness for patients and providers. The Committee directs HRSA to conduct additional evaluations in conjunction with an academic medical center not previously funded through the Telehealth Centers of Excellence program that has experience providing telemedicine services across the care continuum in medically underserved areas in both rural and urban settings.

Telehealth Solutions and Virtual Models of Care.—The Committee believes that innovative, scalable, and patient-centric solutions are necessary to address the opioid crisis. The Committee urges HRSA to consider telehealth solutions and virtual models of care, specifically those models that allow for increased access to care professionals while decreasing geographic barriers and cost of care such as remote patient monitoring models. The Committee encourages the Secretary to consider pilot programs on a variety of telehealth solutions with the goal of finding an effective, scalable solution to treating substance use disorder in rural communities where access to care is limited.

Rural Communities Opioid Response

The agreement provides $100,000,000 for the Rural Communities Opioid Response program. This amount fully funds continuing activities—the reduction in comparison to fiscal year 2019 reflects one-time investments in fiscal year 2019 that do not need to be repeated in fiscal year 2020.

Rural Health Residency Program

The Committee includes $10,000,000 for Rural Health Residency Program, the same as the fiscal year 2019 enacted level and $10,000,000 above the fiscal year 2020 budget request.

FAMILY PLANNING

Appropriation, fiscal year 2019	$286,479,000
Budget request, fiscal year 2020	286,479,000
Committee Recommendation	400,000,000
Change from enacted level	+113,521,000
Change from budget request	+113,521,000

The Committee includes $400,000,000 for the Family Planning program, which is $113,521,000 above the fiscal year 2019 enacted level and the 2020 budget request. The Family Planning program administers Title X of the Public Health Service Act. This program plays a vital role not only in ensuring access to affordable contraceptive education, services, and supplies, but also in STD prevention, screening, and treatment; cervical and breast cancer screenings; first-line infertility services; and other community and health care services.

The bill includes language directing the Secretary to carry out the Title X Family Planning program in accordance with the regulations that were in place on January 18, 2017. The Committee directs the Secretary to ensure that grantees certify that they: (1) provide medically accurate and complete counseling, including referral as requested, on all matters; (2) shall not condition the receipt of Title X-supported services on patients remaining sexually abstinent until marriage; and (3) will not make any appointments or referrals for patients that are contrary to the patient's wishes.

PROGRAM MANAGEMENT

Appropriation, fiscal year 2019	$155,250,000
Budget request, fiscal year 2020	151,993,000
Committee Recommendation	155,250,000
Change from enacted level	– – –
Change from budget request	+3,257,000

Program management supports the cost of Federal staff and related activities to coordinate, direct, and manage the programs of HRSA.

Chief Dental Officer.—The Committee is pleased that HRSA has restored the position of Chief Dental Officer (CDO) and looks forward to learning how the agency has ensured that the CDO is functioning at an executive level authority with resources to oversee and lead HRSA oral health programs and initiatives. The Committee requests an update in the fiscal year 2021 Congressional Budget Justification request on how the CDO is serving as the agency representative on oral health issues to international, national, State or local government agencies, universities, and oral health stakeholder organizations.

Chronic Obstructive Pulmonary Disease.—The Committee commends HRSA for its partnership with the National Heart, Lung, and Blood Institute on educating providers and patients, including in rural and low-income communities, on COPD awareness, detection and management best practices. The agency's efforts in this area are a model for effective collaboration across Federal agencies.

Oral Health Literacy.—The Committee includes $500,000 to continue the development of an oral health awareness and education campaign across relevant HRSA divisions, including the Health Centers Program, Oral Health Workforce, Maternal and Child Health, Ryan White HIV/AIDS Program, and Rural Health. The Committee directs HRSA to identify oral health literacy strategies that are evidence-based and focused on oral healthcare prevention and education, including prevention of oral disease such as early childhood and other caries, periodontal disease, and oral cancer. The Committee expects the Chief Dental Officer to play a key role in the design, monitoring, oversight, and implementation of this project.

HRSA Strategy to Address Intimate Partner Violence 2017–2020 and Project Catalyst.—The Committee recommends continued support for the HRSA Strategy to Address Intimate Partner Violence 2017–2020, and specifically supports training, technical assistance and resource development to assist public health and health care professionals in better serving individuals and communities impacted by intimate partner violence.

VACCINE INJURY COMPENSATION PROGRAM TRUST FUND

Appropriation, fiscal year 2019	$317,200,000
Budget request, fiscal year 2020	319,200,000
Committee Recommendation	319,200,000
Change from enacted level	+2,000,000
Change from budget request	– – –

The National Vaccine Injury Compensation Program provides a system of compensation for individuals with vaccine-associated injuries or deaths. Funds for claims from vaccines administered on or after October 1, 1988 are generated by a per-dose excise tax on the sale of selected prescribed vaccines. The Vaccine Injury Compensation Trust Fund receives revenues raised by this tax. Trust funds made available will support the liability costs of vaccines administered after September 30, 1988.

The Committee recommends $11,200,000 for administration of the program, which is $2,000,000 above the fiscal year 2019 en-

acted level and the same as the fiscal year 2020 budget request. This increase will enable HRSA to hire additional contractors to conduct initial medical reviews and full-time medical officers to review the contractors' work. The additional funding will also allow HRSA to process additional claims and reduce the backlog of claims.

CENTERS FOR DISEASE CONTROL AND PREVENTION

Appropriation, fiscal year 2019	$7,337,741,000
Budget request, fiscal year 2020	6,587,190,000
Committee Recommendation	8,258,363,000
Change from enacted level	+920,622,000
Change from budget request	+1,671,173,000

The Committee recommendation for the Centers for Disease Control and Prevention (CDC) program level includes $7,123,755,000 in discretionary budget authority, $55,358,000 in mandatory funds under the terms of the Energy Employees Occupational Illness Compensation Program Act, $854,250,000 in transfers from the Prevention and Public Health (PPH) Fund, and $225,000,000 in transfers from the Nonrecurring Expenses Fund.

CDC's mission is to protect Americans from health, safety, and security threats, which it accomplishes by supporting core public health functions at State, local, and Tribal health departments, detecting and responding to new and emerging health threats, promoting health and safety, and providing leadership in the public health workforce.

IMMUNIZATION AND RESPIRATORY DISEASES

Appropriation, fiscal year 2019	$798,405,000
Budget request, fiscal year 2020	730,231,000
Committee Recommendation	847,558,000
Change from enacted level	+49,153,000
Change from budget request.	+117,327,000

The Committee recommendation includes $499,758,000 in discretionary budget authority and $347,800,000 in transfers from the PPH Fund.

Immunization grants are awarded to State and local public health departments for planning, developing, and conducting childhood, adolescent, and adult immunization programs, including enhancement of the vaccine delivery infrastructure. CDC directly maintains a stockpile of vaccines, supports consolidated purchase of vaccines for State and local health agencies, and conducts surveillance, investigations, and research into the safety and efficacy of new and presently-used vaccines.

Within the total for Immunization and Respiratory Diseases, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Section 317 Immunization Program	$650,000,000
National Immunization Survey	*12,864,000*
Acute Flaccid Myelitis	*10,000,000*
Influenza Planning and Response	197,558,000

Acute Flaccid Myelitis.—The Committee includes $10,000,000 to support CDC's efforts to identify the cause, prevention, and treat-

ment of acute flaccid myelitis. Since 2014, this rare but serious condition that affects the nervous system was confirmed in 579 cases in at least 41 States, with a median age of four years old.

Cost Estimates.—The Committee looks forward to reviewing the fiscal year 2021 report on estimated funding needs of the Section 317 Immunization Program and urges that the report be updated and submitted not later than February 1, 2020. The updated report should include an estimate of optimum State and local operations funding, as well as a discussion of the role of the 317 Program, as coverage for vaccination under public and private resources continues to evolve. The fiscal year 2021 report should include specific information on the estimated cost to fully address evidence-based public health strategies that could be funded through the CDC to improve coverage for human papillomavirus and influenza. The Committee also notes that this long-standing report failed to meet the expected deadline by many months and sometimes has been late by over a year. In order to assess the needs of this critical program concurrent with the appropriations cycle, the Committee expects the report to be submitted on time.

Immunization Rates.—The measles outbreaks in multiple States highlight the importance of immunizations, which are the most effective way to protect the public from highly infectious and potentially deadly diseases. The Committee is concerned that areas where immunization rates have fallen below the threshold necessary to prevent future outbreaks put the public health at risk. The Committee believes that it is important to public health to increase the rate at which people in the U.S. choose to vaccinate themselves and their children. Within the funding provided, the Committee supports CDC's efforts to understand and address obstacles to vaccination including access, hesitancy and misinformation.

Influenza Vaccine.—The Committee includes an increase of $10,000,000 to improve the effectiveness of and reduce barriers to seasonal influenza vaccination. Furthermore, the Committee encourages CDC to consider including vaccines produced through recombinant DNA technology in addition to traditionally-produced vaccines in future solicitations to facilitate the competitive process for all vaccine manufacturers.

Section 317 Immunization Program.—The Committee views the 317 Immunization Program, including the Vaccines for Children Program, as a pivotal part of the U.S. public health infrastructure. The Committee includes an increase of $39,153,000 for the enhancement of this infrastructure, as it is critical to ensure high vaccination coverage levels, prevention of vaccine-preventable diseases, and rapid response to outbreaks.

HIV/AIDS, VIRAL HEPATITIS, SEXUALLY TRANSMITTED DISEASES, AND TUBERCULOSIS PREVENTION

Appropriation, fiscal year 2019	$1,132,278,000
Budget request, fiscal year 2020	1,318,056,000
Committee Recommendation	1,335,197,000
Change from enacted level	+202,919,000
Change from budget request	+17,141,000

CDC provides national leadership and support for prevention research and the development, implementation, and evaluation of

evidence-based HIV, viral hepatitis, sexually transmitted diseases (STD), and tuberculosis (TB) prevention programs serving persons affected by, or at risk for, these infections. Activities include surveillance, epidemiologic and laboratory studies, and prevention activities. CDC provides funds to State, local, and tribal health departments and community-based organizations to develop and implement integrated community prevention plans.

Within the total for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Domestic HIV/AIDS Prevention and Research	$945,631,000
School Health-HIV	*50,000,000*
Viral Hepatitis	50,000,000
Sexually Transmitted Diseases	167,310,000
Tuberculosis	152,256,000
Infectious Diseases & the Opioid Epidemic	20,000,000

Community-Based Organizations.—The Committee recognizes that community-based organizations play a crucial role because of their capacity to reach communities highly impacted by HIV. The Committee directs CDC to ensure that planning councils reflect their local epidemic by including community-based organizations and people living with HIV. The Committee further requests CDC's progress of engaging such communities be included in the fiscal year 2021 Congressional Budget Justification.

Congenital Syphilis.—The Committee is concerned regarding the recent data showing that congenital syphilis (CS) cases are at the highest level since 1997. The Committee urges CDC to design an initiative that will, among other approaches, strengthen prenatal outreach programs in high burden States, for patients, including those with a drug addiction, who are at a high risk for contracting syphilis. The Committee further urges CDC to increase awareness of CS through community organizations and to inform STD and drug addiction clinics of the importance of multi-testing throughout pregnancy.

HIV Initiative.—The Committee includes an increase of $140,000,000 to support the goal of reducing new HIV infections by 90 percent in the next ten years. CDC will focus on areas of the country that constitute the majority of new HIV infections annually to diagnose people with HIV as early as possible after infection, link people to effective treatment and prevention strategies, and respond rapidly to clusters and outbreaks of new HIV infections. Innovative data management solutions will be developed and deployed, and access to pre-exposure prophylaxis increased, along with better detection and response to HIV clusters.

Infectious Diseases and the Opioid Epidemic.—The Committee includes an increase of $15,000,000 to strengthen efforts to conduct surveillance to improve knowledge of the full scope of the burden of infectious diseases (including viral, bacterial and fungal pathogens) associated with substance use disorders, and in collaboration with State and local health departments, health care facilities, and providers, deploy existing authorities to prevent and detect infectious diseases associated with substance use disorder and strengthen linkages to addiction, mental health and infectious diseases treatment.

Latent Tuberculosis.—CDC estimates that there are up to 13 million individuals in the U.S. with latent TB infection. The preventive treatment of individuals with latent TB infection will prevent future active TB cases and reduce future healthcare costs. The Committee requests a report on progress towards TB elimination in the U.S., including identification and preventive treatment of TB infection cases, in the fiscal year 2021 Congressional Budget Justification.

Pre-Exposure Prophylaxis.—The Committee recognizes that the advancement of Pre-Exposure Prophylaxis (PrEP) is one of the most effective methods for preventing the spread of HIV, yet there continues to be barriers to access to PrEP. The Committee also requests that CDC and HRSA work to engage with, and support infrastructure for the implementation of PrEP in a diversity of service sites, including community health centers, Title X and STD clinics.

School Health.—The Committee includes an increase of $16,919,000 to bolster school capacity for sexual health education, and access to sexual health services and safe and supportive environments.

Sexually Transmitted Infections.—The Committee includes an increase of $10,000,000 for sexually transmitted infections (STI) prevention and control. The Committee is concerned that STI rates across the U.S. are at a 20-year high. Furthermore, the Committee recognizes that sexually transmitted diseases are associated with increased risk of HIV acquisition. The Committee urges CDC to include, as part of the focused HIV initiative, an expansion of STI programs and initiatives designed to increase HIV testing; Pre-Exposure Prophylaxis and condom availability at STD clinics; increase in the number of Disease Intervention Specialists to prevent the spread of STIs and HIV; and implementation of HIV and STI education and prevention programs in schools.

Tuberculosis.—The Committee includes an increase of $10,000,000 to combat tuberculosis through research for new tools, and support of prevention and treatment.

Viral Hepatitis.—The Committee recognizes that viral hepatitis can cause serious health consequences for people living with HIV and that 25 percent of people living with HIV are also living with hepatitis C virus (HCV), and about 10 percent of people living with HIV are also living with hepatitis B virus (HBV). The Committee urges CDC to incorporate viral hepatitis prevention, testing, and linkage to care and treatment into its response to the HIV epidemic.

Viral Hepatitis Vaccine.—The Committee is concerned that despite the availability of hepatitis B (HBV) vaccine, less than 25 percent of adults age 19 and older are vaccinated. According to CDC's most recent survey of Vaccination Coverage Among Adults, this poor vaccination rate remains flat and has not improved in several years. Therefore, the Committee includes an increase of $11,000,000 and urges the CDC to partner with State, local and tribal health departments, along with leading national hepatitis B organizations to develop a plan that takes into account best practices and model strategies to increase HBV immunization coverage among adults. The Committee requests a report within 90 days of enactment of this Act of CDC's plan to increase the rate of HBV

adult vaccination to the levels necessary to eliminate new infections of hepatitis B in the U.S. and to improve collaboration and coordination across CDC to achieve this plan.

EMERGING AND ZOONOTIC INFECTIOUS DISEASES

Appropriation, fiscal year 2019	$620,372,000
Budget request, fiscal year 2020	509,472,000
Committee Recommendation	644,622,000
Change from enacted level	+24,250,000
Change from budget request	+135,150,000

The Committee recommendation includes $592,622,000 in discretionary appropriations and $52,000,000 in transfers from the PPH Fund. Programs funded under Emerging and Zoonotic Infectious Diseases (EZID) support the prevention and control of infectious diseases through surveillance, outbreak investigation and response, research, and prevention.

Within the total for EZID, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Core Infectious Diseases	$438,800,000
Emerging Infectious Diseases	*188,797,000*
Lab Safety and Quality	*8,000,000*
Antibiotic Resistance Initiative	*173,000,000*
Vector-borne Diseases	*43,603,000*
Lyme Disease	*13,000,000*
Prion Disease	*7,000,000*
Chronic Fatigue Syndrome	*5,400,000*
Food Safety	66,000,000
National Health Care Safety Network	22,750,000
Quarantine	31,572,000
Advanced Molecular Detection	32,500,000
Epidemiology and Laboratory Capacity	40,000,000
Healthcare-Associated Infections	12,000,000
Harmful Algal Blooms	1,000,000

Advanced Molecular Detection.—The Committee includes an increase of $2,500,000 to support the dissemination of technologies to State and local health departments to advance the nation's public health system.

Antibiotic Resistance.—The Committee includes an increase of $5,000,000 and recognizes the importance of addressing the problem of antibiotic-resistant bacteria through a "One Health" approach, and by tracking resistance through local, regional, national, and global surveillance. The Committee encourages CDC to competitively award research activities that address aspects of antibiotic resistance related to "One Health," including global surveillance, and research and development for new tools to counter antibiotic resistance among entities, including public academic medical centers, veterinary schools with agriculture extension services, and public health departments whose proposals are in line with CDC's strategy for addressing antibiotic resistant bacteria. Furthermore, the Committee is pleased with CDC's Antimicrobial Resistance (AMR) Challenge and its implementation of a "One Health" approach to encourage governments, private industries, and non-governmental organizations across the world to combat AMR. The Committee encourages CDC to build on findings and experiences

from the AMR Challenge as it winds down the effort later this year.

Harmful Algal Blooms.—The Committee includes $1,000,000 to support the work that CDC is doing to conduct surveillance for and report health concerns related to harmful algal blooms and urges CDC to continue this work with a focus on fresh water and other affected waters: (1) to provide more outreach to numerous State and local public health officials to use these surveillance and reporting systems; (2) to work with other agencies, in addition to the U.S. Army Corp of Engineers, including the Environmental Protection Agency, National Institute of Environmental Health Sciences, National Oceanic and Atmospheric Administration, and United States Geological Survey, to integrate disparate sets of data to allow for a broader understanding of the spatial and temporal dynamics of the environmental and health impacts of harmful algal blooms (HABs); and (3) to continue to work together on efforts that support HAB surveillance, emergency response, and mitigation of public health impacts. The Committee encourages CDC to expand the scope of this work to include focus on impacted populations where citizens rely on potentially impacted waters for their drinking water, fishing and recreation, including the Great Lakes. There is an important nexus between freshwater and drinking water, and CDC is encouraged to expand their work regionally to understand HABs impact on our nation's largest fresh bodies of water.

Food Safety.—The Committee includes an increase of $6,000,000 to help address the critical unmet needs in the nation's food safety system, in part through programs that enhance State and local public health capacity to support vital national surveillance, improve foodborne outbreak detection and investigations, enhance food safety prevention efforts, and maintain vigilance for emerging threats to our nation's food supply.

Lyme Disease.—The Committee includes an increase of $1,000,000 to intensify CDC's efforts to develop improved diagnostics, and bolster critical prevention and surveillance networks.

Mycotic Diseases.—The Committee includes an increase of $2,000,000 in Emerging Infectious Diseases to enhance efforts to prevent illness and death from fungal diseases.

National Healthcare Safety Network.—The Committee includes an increase of $1,750,000 for the National Healthcare Safety Network. The Committee encourages CDC to work with the Centers for Medicare & Medicaid Services (CMS) and the Office of the National Coordinator for Health Information Technology (ONC) to identify and deploy existing policy authorities and resources that may be used to increase the number of hospitals and other health care facilities (including long-term care facilities) that report antibiotic use and resistance data to the National Healthcare Safety Network with the aim of meeting the goal set forth in the National Action Plan for Combating Antibiotic Resistance Bacteria for 95 percent of hospitals to report these data by 2020. Within one year, CDC, CMS and ONC should report to Congress on the new strategies implemented to increase reporting, current number of hospitals and other health care facilities reporting, and any additional authorities or resources needed to meet the National Action Plan goal.

Prion Disease.—The Committee provides an increase of $1,000,000 for prion disease. The Committee supports the work of the National Prion Disease Pathology Surveillance Center to develop a real-time field test for the presence of chronic wasting disease (CWD). The CWD-related workload is in addition to the Center's ongoing efforts related to human prion diseases that includes research, surveillance, tissue banking, and technical and supportive assistance to providers and families.

Vector-Borne Diseases.—The Committee includes an increase of $5,000,000 and recognizes the critical role of CDC to continue to address new and existing vector-borne disease threats, such as the Zika virus; advance innovation and discovery; and provide support to States and Territories, particularly those at the greatest risk of outbreaks.

Vector-Borne Disease Centers of Excellence.—The Committee is concerned about the Pacific Northwest being an underserved region for funding and representation in the Regional Centers of Excellence in Vector-Borne Diseases network recently established by CDC. The ecology, disease transmission dynamics, and resources for vector-borne disease training, surveillance, and control in the Northwest differ significantly from those in the five regional centers currently funded. The Committee encourages CDC to examine options to provide greater coverage of the Northwest region for vector-borne disease resources.

CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

Appropriation, fiscal year 2019	$1,187,771,000
Budget request, fiscal year 2020	951,250,000
Committee Recommendation	1,350,571,000
Change from enacted level	+162,800,000
Change from budget request	+399,321,000

The Committee recommendation includes $1,073,121,000 in discretionary appropriations and $277,450,000 in transfers from the PPH Fund. Programs supported within Chronic Disease Prevention and Health Promotion (CDPHP) provide national leadership and support for State, tribal, and community efforts to promote health and well-being through the prevention and control of chronic diseases.

The recommendation for CDPHP maintains the existing program line items as they were funded in fiscal year 2019 and does not provide funding for the America's Health Block Grant proposed again in the fiscal year 2020 Congressional Budget Justification. The Committee supports evidence-based strategies to address public health priorities through proven State-based grant programs, utilizing related national organizations for technical assistance, and encourages CDC to continue and expand these successful approaches.

Within the total provided, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Tobacco	$250,000,000
Nutrition, Physical Activity, and Obesity	58,920,000
High Obesity Rate Counties	*15,000,000*
School Health	17,400,000
Food Allergies	*2,000,000*

Budget Activity	FY 2020 Committee
Health Promotion	24,100,000
Glaucoma	*4,000,000*
Vision and Eye Health	*2,000,000*
Alzheimer's Disease	*5,500,000*
Inflammatory Bowel Diseases	*1,000,000*
Interstitial Cystitis	*1,100,000*
Excessive Alcohol Use	*5,000,000*
Chronic Kidney Disease	*2,500,000*
Chronic Disease Education & Awareness	*3,000,000*
Prevention Research Centers	32,461,000
Heart Disease and Stroke	160,062,000
Diabetes	168,129,000
National Diabetes Prevention Program	30,000,000
Cancer Prevention and Control	410,049,000
Breast and Cervical Cancer	*245,000,000*
WISEWOMAN	*46,770,000*
Breast Cancer Awareness for Young Women	*4,960,000*
Cancer Registries	*51,440,000*
Colorectal Cancer	*45,294,000*
Comprehensive Cancer	*19,675,000*
Johanna's Law	*12,000,000*
Ovarian Cancer	*12,000,000*
Prostate Cancer	*14,205,000*
Skin Cancer	*5,000,000*
Cancer Survivorship Resource Center	*475,000*
Oral Health	20,000,000
Safe Motherhood/Infant Health	58,000,000
Maternal Mortality Review Committees	*12,000,000*
Preterm Birth	*2,000,000*
Other Chronic Diseases	31,000,000
Arthritis	*12,000,000*
Epilepsy	*11,500,000*
National Lupus Patient Registry	*7,500,000*
Racial and Ethnic Approaches to Community Health	71,950,000
Good Health and Wellness in Indian Country	*21,000,000*
Million Hearts	4,000,000
National Early Child Care Collaboratives	4,500,000
Hospitals Promoting Breastfeeding	10,000,000

Arthritis.—The Committee includes an increase of $1,000,000 for arthritis, the country's leading cause of disability, to further support the national dissemination of evidence-based programs.

Chronic Disease Education and Awareness.—The Committee recognizes CDC's work with stakeholders to expand public health education and awareness activities that help to improve surveillance, diagnosis, and proper treatment for chronic diseases. The Committee includes $3,000,000 for a new effort to award grants to address chronic diseases and their risk factors that do not already have a specified amount under CDC in this report. This approach would utilize a competitive grant process to strengthen the science base for prevention, education, and public health awareness for a variety of chronic diseases such as chronic obstructive pulmonary disease and psoriasis.

Chronic Obstructive Pulmonary Disease.—The Committee urges CDC to do more to address Chronic Obstructive Pulmonary Disease (COPD), the nation's fourth leading cause of death, including fully engaging with the timely implementation of the COPD National Action Plan, developed by the National Heart, Lung, Blood Insitute in coordination with CDC. CDC should fully integrate COPD surveillance, research, prevention, and management strategies into its existing chronic disease efforts.

Colorectal Cancer.—The Committee includes an increase of $2,000,000 for colorectal cancer. The Committee is concerned with the increasing rate of colorectal cancer among younger adults. The Committee urges CDC to identify risk factors that may be associated with this increase among younger adults and further identify trends of increase by race and socioeconomic status. The Committee requests a report on the risk factors for colorectal cancer no later than 180 days after enactment of this Act.

Diabetes.—The Committee includes an increase of $20,000,000 for additional efforts to prevent diabetes, its complications, and to reduce inequities through prevention strategies, translational research, and education. The Committee also includes an increase of $4,700,000 for the Diabetes Prevention Program to expand efforts of this public-private partnership that provides diabetes prevention for people with prediabetes. The Committee encourages CDC to support diabetes screening programs located in hospital settings.

Early Child Care Collaboratives.—The Committee recognizes that the early care and education setting is important for promoting healthy habits in young children. The Committee includes an increase of $500,000 for the National Early Child Care Collaboratives Program to support direct provider-level training in implementation of healthy eating and physical activity best practices, including strategies for engaging families. Funds will also support technical assistance to States for integrating such best practices into existing State and local systems for early care and education, such as professional development for providers. The additional $500,000 above the fiscal year 2019 funding level shall be used to expand geographic reach to at least two new geographic areas, with a focus on provider-level interventions, and to support the testing of pilots regarding innovative ways to engage families in health promotion in early care and education.

Eating Disorders.—The Committee encourages CDC to assist States in collecting data by including standard questions on unhealthy weight control practices for eating disorders, including binge eating, through the Youth Risk Behavior Surveillance System and the Behavioral Risk Factor Surveillance System.

Epilepsy.—The Committee includes an increase of $3,000,000 to support epidemiologic studies, national dissemination of evidence-based programs to improve access of care and expand provider education and public awareness campaigns to reduce stigma.

Excessive Alcohol Use.—The Committee includes an increase of $1,000,000 to strengthen the scientific foundation for preventing excessive alcohol use.

Fatty Liver Disease.—The Committee recognizes that the prevalence of non-alcoholic fatty liver disease and non-alcoholic steatohepatitis is growing dramatically in the U.S. The Committee encourages CDC to develop prevention, education, diagnosis, and treatment programs to combat existing incidence and provide appropriate prevention activities to mitigate further increases.

Food Allergies.—The Committee includes $2,000,000 for a school-based effort to reduce potentially fatal anaphylactic reactions due to food allergies.

Glaucoma.—The Committee is pleased by CDC's work in improving glaucoma screening, referral, and treatment particularly for populations that face disparity in access to glaucoma care. Early

detection and treatment are vital in glaucoma care because, by the time vision loss or other symptoms appear, permanent and irreversible damage to the eye has already occurred and lost vision cannot be restored.

Heart Disease and Stroke.—The Committee includes an increase of $20,000,000 to support, strengthen, and expand evidence-based initiatives, given that almost half of the U.S. population has some form of cardiovascular disease.

High Obesity Rate Counties.—The Committee continues to include $15,000,000 to support the rural extension and outreach services grants for rural counties with an obesity prevalence of over 40 percent. CDC is encouraged to give preference to projects in States where at least 10 percent of counties meet the requirements of the program.

Hospitals Promoting Breastfeeding.—The Committee includes an increase of $2,000,000 for evidence-based practice improvements in hospitals, with an emphasis on physician and care provider education, with the aim of supporting breastfeeding and increasing breastfeeding rates.

Inflammatory Bowel Diseases.—The Committee commends CDC for investing in research on the epidemiology of Irritable Bowel Diseases (IBD) in the U.S. as well as on disparities in treatment patterns and overall health outcomes within minority populations and underserved communities. The Committee recognizes the need to increase the rate of early diagnoses and to improve health outcomes in these populations. The Committee encourages CDC to continue supporting this research and to develop a plan to reduce the time for persons from underserved communities to receive a diagnosis, including by increasing understanding and awareness of IBD among these populations and the healthcare providers who serve them.

Interstitial Cystitis.—The Committee includes an increase of $100,000 for interstitial cystitis activities. This increase is to support additional funding for education, outreach, and public awareness activities.

Johanna's Law.—The Committee includes an increase of $4,500,000 for CDC's Inside Knowledge Campaign that raises awareness of the five main types of gynecological cancer: cervical, ovarian, uterine, vaginal, and vulvar. This campaign educates women of all ages, races, and ethnic groups, and healthcare providers.

Lung Cancer.—The Committee remains concerned about the high morbidity and mortality of lung cancer. Early detection and treatment of lung cancer translates into higher survival rates, but only 16 percent of lung cancer cases are diagnosed early when the disease is most treatable. The Committee encourages CDC to work to increase public awareness of lung cancer screening for individuals at high risk for lung cancer and increase the percentage of high-risk individuals who are screened.

Lymphedema.—The Committee commends the Division of Cancer Prevention and Control for working to expand access to resources on lymphedema. The Committee notes that lymphedema is the most common side effect of many cancer treatments and urges the Division to work with stakeholders to advance information and re-

sources for healthcare professionals and the public on this often debilitating condition.

Nutrition, Physical Activity and Obesity.—The Committee includes an increase of $2,000,000 to expand efforts to protect the health of individuals at every stage of life by encouraging regular physical activity, good nutrition, and preventing adult and childhood obesity.

Oral Health.—The Committee includes an increase of $1,000,000 for oral health. The Committee is aware that there are some Community Dental Health Coordinators (CDHCs) that serve in school-based settings where they provide oral health education, screenings, cleanings and dental sealants. The Committee encourages CDC to engage Federal partners, external stakeholders, including current and former grantees of the program, to determine how CDHCs can be used to continually educate and provide preventative care in school-based settings.

Ovarian Cancer.—The Committee includes an increase of $2,000,000 for ovarian cancer prevention activities. The Committee notes that ovarian cancer causes more deaths each year than any other gynecological cancer in the U.S.

Prostate Cancer.—The Committee includes an increase of $1,000,000 to expand the public's awareness of prostate cancer risks, screening and treatment, and improve surveillance of this disease, which is the most commonly diagnosed cancer in men and the second leading cause of cancer deaths among men in the U.S.

Prevention Research Centers.—The Committee includes an increase of $7,000,000 for additional institutions to join the national network committed to conducting prevention research and translating research results into policy and public health practice that address local public health needs.

Psoriatic Disease.—The Committee recognizes the growing body of evidence linking psoriatic disease, which impacts more than eight million Americans, to other comorbidities such as cardiovascular disease, mental health and substance abuse challenges, kidney disease, and other conditions. The Committee commends CDC for identifying opportunities for expanded research on psoriatic disease in its Public Health Agenda for Psoriasis and Psoriatic Arthritis.

Racial and Ethnic Approaches to Community Health.—The Committee includes an increase of $16,000,000 for Racial and Ethnic Approaches to Community Health for additional approved but unfunded organizations for the first year of a three-year cooperative agreement, with at least two additional grantees from each of the racial and ethnic target populations described in the funding announcement CDC–RFA–DP18–1813. The Committee continues funding for Good Health and Wellness in Indian Country at the fiscal year 2019 enacted level.

Reducing Residual Cardiovascular Risk.—Cholesterol therapies, such as statins, have been successful in reducing risk of cardiovascular disease in many individuals, but substantial residual and untreated risk remains beyond cholesterol management. The Committee commends CDC for playing an important role in bridging the knowledge gap and encouraging healthcare professionals and their patients to take action toward well-informed decisions for care. The Committee urges CDC to promote awareness among phy-

sicians and patients of residual cardiovascular risk beyond statin therapy, and the importance of taking preventative action to reduce this risk.

Safe Motherhood and Infant Health.—The Committee recognizes CDC's ongoing efforts to address the pressing public health issue of rising maternal mortality rate in the U.S. Each year, almost 700 women die during or within a year of the end of their pregnancy in the U.S. as a result of pregnancy or delivery complications. These statistics are all the more concerning given that accurate and complete data regarding the cause of pregnancy-related deaths is lacking. The Committee includes $12,000,000 in the Safe Motherhood and Infant Health Program for CDC to continue its technical assistance to existing State Maternal Mortality Review Committees (MMRCs) to build stronger data systems, improve data collection at the State level and create consistency in data collection across State MMRCs. The Committee believes this investment will lead to better information necessary to provide accurate national statistics for U.S. maternal mortality rates and will inform data-driven actions for preventing these deaths. Furthermore, the Committee commends CDC for funding State-based Perinatal Quality Collaboratives (PQCs) that focus on improving maternal and neonatal outcomes using known prevention strategies such as reducing early elective deliveries. CDC is encouraged to continue support for PQCs particularly due to the rise in maternal mortality rates and neonatal abstinence syndrome (NAS) as a result of the opioid crisis. PQCs are working to address a number of important health threats to women and infants, including the impacts of opioid use disorder and NAS. This platform can also be integrated into existing State-based bio-surveillance efforts to pilot the integration of a maternal health component, ensuring any additional efforts work within the PQC infrastructure and strengthen those existing efforts to improve the data available and its ability to impact and improve clinical care and community linkages.

Skin Cancer.—The Committee includes an increase of $2,000,000 for skin cancer prevention activities, the most common cancer in the U.S.

Sudden Unexpected Infant Death and Sudden Unexplained Death in Childhood.—The Committee is aware that Sudden Infant Death Syndrome (SIDS) is the leading cause of death of infants under one year of age in the U.S. Currently, there is no known way to prevent SIDS, but there are ways to reduce the risk. Several factors present during pregnancy, at birth, and throughout the first year after birth that can impact SIDS risk. The Committee encourages CDC to increase public awareness and provider education to reduce the risks.

Tobacco.—The Committee is deeply troubled by the dramatic increase in e-cigarette use among youth and concurs with the Surgeon General that youth use of e-cigarettes has reached epidemic levels. The Committee is also concerned that certain populations and regions of the country continue to experience high rates of tobacco use and are disproportionately burdened by tobacco-related disease and premature death. The Committee urges CDC to continue its efforts to reduce this and other disparities in tobacco use prevalence. Accordingly, the Committee includes an increase of $40,000,000 so that CDC and States can use evidence-based strate-

gies to more robustly respond to the public health risk caused by the dramatic increase of youth use of e-cigarettes, enhance efforts to reduce tobacco use among certain populations and in areas with high tobacco use rates and tobacco-related mortality, as well as expand its highly effective Tips from Former Smokers campaign.

Vision and Eye Health.—The Committee includes an increase of $1,000,000 to enhance programs that prevent blindness and preserve sight. The Committee changes the title of this line to better reflect the extensive surveillance, epidemiological, and public health research and intervention capacity of CDC's Vision Health Initiative and its wide-ranging vision and eye health promotion, and disease prevention partnerships with Federal, State, and community partners.

WISEWOMAN.—The Committee strongly supports the mission of the WISEWOMAN program, helping uninsured and under-insured low-income women ages 40 to 64 understand and reduce their risk for heart disease and stroke; by providing risk factor screenings; and connecting them with lifestyle programs, health counseling and other community resources that promote healthy behavior change. The Committee includes an increase of $25,650,000 to expand the program to all 50 States and the District of Columbia.

BIRTH DEFECTS, DEVELOPMENTAL DISABILITIES, DISABILITIES AND HEALTH

Appropriation, fiscal year 2019	$155,560,000
Budget request, fiscal year 2020	112,000,000
Committee Recommendation	161,560,000
Change from enacted level	+6,000,000
Change from budget request	+49,560,000

This account supports efforts to conduct research on and address the causes of birth defects and developmental disabilities, as well as reduce the complications of blood disorders and improve the health of people with disabilities.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Child Health and Development	$65,800,000
Birth Defects	*19,000,000*
Fetal Death	*900,000*
Fetal Alcohol Syndrome	*11,000,000*
Folic Acid	*3,150,000*
Infant Health	*8,650,000*
Autism	*23,100,000*
Health and Development for People with Disabilities	68,660,000
Disability & Health incl. Child Development	*30,000,000*
Tourette Syndrome	*2,000,000*
Early Hearing Detection and Intervention	*10,760,000*
Muscular Dystrophy	*6,000,000*
Attention Deficit Hyperactivity Disorder	*1,900,000*
Fragile X	*2,000,000*
Spina Bifida	*8,000,000*
Congenital Heart	*8,000,000*
Public Health Approach to Blood Disorders	4,400,000
Hemophilia Activities	3,500,000
Hemophilia Treatment Centers	5,100,000
Thalassemia	2,100,000
Neonatal Abstinence Syndrome	2,000,000
Surveillance for Emerging Threats to Mothers and Babies	10,000,000

Congenital Heart Defects.—The Committee includes an increase of $4,000,000 for grants or cooperative agreements to provide technical assistance to State and local agencies to complement intramural programs and to conduct applied research related to screening newborns, evaluation, diagnosis, results reporting, data collection, surveillance, intervention programs, systems, and follow-up of children identified through Critical Congenital Heart Defects screening to better understand the long-term outcomes and needs of this population.

Duchenne Muscular Dystrophy Surveillance.—The Committee is encouraged by CDC's support of efforts to implement the updated ICD 10 code for Duchenne and Becker Muscular Dystrophy (DBMD) and requests an update on the use of MD STARnet to measure how accurately and effectively the code is being applied to known cases of DBMD. The Committee is also aware of CDC's ongoing efforts to assess healthcare utilization and disease burden in DBMD and requests an update in the fiscal year 2021 Congressional Budget Justification.

Health Promotion for People with Disabilities.—The Committee supports the National Center on Birth Defects and Developmental Disabilities in funding the National Center on Health, Physical Activity, and Disability (NCHPAD) and its primary goal of promoting better health, wellness, and quality of life for people with disabilities. The Committee encourages NCHPAD to implement a demonstration project to develop and implement strategies to reduce diabetes and obesity among people who are mobility-impaired.

Maternal Mortality.—The Committee remains concerned about the maternal mortality rate in the U.S., which doubled in the last two decades. In light of studies exploring the effect of Cesarean sections on maternal mortality, the Committee urges CDC to provide technical assistance for State databases and data collection of pregnancy-associated and pregnancy-related deaths, to include data on whether a delivery was vaginal, via Cesarean section, or otherwise. Furthermore, the Committee is concerned that implicit bias may be a factor in the disproportionately high mortality rate of black mothers compared to their white counterparts. Accordingly, the Committee encourages the CDC to provide technical assistance to State Maternal Mortality Review Committees that includes evidence-informed interventions to address implicit bias in health care providers and to States establishing Maternal Mortality Review Committees.

Myotonic Dystrophy.—The Committee recognizes that myotonic dystrophy is a serious degenerate genetic condition that is often difficult to diagnose. However, early detection can improve health outcomes for individuals living with the condition. The Committee encourages CDC to review how it can advance education, knowledge, and related outreach activities to foster myotonic screening for newborns. The Committee requests an update on these activities in the fiscal year 2021 Congressional Budget Justification.

Spina Bifida.—The Committee includes an increase of $2,000,000 for Spina Bifida, the most common permanently disabling congenital disability compatible with life in the U.S. While Spina Bifida and related neural tube defects are sometimes preventable through education and adequate daily folic acid consumption, there are an estimated 166,000 individuals, more than half of whom are

18 and older, living with all forms of this complex birth defect. The Committee encourages CDC to use funding provided for the National Spina Bifida Program to support the continuation of the Spina Bifida Clinical Care Monitoring and Tracking Program which works with the National Spina Bifida Registry to guide the health care community in best treatment options for people living with Spina Bifida.

Surveillance for Emerging Threats to Mothers and Babies.—The Committee recognizes the innovative work of the National Center on Birth Defects and Developmental Disabilities, and also recognizes the threat that the Zika virus continues to pose to mothers and babies across the United States and the U.S. Territories. The Committee urges the Center to continue to track mothers and infants to better understand how exposure to Zika and other emerging threats can affect children as they age.

Thalassemia.—The Committee is aware of the critical work done by the thalassemia program at CDC in identifying patients with this rare genetic blood disorder and connecting them to services and to life-saving treatment centers. Thalassemia patients experience serious comorbidities that can impact almost every aspect of their lives. The Committee urges CDC to continue and strengthen this collaboration among thalassemia treatment centers, non-profits organizations, and patients and their families.

PUBLIC HEALTH SCIENTIFIC SERVICES

Appropriation, fiscal year 2019	$496,397,000
Budget request, fiscal year 2020	468,000,000
Committee Recommendation	603,897,000
Change from enacted level	+107,500,000
Change from budget request	+135,897,000

This account supports programs that provide leadership and training for the public health workforce, support infrastructure to modernize public health surveillance, promote and facilitate science standards and policies, and improve access to information on disease outbreaks and other threats.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Health Statistics	$160,397,000
Surveillance, Epidemiology, and Informatics	387,500,000
Public Health Workforce	56,000,000

Familial Hypercholesterolemia.—The Committee includes $500,000 for provider education and public awareness for Familial Hypercholesterolemia (FH), an inherited genetic disorder that causes early, aggressive, heart disease. The Committee is concerned that more than 90 percent of those in the U.S. who are affected with FH are completely unaware of the condition, and supports CDC working with a national organization to increase provider education and public awareness so that early diagnosis and treatment can normalize the risk of heart disease for people with FH.

Neurological Diseases Surveillance System.—The Committee is pleased that CDC initiated developmental and implementation

work for the National Neurological Conditions Surveillance System (NNCSS). The NNCSS will provide a foundation for the evaluation and understanding of neurological conditions by collecting information on incidence and prevalence, geographic clusters of conditions, demographic variability, outcome measures and health care practices and utilization. The Committee provides $5,000,000 within the total for Surveillance, Epidemiology, and Informatics to add at least one severe neuropsychiatric disorder, such as schizophrenia, to NNCSS implementation.

Primary Immunodeficiencies.—The Committee includes $3,000,000, an increase of $2,000,000, to continue and expand the existing program of education and awareness related to primary immunodeficiencies. This program has proven effective in identifying undiagnosed patients and linking them to centers of care. With NIH estimating that one to two percent of the U.S. population is affected by these disorders, a greater commitment is required to maximize the benefits of this effort.

Public Health Data Surveillance/IT Systems Modernization.—The Committee acknowledges that CDC has taken important steps to modernize its surveillance infrastructure through the implementation of its Surveillance Strategy, but recognizes that more needs to be done to ensure that CDC can develop and deploy world-class data and analytics that scale rapidly in emergencies, provide predictive capacity to identify emerging threats, reduce burden on public health partners who are reporting data and ensure bidirectional information flows. The nation's public health data systems are antiquated, rely on obsolete surveillance methods, and are in dire need of security upgrades. Lack of interoperability, reporting consistency, and data standards leads to errors in quality, timeliness, and communication. In addition, CDC must take steps to ensure that the public health workforce possesses and maintains state of the art data science skills needed to put the data to use through public health action. The Committee includes $100,000,000 for the first year of a multi-year initiative for CDC to lead the effort to improve public health data by providing support to Federal data modernization efforts including the National Center for Health Statistics, State, local, tribal and territorial partners, and to work with academic and private sector partners to innovate new tools and approaches for maximizing the public health impact of the data that keeps our communities safe and healthy. Within 120 days of enactment of this Act, the Committee requests a multi-year plan for this initiative, including at least five years of budget projections, as well as the innovation strategy for surveys conducted by the National Center for Health Statistics.

Public Health Workforce.—The bill includes an increase of $5,000,000 to support expansion of workforce and training programs, including the Epidemic Intelligence Service, that provide HHS, and State and local health departments with skilled staff, technical assistance, and education services. The Committee recognizes that a robust and well-trained public health workforce is critical.

ENVIRONMENTAL HEALTH

Appropriation, fiscal year 2019	$209,350,000
Budget request, fiscal year 2020	157,000,000
Committee Recommendation	243,350,000
Change from enacted level..	+34,000,000
Change from budget request.	+86,350,000

The Committee recommendation includes $226,350,000 in discretionary appropriations and $17,000,000 in transfers from the PPH Fund.

Programs supported within Environmental Health conduct surveillance and data collection to detect and address emerging pathogens and environmental toxins that pose significant challenges to public health, as well as determine whether and at what level of exposure these substances are harmful to humans.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Environmental Health Laboratory	$73,750,000
Newborn Screening Quality Assurance Program	*20,000,000*
Newborn Screening /Severe Combined Immunodeficiency Diseases	*1,250,000*
Environmental Health Activities	54,600,000
Environmental Health Activities	*21,000,000*
Safe Water	*8,600,000*
Amyotrophic Lateral Sclerosis (ALS) Registry	*10,000,000*
Climate Change	*15,000,000*
Environmental and Health Outcome Tracking Network	40,000,000
Asthma	34,000,000
Trevor's Law	1,000,000
Childhood Lead Poisoning	40,000,000

Childhood Lead Poisoning.—The Committee includes an increase of $5,000,000 to strengthen blood lead surveillance by supporting additional State and local programs to improve blood lead screening test rates, identify high-risk populations, and ensure effective follow-up for children with elevated blood lead levels.

Climate and Health.—The Committee recognizes that communities are already having to adapt to the health effects caused by climate change, including health threats from increased spread of vector-borne diseases, higher levels of air pollution, hotter temperatures, extreme weather events, and longer allergy seasons. The Committee includes an increase of $5,000,000 for the Climate and Health Program to expand investments to a larger number of States, cities, or Tribes to plan for public health threats caused by climate change, and to conduct an analysis of grantee programs to allow for broad sharing of best practices and strategies that best protect public health.

Environmental Health Tracking Network.—The Committee includes an increase of $6,000,000 to add at least three States that participate in this public health surveillance system that develops a comprehensive data source of environmental hazard, exposure, and health data.

Laboratory Harmonization.—The Committee includes an increase of $4,000,000 to enhance efforts of the Environmental Health Laboratory to harmonize the reporting of clinical laboratory test results, so that more patients can have access to dependable and ac-

curate results, which play an important role in medical decision-making.

National Asthma Control Program.—The Committee includes an increase of $5,000,000 for the National Asthma Control Program (NACP). The Committee directs the NACP to increase the number of States carrying out programmatic activities and to use a population-adjusted burden of disease criteria as a significant factor for new competitive awards.

Newborn Screening.—The Committee includes an increase of $4,000,000 to further support newborn screening efforts and so that affected newborns can receive early and often life-saving treatment.

Per and Polyfluoroalkyl Substances Screening.—The Committee includes $5,000,000 for CDC to conduct a health study at multiple domestic, non-Department of Defense sites to examine the health effects of exposure to per- and polyfluoroalkyl substances (PFAS) for the purpose of expanding the science about the relationship between PFAS exposure and certain health outcomes.

INJURY PREVENTION AND CONTROL

Appropriation, fiscal year 2019	$648,559,000
Budget request, fiscal year 2020	628,839,000
Committee Recommendation	697,559,000
Change from enacted level	+49,000,000
Change from budget request	+68,720,000

Programs supported within Injury Prevention and Control provide national leadership on violence and injury prevention, conduct research and surveillance, and promote evidence-based strategies to inform real-world solutions to prevent premature death and disability and to reduce human suffering and medical costs caused by injury and violence.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Intentional Injury	$144,730,000
Domestic Violence and Sexual Violence	*34,700,000*
Child Maltreatment	*7,250,000*
Child Sexual Abuse Prevention	*2,000,000*
Youth Violence Prevention	*15,100,000*
Domestic Violence Community Projects	*5,500,000*
Firearm Injury and Mortality Prevention Research	*25,000,000*
Rape Prevention	*54,430,000*
Suicide	*10,000,000*
National Violent Death Reporting System	*25,500,000*
Unintentional Injury	11,800,000
Traumatic Brain Injury	*6,750,000*
Drowning	*2,000,000*
Elderly Falls	*3,050,000*
Injury Prevention Activities	28,950,000
Opioid Overdose Prevention and Surveillance	475,579,000
Injury Control Research Centers	11,000,000

Adverse Childhood Experiences.—The Committee commends CDC for providing funding to States to conduct surveillance on youth and adult behavioral risk factors. The Committee encourages CDC to prioritize collection and reporting of data on adverse childhood experiences, including exposure to violence. The Committee also encourages CDC to report on the prevalence of adverse childhood

experiences across geographic, race and ethnicity, disability and socioeconomic status and to work with State and local health departments to implement evidence-based interventions aimed at reducing adverse childhood experience.

Child Sexual Abuse Prevention.—While the incidence of child sexual abuse is believed to be far greater than reported, it is estimated to affect nearly 10 percent of all U.S. children, according to CDC. In light of the harmful physical, cognitive and emotional effects on a child's development, a far more proactive approach is needed to prevent child sexual abuse. Therefore, the Committee includes $2,000,000 for a new research effort supporting the development, evaluation, and dissemination of effective child sexual abuse prevention practice and policy.

Drowning.—The Committee includes $2,000,000 to prevent fatal drownings. This funding allows CDC to scale proven drowning prevention programs with national organizations working with underserved youth, and to support State drowning surveillance efforts and a national plan on water safety.

Elderly Falls.—The Committee includes an increase of $1,000,000 to enhance programs and research to prevent older adult falls.

Firearm Injury and Mortality Prevention Research.—The Committee includes $25,000,000 for firearm injury and mortality prevention research through a public health approach that focuses on data to understand its causes and to inform prevention strategies. According to CDC data, there were nearly 40,000 firearm-related deaths in 2017. In addition, more than 130,000 non-fatal firearm injuries from assault or self-harm are treated annually in hospital emergency departments. The Committee directs CDC to focus on activities that will have the greatest potential public health impact including strengthen data collection to better understand firearm deaths and non-fatal injuries to help inform firearm injury prevention; and conduct evaluation and other applied research projects that align with the Institute of Medicine/National Research Council recommendations to better understand public health prevention strategies for reducing firearm injury and death. Projects should focus on addressing the gaps in knowledge, such as the characteristics of firearm violence, risk and protective factors for self-directed and interpersonal firearm violence, and effectiveness of interventions to prevent firearm injury such as safe storage practices.

Injury Prevention Research Centers.—The Committee includes an increase of $2,000,000 to award additional Center grants. Furthermore, the Committee is aware of alarming rates of injury and their significant potential to affect the long-term psychological and physical well-being of college athletes. Thus, the Committee encourages CDC to work with the Centers to identify best practice standards to prevent these injuries.

National Violent Death Reporting System.—The Committee includes an increase of $2,000,000 for the only State-based surveillance system that pools information together from multiple sources into a usable, anonymous database of all types of violent deaths so that prevention efforts can be informed and progress monitored.

Opioid Abuse and Overdose Prevention.—The Committee commends CDC for its leadership on combating opioid drug overdoses. The Committee encourages the Director to continue to implement

these activities based on population-adjusted burden of disease criteria, including mortality data (age adjusted rate), as significant criteria when distributing funds for overdose prevention activities.

Rape Prevention.—The Committee includes an increase of $5,000,000 to amplify funding to States and Territories to support essential rape prevention and education programs.

Suicide.—The Committee recognizes that suicide is devastating communities across the U.S., as evidenced by more than 47,000 deaths in 2017. While depression and other mental health conditions are a significant risk factor for suicide, less than half of the people who die from suicide have a known mental health condition. The Committee includes $10,000,000 for a new effort at CDC to explore the leading mechanisms of suicide deaths and identify prevention strategies to reduce the deaths by suicide through pilot projects to enhance the completeness of data to capture mechanisms of death; expand syndromic surveillance; and support research and evaluation projects to understand the pathways and mechanisms that contribute to suicide attempts, and identify prevention strategies.

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

Appropriation, fiscal year 2019	$336,300,000
Budget request, fiscal year 2020	190,000,000
Committee Recommendation	346,300,000
Change from enacted level	+10,000,000
Change from budget request	+156,300,000

The National Institute for Occupational Safety and Health (NIOSH) conducts applied research, develops criteria for occupational safety and health standards, and provides technical services to government, labor, and industry, including training for the prevention of work-related diseases and injuries. This appropriation supports surveillance, health hazard evaluations, intramural and extramural research, instrument and methods development, dissemination, and training grants.

Within the total for NIOSH, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
National Occupational Research Agenda	$118,000,000
Agricultural, Forestry, and Fishing	*27,500,000*
Education and Research Centers	31,000,000
Personal Protective Technology	20,000,000
Mining Research	59,500,000
Firefighter Cancer Registry	1,600,000
Other Occupational Safety and Health Research	116,200,000
National Mesothelioma Registry and Tissue Bank	*1,600,000*
Total Worker Health	*7,000,000*

Agricultural, Forestry, and Fishing.—The Committee includes an increase of $2,000,000 to expand efforts to protect workers in this sector by providing leadership in applied research, disease and injury surveillance, education and prevention.

Education and Research Centers.—The Committee includes an increase of $2,000,000 to further support efforts to reduce work-related injuries and illnesses by prevention research, and implementing programs to improve occupational health and safety.

Firefighter Cancer Registry.—The Committee includes an increase of $600,000 to further support the implementation of the Firefighter Cancer Registry Act of 2018.

Mesothelioma.—The Committee recognizes that CDC undertook a feasibility study for a mesothelioma patient registry in fiscal year 2019 to evaluate case finding methodologies to determine incidence and prevalence, demographics and risk factors. The Committee includes an increase of $400,000 to take the next step toward establishment of a national mesothelioma patient registry through collecting data on individuals suffering from the disease and identify gaps in treatment in order for researchers to develop new treatments and a cure for this disease, which is among the deadliest and most painful cancers. The Committee encourages CDC to establish priorities for successful outcomes; develop and revise standards of care and treatment best practices; share evidence-based information between physicians across the country; and implement benchmarks to improve care for mesothelioma patients.

Total Worker Health.—The Committee includes an increase of $2,000,000 in the Other Occupational Safety and Health Research line for the Total Worker Health program that funds Centers of Excellence that advance the overall safety, health, and well-being of the diverse population of workers in our nation.

ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION PROGRAM

Appropriation, fiscal year 2019	$55,358,000
Budget request, fiscal year 2020	55,358,000
Committee Recommendation	55,358,000
Change from enacted level	– – –
Change from budget request	– – –

The Energy Employees Occupational Illness Compensation Program (EEOICPA) provides compensation to employees and survivors of employees of Department of Energy facilities and private contractors who have been diagnosed with a radiation-related cancer, beryllium-related disease, or chronic silicosis as a result of their work. NIOSH estimates occupational radiation exposure for cancer cases, considers and issues determinations for adding classes of workers to the Special Exposure Cohort, and provides administrative support to the Advisory Board on Radiation and Worker Health.

GLOBAL HEALTH

Appropriation, fiscal year 2019	$488,621,000
Budget request, fiscal year 2020	456,984,000
Committee Recommendation	513,621,000
Change from enacted level	+25,000,000
Change from budget request	+56,637,000

Through its Global Health activities, CDC coordinates, cooperates, participates with, and provides consultation to other nations, Federal agencies, and international organizations to prevent and contain diseases and environmental health problems and to develop and apply health promotion activities. In cooperation with ministries of health and other appropriate organizations, CDC tracks and assesses evolving global health issues and identifies and develops activities to apply CDC's technical expertise.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Global AIDS Program	$128,421,000
Global Immunization Program	$226,000,000
Polio Eradication	*$176,000,000*
Other Global/Measles	*$50,000,000*
Parasitic Diseases and Malaria	$26,000,000
Global Disease Detection and Emergency Response	$123,400,000
Global Public Health Capacity Development	$9,800,000

Global Disease Detection.—With the intent of maintaining the global health capacity developed over the past five years with Ebola supplemental funds, the Committee includes an increase of $25,000,000 to advance global efforts to detect epidemic threats earlier, respond more effectively, and prevent avoidable crises. The Committee supports CDC's efforts to provide additional support for program implementation, and scientific and technical experts in Atlanta and in the field with concentrated efforts on countries, populations, and programs where resources will have the greatest public health impact.

Global Health Research.—The Committee supports CDC's work to protect global health security through the Center for Global Health, the National Center for Emerging and Zoonotic Infectious Diseases, and other programs that detect, prevent, and respond to infectious disease and other health threats. As emerging infectious diseases like Ebola and Zika represent profound challenges for our health system, the Committee supports continued and enhanced work in research and development aimed at creating new tools to respond to health threats at home and abroad. The Committee urges CDC officials to ensure that the importance of research and development to global health security is appropriately reflected in their international engagements.

Global Health Security Strategy.—The Committee is disappointed that the Global Health Security Strategy failed to meet the required deadline and remains past due. The Committee expects the Administration to prioritize this document and promptly provide it to the appropriate Congressional committees.

Global Water Strategy.—The Committee recognizes CDC's work to provide sustainable Water, Sanitation, & Hygiene (WASH) in healthcare facilities, aligned with the 2017 US Global Water Strategy, and to support WASH efforts to contribute to the elimination of cholera as a public health threat as outlined by Ending Cholera—A Global Roadmap to 2030. The Committee urges CDC to increase its WASH efforts in areas where Neglected Tropical Diseases are endemic, and to enhance efforts to improve the impact of WASH interventions in humanitarian emergencies by assisting partners to improve monitoring of WASH interventions, conduct research on innovative WASH interventions, and improve disease surveillance for WASH-related illness among refugees, displaced persons, and emergency affected populations. The Committee further encourages CDC to provide laboratory support for global WASH activities.

Population-based Surveillance Platforms.—The Committee directs at least $3,000,000 to be used to support existing longitudinal

population-based infectious disease surveillance platforms that enable comparative analysis between urban and rural populations in the developing world.

Soil Transmitted Helminth and Related Diseases of Poverty.—The Committee includes $1,500,000 to extend currently funded CDC projects aimed at surveillance, source remediation and clinical care to reduce soil transmitted helminth infection.

PUBLIC HEALTH PREPAREDNESS AND RESPONSE

Appropriation, fiscal year 2019	$855,200,000
Budget request, fiscal year 2020	825,000,000
Committee Recommendation	880,200,000
Change from enacted level	+25,000,000
Change from budget request	+55,200,000

The Public Health Preparedness and Response (PHPR) account supports programs that build and strengthen national preparedness for public health emergencies, both naturally-occurring and intentional. PHPR supports needs assessments, response planning, training, epidemiology and surveillance, and upgrades for laboratory capacity and communications systems.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
State and Local Preparedness and Response Capability	$708,200,000
Public Health Emergency Preparedness Cooperative Agreement	*700,000,000*
Academic Centers for Public Health Preparedness	*8,200,000*
CDC Preparedness and Response	172,000,000
BioSense	*23,000,000*
All Other CDC Preparedness and Response	*149,000,000*

Public Health Preparedness Cooperative Agreements.—The Committee includes an increase of $25,000,000 to enhance support to State and local health departments in developing and maintaining capable, flexible, and adaptable public health systems ready to rapidly respond in an emergency.

Strategic National Stockpile.—The Committee recognizes the reorganization of the Strategic National Stockpile (SNS) to the Office of the Assistant Secretary for Preparedness and Response. The Committee expects that CDC will continue its significant role in providing scientific expertise in decision-making related to procurement of countermeasures, and maintaining strong relationships with State and local public health departments to facilitate efficient deployment of countermeasures in public health emergencies.

BUILDINGS AND FACILITIES

Appropriation, fiscal year 2019	$30,000,000
Budget request, fiscal year 2020	30,000,000
Committee Recommendation	255,000,000
Change from enacted level	+225,000,000
Change from budget request	+225,000,000

The Committee recommendation includes $30,000,000 in discretionary budget authority and $225,000,000 in transfers from the HHS Nonrecurring Expenses Fund.

This account supports capital projects as well as repairs and improvements to restore, maintain, and improve CDC's assets at facilities in seven States and San Juan, Puerto Rico.

The Committee continues language to allow CDC to retain unobligated funds in the Individual Learning Accounts from departed employees to support the replacement of the underground and surface coal mine safety and health research facility.

Chamblee Research Support Building 108 and Campus Infrastructure Improvements.—The Committee directs $225,000,000 from the HHS Nonrecurring Expenses Fund for the Chamblee Research Support Building 108 and campus infrastructure improvements. These one-time projects will result in enhanced research collaboration and long-term lease cost avoidance.

CDC-WIDE ACTIVITIES AND PROGRAM SUPPORT

Appropriation, fiscal year 2019	$323,570,000
Budget request, fiscal year 2020	155,000,000
Committee Recommendation	323,570,000
Change from enacted level	– – –
Change from budget request	+168,570,000

The Committee recommendation includes $163,570,000 in discretionary funds and $160,000,000 in transfers from the PPH Fund.

This account supports public health leadership and support activities at CDC.

Within the total, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Preventive Health and Health Services Block Grant	$160,000,000
Public Health Leadership and Support	113,570,000
Infectious Disease Rapid Response Reserve Fund	50,000,000

Infectious Disease Rapid Response Reserve Fund.—The Committee includes $50,000,000 for the Infectious Diseases Rapid Response Reserve Fund. The Reserve Fund will provide an immediate source of funding to quickly respond to a future, imminent infectious disease crisis that endangers lives. Funds are available until expended.

Preventive Health and Health Services Block Grant.—The Committee continues to support the Preventive Health and Health Services Block grant, of which at least $7,000,000 is to support direct services to victims of sexual assault and to prevent rape.

NATIONAL INSTITUTES OF HEALTH

Appropriation, fiscal year 2019	$39,084,000,000
Budget request, fiscal year 2020	34,151,068,000
Committee Recommendation	41,084,000,000
Change from enacted level	+2,000,000,000
Change from budget request	+6,932,932,000

The Committee recommendation for the National Institutes of Health (NIH) program level includes $39,937,179,000 in discretionary appropriations and $1,146,821,000 in Public Health Service Act section 241 evaluation set-aside transfers. Within the total appropriation, the Committee recommendation includes $492,000,000 in budget authority authorized in the 21st Century Cures Act (P.L.

114–255). The bill includes an increase in discretionary budget authority of $2,219,000,000 above the fiscal year 2019 enacted level, which is necessary to maintain an overall increase of $2,000,000,000 while compensating for a reduction of $219,000,000 in funding made available by the Cures Act.

The mission of NIH is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability. NIH conducts and supports research to understand the basic biology of human health and disease; apply this understanding towards designing new approaches for preventing, diagnosing, and treating disease and disability; and ensure that these approaches are widely available.

The recommendation includes funding for initiatives established in the 21st Century Cures Act, including a total of $195,000,000 for the Cancer Moonshot Initiative; $500,000,000 for the "All of Us" precision medicine initiative (including $149,000,000 from the Cures Act); $411,000,000 for the Brain Research through Application of Innovative Neurotechnologies (BRAIN) Initiative (including $140,000,000 from the Cures Act); and $8,000,000 for regenerative medicine.

The Committee includes specific funding allocations for a number of initiatives and activities detailed in the Institute- and Center-specific sections below. The funding level also allows for an increase of 5 percent outside of these designated activities to support other efforts, including an increase in the number of new and competing Research Project Grants, with a focus on early-stage investigators and investigators seeking first-time renewals. The Committee expects NIH to provide a stipend level increase to training grantees that is consistent with any fiscal year 2020 Federal employee pay raise.

NATIONAL CANCER INSTITUTE (NCI)

Appropriation, fiscal year 2019	$6,143,892,000
Budget request, fiscal year 2020	5,246,737,000
Committee Recommendation	6,444,165,000
Change from enacted level	+300,273,000
Change from budget request	+1,197,428,000

Mission.—NCI leads, conducts, and supports cancer research across the nation to advance scientific knowledge and help all people live longer, healthier lives.

Cancer Moonshot.—The Committee directs NIH to transfer $195,000,000 from the NIH Innovation Account to NCI to support the Cancer Moonshot initiative. These funds were authorized in the 21st Century Cures Act (P.L. 114–255).

Childhood Cancer Data Initiative.—The Committee includes $50,000,000 for the first year of the Childhood Cancer Data Initiative, as proposed in the fiscal year 2020 budget request. The development of new therapies is important to finding a cure for childhood cancers, many of which have not seen new therapies in decades.

Brain Cancer in Children.—The Committee recognizes that brain cancer remains the most fatal of all pediatric cancers. Despite progress in other diseases, pediatric brain cancer survival rates have not improved for decades and have lagged behind the strides

made in other cancers. The majority of children who survive may experience lifelong impairments and disabilities that result from high levels of toxicity associated with treatment. The committee strongly encourages NIH to support additional research on pediatric brain cancer, including but not limited to drug delivery methods and new therapies with reduced levels of toxicity and long-term complications.

Cancer Immunotherapy.—The Committee continues to be encouraged by new breakthroughs in cancer immunotherapy, which are revolutionizing treatments for a growing number of cancers. The Committee urges NCI to prioritize research and trials for innovative immunotherapeutic approaches. In some cases, however, the side effects of such treatments are far different than those associated with chemotherapy. Early recognition and management of cancer immunotherapy-related side effects can result in resolution of these side effects before permanent damage is done, and allows for continued cancer treatment. The Committee urges NCI to prioritize research and education on the underlying mechanisms of cancer immunotherapy.

Children's Oncology Group.—The Committee continues to support the important work of the Children's Oncology Group and encourages NCI to continue their important role in drug development. The majority of childhood cancer patients are enrolled in trials conducted by the Children's Oncology Group and advances in treatment are dependent on their ability to conduct trials quickly and enroll as many pediatric patients as possible.

Clinical Trials for Primary Prevention of Breast and Ovarian Cancers.—The Committee urges NCI to support phase I, phase II, phase II/III, and phase III clinical trials focused on primary immunoprevention of breast cancer and primary immunoprevention of ovarian cancer. The Committee encourages NCI to include costs related to GMP and GLP expenses, direct subject/patient expense reimbursement associated with enrollment, participation, retention, long-term patient outcomes, and long-term research outcomes. These trials should involve relevant underrepresented and minority communities. The Committee encourages NCI to work consultation with NCI-designated Cancer Centers, the National Clinical Trials Network, the NCI Community Research Program, and nonprofit foundations currently working in this area.

Collaboration Between Agencies Regarding Pediatric Investigation of Appropriate New Drugs.—The Committee recognizes that Title V of Food and Drug Administration Reauthorization Act (FDARA) amended the Pediatric Research Equity Act (PREA) to support the early evaluation of potentially effective drugs by requiring evaluation of new molecularly targeted drugs and biologics intended for adults with cancer if the drug is directed at a molecular target substantially relevant to the growth or progress of a pediatric cancer. The law directs the FDA, in collaboration with the NCI, to establish, publish, and regularly update a list of molecular targets considered based on data the Agency determines to be adequate, to be substantially relevant to the growth or progression of pediatric cancers, and that may trigger the requirement for pediatric investigations. The Committee encourages NCI and FDA to continue to collaborate with the patient community, providers, and manufactures,

and continue to conduct a transparent and inclusive process to implement FDARA.

Deadliest Cancers.—The Committee notes that while more effective screening methods and treatments have lowered overall cancer incidence and death rates, several cancer types with particularly low survival rates have limited screening methods, and effective treatments for these cancers are also limited. The Recalcitrant Cancers Research Act of 2012 defined "recalcitrant cancers" as those with a five-year survival rate below 50 percent. These cancers account for nearly half of all cancer deaths in the U.S. and include cancers of the brain, esophagus, liver, lung, ovary, pancreas, and stomach. The Committee notes that in fiscal year 2020, NCI will report on the effectiveness of the scientific framework process NCI undertook to carry out implementation of the Recalcitrant Cancers Research Act.

Early Onset Colorectal Cancer.—The Committee notes that while overall colorectal cancer incidence rates decreased over the last 20 years, there has been an increase among adults ages 20–54. The Committee urges NCI to support research on the causes for the increased rate of colorectal cancer in this population. The Committee encourages NCI to expand its knowledge of the natural history of the disease to help advance the development of improved screening modalities and treatment.

Electronic Cigarettes.—The Committee recognizes that the increased use of electronic cigarettes and similar devices pose possible threats to public health, particularly for teenagers and young adults. While these devices are often promoted as safe alternatives to tobacco, studies suggest they may still contain chemicals that pose health risks to the user. The Committee urges NIH to expand research on the oral health consequences of e-cigarettes, and to consider interdisciplinary collaboration between schools of dentistry and traditional cancer researchers.

Kidney Cancer.—The Committee is concerned with the growing number of kidney cancer diagnoses and lack of early detection of the disease. The Committee encourages NCI to continue to prioritize meritorious research that could assist in developing diagnostic tests and early detection techniques.

Liver Cancer.—The Committee commends NCI for supporting research on liver cancer and for its inter-institute work to encourage more research focused on liver cancer, but urges greater priority to address the threat of liver cancer, the second deadliest cancer with a five-year survival rate of 20 percent. The Committee also notes that the link between hepatitis B infection and primary liver cancer is well established with up to 60 percent of global liver cancer cases caused by the hepatitis B virus (HBV) and, therefore, encourages continued close collaboration with National Institute of Allergy and Infectious Diseases (NIAID) and the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) and active participation in the Director's newly-established Trans-NIH Hepatitis B working group. The Committee requests an update on NCI's activities in these areas in the fiscal year 2021 Congressional Justification.

Melanoma.—The Committee encourages NCI to support research from development of experimental models to identify mechanisms and associated biomarkers of risk for development of melanoma,

new technologies for early detection as well as trials that develop population-based evidence for screening, including ophthalmologic, and sun protection practices. The Committee also encourages collaboration with the FDA to develop scientific review pathways that more efficiently evaluate new sunscreen ingredients.

Discovery of biomarkers of response and resistance is critical at this point in melanoma research. The Committee urges NCI to support mechanistic research into response and resistance to therapy, and to develop a strategic plan across the public and private sector to systematically focus on biomarker research with the most advanced technologies (genetic, gene expression, or protein-based), so that physicians have the diagnostic tools to deliver personalized medicine to each patient. The Committee also urges NCI to continue the advances in adjuvant therapy by extending research to earlier stage disease and testing shorter, less toxic and more economical regimens. The Committee further encourages research to understand mechanisms that underlie clinical dormancy to provide an effective means of preventing tumor recurrence and improving quality of life and longevity of survivors.

The Committee is aware symptomatic brain (CNS) and leptomeningeal (LMD) metastases remain difficult to treat and may become the last frontier in systemic therapy in melanoma and other cancers. The Committee urges expanding research to identify treatments for CNS and LMD melanoma, which may pave the way for advances in other cancers.

Melanoma is a heterogeneous cancer and includes rare subtypes such as uveal melanoma, the most common cancer of the eye, as well as mucosal and pediatric melanoma. States have difficulty capturing and defining cases due to the complex nature of arriving at the true diagnosis. The Committee encourages NCI to support research through national registries to better understand natural history, epidemiology, as well as patient reported and clinical outcomes in these rare melanoma subtypes.

The Committee requests an update on these requests in the fiscal year 2021 Congressional Justification.

Metastatic Cancer in the Surveillance, Epidemiology, and End Results Registry.—The Committee notes recent discussions about modernizing the Surveillance, Epidemiology, and End Results (SEER) Registry and filling in key data gaps, such as metastatic recurrence. The Committee encourages NCI to advance this effort in a systematic and meaningful way that ultimately improves SEER Registry infrastructure and capabilities.

Office of Cancer Survivorship.—The Committee recognizes that the Office of Cancer Survivorship (OCS) provides leadership in research on a wide range of cancer survivorship topics. However, the Committee recognizes that the needs of childhood cancer survivors are unique. By 2020, there will be at least 500,000 childhood cancer survivors in the U.S. Two-thirds of childhood cancer survivors suffer from at least one health problem late effect caused from their treatment. The Committee urges the OCS to provide a special focus on childhood cancer survivorship, including analyzing secondary prevention strategies that go beyond the standard and routine therapies of diet, exercise and tobacco avoidance and focus on specific needs for childhood cancer survivors, such as psycho-social treatments.

Pancreatic Cancer.—Pancreatic cancer is the third leading cause of cancer-related death in the U.S. More than 56,700 Americans will be diagnosed with the disease in 2019, representing a two percent increase over last year, and pancreatic cancer remains the only major cancer with a five-year survival rate in the single digits at just nine percent. The Committee appreciates NCI's recent submissions of the five-year updates to the reports required by the Recalcitrant Cancer Research Act of 2012. The Committee encourages NCI to continue to support research efforts to advance progress for patients diagnosed with pancreatic cancer and other cancers with low five-year survival rates.

Pediatric Immunotherapy Trials.—The Committee encourages NCI to collaborate with pediatric immunotherapy trials that are combining novel immunotherapy with the standard-of-care chemotherapy and radiation treatments. The Committee recognizes the need for the expansion of scope in ongoing trials to include more types of pediatric cancers and encourages NCI to use data produced from the trials when creating larger comprehensive data sets.

Prostate Cancer.—The Committee is aware of NCI's efforts in prostate cancer research and encourages additional investment into understanding why certain populations, including African-American men and men with a strong family history of prostate cancer, have the highest incidence rate of this disease. The Committee urges NCI to consider how diagnostic and genetic testing and screening may reduce the rate of mortality among high-risk populations.

Rare Cancer Therapeutic Research and Development Program.—More than 500,000 Americans are diagnosed with a rare form of cancer every year. Rare cancers account for 374 of 396 distinct forms of cancer, and include all pediatric cancers. Each of these forms of cancer would benefit from targeted therapies that frequently work more effectively and with fewer side effects than traditional chemotherapy and radiation. The NCATS novel scientific model has proven successful in addressing other rare diseases and would benefit rare cancer therapeutic development. Therefore, the Committee urges NCI to collaborate with NCATS as appropriate on a rare cancer translational medicine initiative to accelerate the study of commonalities across rare cancers and the development of platform treatments for rare cancers to help patients who often have no other options.

Recalcitrant Cancers.—The Committee encourages NCI to incorporate the deadliest forms of childhood cancers into the recalcitrant cancers category, and to prioritize research on such cancers, which include anaplastic astrocytoma, diffuse intrinsic pontine glioma, glioblastoma, Juvenile myelomonocytic leukemia, high risk neuroblastoma, recurrent osteosarcoma, rhabdomyosarcoma, and diffuse anaplastic Wilms tumors. The Committee urges NCI to utilize available resources to aid in the discovery of better treatments and cures to improve overall childhood cancer survival rates. The Committee requests that NCI include an update on the progress being made to increase childhood cancer research in the Fiscal Year 2021 Congressional Justification.

Women and Lung Cancer.—The Committee notes that lung cancer has a disparate impact on women, particularly younger women who have never smoked. Additional research strategies are needed

to explore the differences in women with respect to lung cancer risk factors, incidence, and histology. The Committee urges NCI to accelerate research into treatments and implementation of lung cancer preventive services for women. The Committee requests an update on these activities in the fiscal year 2021 Congressional Justification.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE (NHLBI)

Appropriation, fiscal year 2019	$3,488,335,000
Budget request, fiscal year 2020	3,002,696,000
Committee Recommendation	3,658,822,000
Change from enacted level	+170,487,000
Change from budget request	+656,126,000

Mission.—NHLBI provides global leadership for a research, training, and education program to promote the prevention and treatment of heart, lung, and blood disorders and enhance the health of all individuals so that they can live longer and more fulfilling lives.

Chronic Obstructive Pulmonary Disease.—The Committee commends NHLBI and HRSA on educating providers and patients, including in rural and low-income communities, on Chronic Obstructive Pulmonary Disease (COPD) awareness, detection and management best practices. The agencies' efforts in this area are a model for effective collaboration across Federal agencies. The Committee encourages NHLBI to accelerate implementation of the action plan across relevant Federal agencies by supporting research and partnerships with various agencies.

Alzheimer's Disease and Vascular Dementia.—The Committee recognizes the value that well-characterized, longitudinal, population-based cohort studies provide in bringing to light more information about the risk factors related to dementia. By studying participants over time, much can be learned about cognitive decline and early biomarkers that will help us understand the role of environmental and genetic factors in disease development and progression. In time, however, mature cohorts naturally dwindle as participants pass away, requiring that the research mission be adjusted to continue to leverage the previous science and build upon it. Therefore, the Committee urges NHLBI to fund a pilot project on next generation cohorts, with the goal of determining the feasibility of recruiting descendant cohort participants to continue study into the development and progression of risk factors and to detect early signs of cognitive decline.

Asthma.—The Committee applauds NHLBI for its efforts to develop new National Asthma Education and Prevention guidelines. According to CDC, 24.6 million U.S. adults and children have asthma. Appropriate asthma management can significantly reduce costly services, including hospitalizations.

Blood Donor Questionnaire Educational Materials.—The Committee is concerned that certain FDA guidance in the educational materials provided in the blood donor questionnaire are inappropriate and misguided. The recommendations for deferral should not mention someone's sexual orientation, and rather focus on risk factors that might expose a potential donor to blood-borne illness. The Committee strongly recommends that NHLBI continue to provide

the FDA with the latest science on the risks of transmission of STIs through blood donation and transfusion.

Heart Disease.—Heart disease is the leading cause of death for both men and women in the U.S. Despite significant progress over the last half century, the Committee is concerned that this largely preventable disease continues to place a high burden on our nation's health and economy. The Committee is discouraged that new evidence shows that previous declines in cardiovascular disease (CVD) have stalled or even reversed for certain demographics. The Committee supports a NIH-wide prioritization of heart research to significantly strengthen the fight against heart disease. We commend NHLBI for its work focused on congenital heart disease, high-risk populations, including rural communities, and on the relationship between high blood pressure and age-related cognitive impairment and dementia. We further support NHLBI for its research on South Asians, who are four times more likely to have heart disease than the general public; experience heart attacks ten years earlier; and have higher mortality rates from heart disease than any other ethnic group.

Lymphedema and Lymphatic Diseases.—The Committee commends NHLBI's efforts to expand research on lymphedema and lymphatic diseases and encourages continued implementation of the research recommendations of the 2015 Trans-NIH Lymphatics Symposium and coordination across relevant Institutes and Centers.

Reducing Residual Cardiovascular Risk.—Cardiovascular events account for one of every three deaths in the United States; about 2,300 Americans die of cardiovascular disease each day. Cholesterol therapies, such as statins, have been successful in reducing risk of cardiovascular disease, but substantial residual and untreated risk remains for these individuals beyond cholesterol management. A clinical trial called REDUCE-IT has demonstrated a 25 percent relative risk reduction in major adverse cardiovascular events beyond cholesterol management, from the use of highly purified and stable eicosapentaenoic acid (EPA) in addition to statin therapy. The Committee is concerned that, despite these statistics, many individuals do not regularly access treatments for residual risk beyond statin therapy. The Committee urges NHLBI to support research in this area as well as efforts, particularly through the "Know Your Numbers" campaign, to promote awareness among physicians and patients of the residual cardiovascular risks beyond statin therapy and the importance of taking preventative action to reduce this risk.

Sickle Cell Disease.—Sickle cell disease (SCD) is the most common inherited blood disorder in the U.S. Academic medical centers located in states with significant populations of sickle cell patients have made progress in treating the disease through NIH-sponsored clinical trials and through blood and marrow transplantation, which is currently the only therapy that can cure the disease. The Committee urges NHLBI to prioritize and implement robust investment to drastically spur, strengthen, accelerate and coordinate sickle cell disease research. The Committee also encourages NIH to support clinical trials for treatment of SCD, which includes multiple promising approaches to eradicate this disease, save lives, and reduce dramatically the substantial health care costs associated

with SCD for children and adults. Finally, the Committee encourages NIH to consider programs both domestically and globally to evaluate the effectiveness of screening technologies for infants and children with the sickle cell trait and disease.

Sleep and Circadian-Dependent Mechanisms Contributing to Opiate Use Disorder.—The Committee applauds NIDA and NINDS for their work to address the opioid crisis through innovative research directions supported by the Helping to End Addiction Long-Term (HEAL) Initiative. The Committee notes the promise that research on sleep and circadian mechanisms can play in the prevention and treatment of opiate use disorder and encourages NIDA to work collaboratively with NHLBI and other relevant Institutes and Centers to continue the exploration of innovative research pathways.

Sleep Disorders.—The Committee commends the recent expansion and advancement of the sleep and circadian research portfolio under the coordination of the National Center on Sleep Disorders Research (NCSDR). The Committee encourages dedicated research activities on specific sleep disorders, such as narcolepsy and restless legs syndrome, to ensure scientific progress benefits patients impacted by debilitating conditions disordering their sleep and biological rhythms.

The Heart Truth Program.—For over a decade, The Heart Truth program has worked to raise awareness about women's risk of heart disease. The program's goals have been to increase awareness that heart disease is the leading cause of death among women and to increase the conversations between women and their healthcare providers. Accordingly, the Committee encourages the NHLBI to continue support for The Heart Truth program, and to continue working closely with its longstanding partners, as well as new, non-traditional partners, to broaden the program's reach.

NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH (NIDCR)

Appropriation, fiscal year 2019	$461,781,000
Budget request, fiscal year 2020	397,493,000
Committee Recommendation	484,350,000
Change from enacted level	+22,569,000
Change from budget request	+86,857,000

Mission.—The mission of NIDCR is to improve dental, oral, and craniofacial health through research, research training, and the dissemination of health information.

Oral Health.—The Committee recognizes that oral health is integral to overall health and that the oral cavity holds tremendous promise for indicating disease and health issues, targeting therapies, and diagnostic and therapeutic discovery. The Committee encourages NIDCR to continue research on the underlying biologic mechanisms of dental, oral and craniofacial diseases and their potential linkages to other diseases, including cardiovascular disease, Alzheimer's disease, diabetes mellitus, and others.

Surgeon General's Report on Oral Health.—The Committee appreciates NIDCR's contributions to the Surgeon General's 2020 Report on Oral Health and looks forward to the much-needed update of the seminal Oral Health in America report from 2000.

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES (NIDDK)

Appropriation, fiscal year 2019	$2,029,823,000
Budget request, fiscal year 2020	1,746,493,000
Committee Recommendation	2,129,027,000
Change from enacted level	+99,204,000
Change from budget request	+382,534,000

Mission.—The NIDDK mission is to conduct and support medical research and research training and disseminate science-based information on diabetes and other endocrine and metabolic diseases; digestive diseases, nutritional disorders, and obesity; and kidney, urologic, and hematologic diseases, to improve people's health and quality of life.

Conditions of the Pancreas.—The Committee encourages NIDDK to further support research activities focused on conditions of the pancreas, particularly pancreatitis and pancreatic cancer, and to consider leveraging collaborative opportunities to advance auxiliary projects for ongoing successful efforts.

End-Stage Renal Disease.—The Committee recognizes the work in supporting critical kidney research that NIDDK has accomplished including end-stage renal disease (ESRD). The Committee continues to encourage NIDDK to work with stakeholders to facilitate new opportunities for research.

Glomerular Diseases.—The Committee recognizes the work that the Cure Glomeruloneuropathy (CureGN) initiative and the Nephrotic Syndrome Study Network (NEPTUNE) are supporting to obtain insights into these diseases that could lead to breakthroughs for critical clinical trials. The Committee encourages NIDDK to continue supporting research that has proven to lead to new therapies.

Hepatitis B.—The Committee notes that hepatitis B virus (HBV) infections are a serious public health threat. The hepatitis B research community convened a virtual consensus conference to prepare a "Roadmap for a Cure" that resulted in identifying the most urgent research questions related to hepatitis B. The Committee urges NIDDK to pursue these research opportunities and to work in coordination with other Institutes and Centers on hepatitis B research planning.

Inflammatory Bowel Diseases.—The Committee continues to encourage NIDDK to incorporate patient centricity in Inflammatory Bowel Diseases (IBD) research, including support for a translational bedside-to-bench research that leverages patient priorities and perspectives with respect to biomedical research, such as personalized medicine approaches, to address a patient-identified clinical need. The Committee recognizes interactions among food, the gut, and the brain/nervous system as an area of high interest to patients and relevant to multiple chronic gastrointestinal diseases that is supported by a growing body of evidence, and identifies it as a potential topic for ongoing research.

Interstitial Cystitis.—The Committee is pleased with the progress of interstitial cystitis research through the MAPP Program. The Committee encourages NIDDK and stakeholders to continue collaboration on a comprehensive state of the science conference to examine mechanisms for scientific opportunity.

Pediatric Kidney Disease.—The Committee is encouraged by the research funded by NIDDK on pediatric kidney disease and continues to urge the Institute to support research toward multicenter clinical and translational research focused on clinical approaches to children with kidney disease. However, the Committee believes that NIDDK could do more to support research toward the development of novel therapeutic strategies that utilize genomics and personalized medicine in this patient population. To this end, the Committee urges NIDDK to fund additional research and support clinical trials in this area. The Committee requests that NIDDK report back in the fiscal year 2021 Congressional Justification on the progress made towards additional pediatric focused clinical trials and novel therapeutic development.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE (NINDS)

Appropriation, fiscal year 2019	$2,274,413,000
Budget request, fiscal year 2020	2,026,031,000
Committee Recommendation	2,385,571,000
Change from enacted level	+111,158,000
Change from budget request	+359,540,000

Mission.—The NINDS mission is to seek fundamental knowledge about the brain and nervous system and use that knowledge to reduce the burden of neurological disease.

BRAIN Initiative.—The Committee directs NIH to transfer $70,000,000 from the NIH Innovation Account to NINDS to support the BRAIN Initiative. These funds were authorized in the 21st Century Cures Act (P.L. 114–255). This collaborative effort is revolutionizing the understanding of how neural components and their dynamic interactions result in complex behaviors, cognition, and disease, while accelerating the development of transformative tools to explore the brain in unprecedented ways making information previously beyond reach accessible.

Opioids.—The Committee continues to support the HEAL (Helping to End Addiction Long-Term) Initiative, a trans-NIH effort to speed scientific solutions to stem the national opioid public health crisis. This initiative builds on extensive, well-established NIH research, including basic science of the complex neurological pathways involved in pain and addiction, implement science to develop and test treatment models, and research to integrate behavioral interventions with medication-assisted treatment for opioid use disorder. The Committee includes no less than the fiscal year 2019 enacted level of $250,000,000 within NINDS for this research.

Acute Flaccid Myelitis.—The Committee is aware that there remains no dedicated funding for Acute Flaccid Myelitis (AFM), an inflammatory disease of the spinal cord characterized by acute onset flaccid paralysis that predominantly affects healthy children and young adults. Epidemiological evidence has suggested an association between AFM and circulating viruses which produce respiratory, gastrointestinal and febrile illnesses. AFM falls into the same category of disease as Poliomyelitis. In response to a recent upsurge in cases of AFM in young children, the Committee urges that NIH, including NINDS and NIAID, determine a clinical characterization and disease pathogenesis for AFM.

Advancement of Non-Opioid Chronic Pain Therapies.—Fifty million Americans suffer from chronic pain; living with chronic pain can be life-altering, deeply impacting people on many levels. The current state of chronic pain management is often inadequate for many patients and places an economic burden on the health care system, costing the U.S. $560 billion annually. Management of chronic pain often requires both non-pharmacological treatment as well as medicines. Unfortunately, the current pharmacological options do not meet the needs of all patients, and additional treatments are needed. The Committee requests in the fiscal year 2021 Congressional Justification an update on the progress of the development and advancement of non-opioid chronic pain therapies.

Dystonia.—The Committee commends NINDS for holding a conference on dystonia to revitalize the dystonia research portfolio. The Committee encourages NINDS to follow the recommendations, including identifying new research and therapeutic needs that will lead to a better understanding of dystonia etiology and evaluation of the status of translational research that may lead to more treatment options for those affected by dystonia.

Headache Disorders.—The Committee strongly urges NINDS to fund fundamental, translational, and clinical research on headache disorders, including migraine, post-traumatic headache, the trigeminal autonomic cephalalgias, and intracranial hypo/hypertension through the HEAL study.

Parkinson's Disease.—The Committee commends NINDS for taking critical steps in identifying priority research recommendations to advance research on Parkinson's disease, which impacts between 500,000 and 1,500,000 Americans and is the second most prevalent neurodegenerative disease in the U.S. The Committee recognizes that NINDS is prioritizing public health concerns with severe gaps in unmet medical needs and supports the research recommendations set forth by the NINDS planning strategy to bring us closer to better treatments and a cure for Parkinson's disease. The Committee also encourages NINDS to submit an update of its progress on implementing these recommendations in the fiscal year 2021 Congressional Justification.

Peripheral Neuropathies.—The Committee notes the continued progress of ongoing research into Guillain-Barre syndrome (GBS), chronic inflammatory demyelinating polyneuropathy (CIDP), and related conditions. The Committee encourages NINDS to continue its work with NIAID and stakeholders on a state of the science conference on evolving research and scientific mechanisms.

Stroke.—Due in large part to NIH-funded research, the stroke mortality rate has decreased by 71 percent since 1969. Despite this remarkable progress, strokes cost Americans $37 billion annually in health care bills and lost productivity at work. Furthermore, after more than four decades of steep decline, stroke death rates in the U.S. have recently slowed, stalled, or reversed among some groups. The Committee encourages the NINDS to prioritize studies that help develop interventions to reduce health disparities in stroke and to advance promising stroke prevention, treatment, and rehabilitation research, including endovascular therapy and tele-rehabilitation. The Committee also urges continued collaboration with the other Institutes and Centers on research related to vascular contributions to cognitive impairment and dementia.

Traumatic Brain Injury.—The Committee understands that regenerative medicine, including the use of adult stem cells and neuroplasticity may play an important role in developing treatment of Traumatic Brain Injury (TBI). The Committee strongly encourages NINDS to work with all relevant parts of NIH, including NIA, to support a robust and coordinated portfolio of TBI research that explores all promising avenues to facilitate functional repair of damaged circuitry in TBI, including research on regenerative medicine and neuroplasticity. The Committee requests an update in the fiscal year 2020 Congressional Justification on efforts in these specific areas of TBI research.

Valosin-Containing Protein Disease.—The Committee encourages NINDS to support research on the Valosin-Containing Protein (VCP) gene and the related disorders to develop a focused patient natural history study.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES (NIAID)

Appropriation, fiscal year 2019	$5,523,324,000
Budget request, fiscal year 2020	4,754,379,000
Committee Recommendation	5,808,268,000
Change from enacted level	+284,944,000
Change from budget request	+1,053,889,000

Mission.—The NIAID mission is to conduct and support basic and applied research to better understand, treat, and ultimately prevent infectious, immunologic, and allergic diseases.

Universal Influenza Vaccine.—The Committee directs NIAID to allocate at least $200,000,000 to support basic, translational, and clinical research to develop a universal influenza vaccine that provides robust, long-lasting protection against multiple subtypes of flu, rather than a select few. Such a vaccine would eliminate the need to update and administer the seasonal flu vaccine each year and could provide protection against newly emerging flu strains, potentially including those that could cause a flu pandemic. The Committee requests an update on these efforts within 60 days of enactment of this Act.

Combating Antibiotic-Resistant Bacteria.—The Committee includes sufficient funding to maintain NIAID research related to combating antibiotic-resistant bacteria at no less than the fiscal year 2019 enacted level. These funds enable NIAID to support research on antimicrobial (drug) resistance, including basic research on how microbes develop resistance, new and faster diagnostics, and clinical trials designed to find new vaccines and treatments effective against drug-resistant microbes.

2020 AIDS Conference.—The Committee recognizes the United States is hosting the International AIDS Conference for the first time since 2012. The Committee includes $5,100,000 for the U.S. contribution to the AIDS2020 Conference.

Centers for AIDS Research.—As part of the domestic HIV initiative, the Committee includes $51,000,000 for the Centers for AIDS Research, an increase of $6,000,000 above the estimated fiscal year 2019 enacted level and the same as the fiscal year 2020 budget request. These Centers will offer evidence-based practices on prevention and treatment to initiative partners and evaluate the initiative.

Autoimmune Disease Coordinating Committee.—The Committee recognizes the devastating impact of autoimmune diseases on the lives of some 50 million Americans and the promise of groundbreaking research underway at NIH to determine underlying causes of autoimmune disease and emerging evidence of connectivity to other conditions, such as cancer. The Committee urges NIH to expand collaborations with internal and external research experts, professional associations, patient groups, and other stakeholders to advance current research priorities, promising areas of inquiry, and opportunities for NIH and the Coordinating Committee to make progress in autoimmune disease research.

Autoimmune Neuropathies.—The Committee is pleased at the progress between NIAID and NINDS on a state-of-the-science conference on autoimmune neuropathies research into conditions like Guillain-Barre syndrome (GBS) and chronic inflammatory demyelinating polyneuropathy (CIDP). The Committee continues to encourage both Institutes to continue their work with patient stakeholders on this important conference.

Celiac Disease.—The Committee encourages NIH to devote sufficient, focused research to the study of Celiac disease, including the autoimmune causation underpinning the affliction. Today, the only known treatment for this disease is a gluten-free diet; but, recent public and private sector research has revealed that such a "treatment" is insufficient for many who suffer from Celiac disease. Therefore, the Committee urges NIAID to support new research to better coordinate existing research and focus new research efforts toward causation and ultimately, a cure of this disease. NIAID is encouraged to coordinate with other Institutes and Centers as appropriate and to submit its plan for coordination and execution of this research to the Committee on Appropriations no later than 90 days after enactment of this Act.

Food Allergy Research.—The Committee recognizes the serious issue of food allergies which affect approximately eight percent of children and ten percent of adults in the U.S. The Committee commends the ongoing work of NIAID in supporting clinical sites for this critical research, including seven sites as part of the Consortium of Food Allergy Research (CoFAR). The Committee urges NIH to support robust investment to expand its clinical research network to add new centers of excellence in food allergy clinical care and to select such centers from those with a proven expertise in food allergy research.

Gonorrhea.—The Committee continues to be concerned about the prevalence of gonorrhea, the 75 percent increase in the incidence of this disease over the past nine years, and the drug resistance to multiple classes of antibiotics. The Committee commends NIAID for its efforts in developing new antibiotics to kill the bacterium that causes this disease and encourages NIAID to continue its work in this area for diagnosis, treatments, and cures for this STI.

Hereditary Angioedema.—The Committee recognizes NIAID for its ongoing stewardship of the Hereditary Angioedema (HAE) research portfolio, including advancements that have taken HAE from a debilitating and fatal condition to a manageable chronic disease. The Committee notes the potential of gene therapy and other cutting-edge research to further improve health outcomes for HAE

patients and encourages NIAID to maintain the commitment to HAE research at this critical time.

HIV Prevention in Women.—The Committee notes that recent clinical studies have found limited success in the use of PrEP to prevent HIV infection in women. Effective prevention strategies for women are essential to curtailing new HIV infections. The Committee urges NIAID to support research on the most effective strategies for preventing HIV infections.

Lyme Disease and Other Tick-Borne Diseases.—The Committee encourages NIAID to intensify research and development on Lyme and other tick-borne diseases, including research that will increase understanding of the full range of processes that cause Lyme disease infection. This should include research on the physiology of *Borrelia burgdorferi* and *Borrelia mayonii*, including the mechanisms of possible persistent infection, potential treatment protocols for extended or long-term symptoms attributed to Lyme and other tick-borne diseases, and development of more sensitive and accurate diagnostic tests for Lyme and tick-borne diseases, including next generation polymerase chain reaction (PCR) and new testing methodologies such as proteomics and metabolomics. The Committee directs NIAID to support research on the heightened incidence of Lyme Disease and vector-borne diseases due to global warming.

Microbicides.—The Committee recognizes that with NIH and USAID leadership, research has shown the potential for antiretroviral (ARV) drugs to prevent HIV infection in women. The Committee encourages NIAID to continue coordination with USAID, the State Department, and others to advance ARV-based microbicide development efforts with the goal of enabling regulatory approval of the first safe and effective microbicide for women and supporting an active ARV-based microbicide pipeline to produce additional solutions to prevent HIV and to help end the epidemic.

Post-Infectious Neuroimmune Disorders.—The Committee is concerned that children, following streptococcal and other infections, are experiencing the onset of neuropsychiatric and behavioral disorders. These auto-inflammatory encephalopathic conditions, including Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections (PANDAS) and Pediatric Acute-onset Neuropsychiatric Syndrome (PANS), are often misdiagnosed. Delays in diagnosis and lack of developed avenues of treatment result in a devastating escalation of mental health symptoms and associated costs. The Committee encourages NIH to prioritize research efforts in this area and report to the Committee on the current understanding of incidence, causes, diagnostic criteria, and treatment of these conditions and to describe the status of research related to this area in the fiscal year 2021 Congressional Justification.

Syphilis.—The Committee continues to be concerned about the increased rates in syphilis, the rise in congenital syphilis, and the link between syphilis and transmitting HIV. The Committee commends NIAID for the work in this area and encourages them to continue and accelerate the development of screening tests, vaccines for prevention and new treatment options, for both adults and

newborns, to provide a quicker more efficient way to diagnose and define the stages of this infection.

Threat of Emerging Infectious Diseases.—The usage of machine learning, data-driven dynamical modeling, and other big data techniques, to identify early warning signals for outbreaks of rare diseases, is an integral part of scientific research on the ecology and evolution of infectious diseases. The Committee recognizes the threat of Emerging Infectious Diseases (EID) from animals and urges NIH to support further research in disease mapping and forecasting in order to identify early warning signals for outbreaks of emerging diseases. The Committee directs NIH to include a progress report on the use of machine learning and validated mechanistic models to advance critical biomedical research, improve decision support for epidemiological interventions, and enhance human health in the fiscal year 2021 Congressional Justification.

Tuberculosis.—Tuberculosis (TB) remains one of the deadliest infectious diseases worldwide. Research has been key to developing the tools currently available to combat TB, such as rapid diagnostic testing, medications, and vaccine for some forms of the disease. However, there is a need for safer and more effective medications, faster diagnostics, and more effective vaccines. The Committee commends NIAID for developing the NIAID Strategic Plan for Tuberculosis Research and urges NIAID to expand research to address the research questions outlined in the Plan and stimulate the development of promising diagnostics, treatments, and vaccines.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES (NIGMS)

Appropriation, fiscal year 2019	$2,872,780,000
Budget request, fiscal year 2020	2,472,838,000
Committee Recommendation	3,033,183,000
Change from enacted level	+160,403,000
Change from budget request	+560,345,000

Mission.—NIGMS supports basic research that increases our understanding of biological processes and lays the foundation for advances in disease diagnosis, treatment, and prevention.

Institutional Development Awards.—The Committee provides $381,573,000 for the Institutional Development Awards (IDeA) program, an increase of $20,000,000 above the fiscal year 2019 enacted level. IDeA supports high-quality research and investigators throughout the country in States in which the success rate for NIH grants has been historically low.

EUNICE KENNEDY SHRIVER NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT (NICHD)

Appropriation, fiscal year 2019	$1,506,458,000
Budget request, fiscal year 2020	1,296,732,000
Committee Recommendation	1,580,084,000
Change from enacted level	+73,626,000
Change from budget request	+283,352,000

Mission.—NICHD investigates human development throughout the entire life process, with a focus on understanding disabilities and important events that occur during pregnancy.

Congenital Syphilis.—The Committee is concerned about the rise of congenital syphilis and the lifelong health effects the disease can have on a child, as well as the link between syphilis, and other

STIs, and the rise in injection drug use. The Committee encourages NICHD to prioritize research in this area and to work with NIAID on new testing, diagnosis, and treatment efforts.

Endometriosis.—The Committee is aware that endometriosis is a serious chronic condition that impacts an estimated one in 10 women in the U.S. between the ages of 18 and 49. Women with this condition can suffer up to 10 years before being properly diagnosed, often due to lack of awareness, invasive methods of diagnosis, and limited treatment options. The Committee directs NICHD to submit a report to the Committee within 180 days of enactment of this Act on the current state of endometriosis, including topics such as disease prevalence, an evaluation of diagnostic standards, treatment options, and outcomes. The report should also identify remaining knowledge gaps in understanding this disease and recommendations for filling these gaps. Further, the Committee encourages NICHD, in collaboration with the CDC, to continue to support education, outreach, and awareness to promote early and accurate diagnosis of endometriosis.

Fertility Issues for Rare Disease Patients.—Patients with rare diseases like thalassemia face a number of issues related to reproductive health due to complications both from their conditions and from their treatments. Because of medical advances, many rare disease patients are now living long enough to contemplate fertility, when it may previously not have been feasible. The Committee requests that NICHD provide an report on current research and future initiatives to address these issues in the fiscal year 2021 Congressional Justification and continue to provide updates to the Committee on advances being made.

Male Reproductive Health.—The Committee encourages NICHD to support research on male mechanisms of infertility. There is a gap in the knowledge of how to diagnose and treat male infertility and abnormal embryo development. The Committee supports research to identify new proteins and sperm structures that are necessary for normal sperm formation and, consequently, for fertility and embryo development

Maternal Mortality.—The Committee encourages NICHD to continue its support of research into the leading causes of maternal morbidity and mortality. As black women experience maternal mortality at nearly four times the rate of white women, the Committee strongly urges NICHD to support research that investigates factors contributing to this disparity, and tests evidence-based interventions to address this disparity. NICHD should collaborate with NIMHD as appropriate.

Maternal-Fetal Medicine Units Network.—NICHD's investment in maternal and child health outcomes is essential to understanding rising maternal mortality rates and to optimize maternal and child health. The Committee fully supports the work of the Maternal Fetal Medicine Units network (MFMU) and encourages NICHD to continue to build on its success by ensuring its highly efficient structure of multicenter collaborative research continues. The Committee is particularly concerned that any change in the funding mechanism or structure for the MFMU could compromise the ability of the network to remain nimble and directly address the changing landscape of women's health, including to reduce health disparities. The Committee directs NICHD to submit a re-

port to the Committee outlining any potential changes being considered to the funding mechanism or structure of the MFMU network within 90 days of enactment of this Act.

Population Research.—Since the Institute's inception in 1962, NICHD has had a clear mandate to support a robust research portfolio focusing on maternal and child health, the social determinants of health, and human development across the lifespan. NICHD has supported innovative and influential population science initiatives, including numerous scientific research initiatives that have advanced our understanding of specific diseases and conditions, including obesity, autism, and maternal mortality, and, further, how socioeconomic and biological factors jointly determine human health. The Committee urges NICHD to reaffirm its commitment to supporting population research as part of its revised 2020–2024 strategic plan.

Spina Bifida.—The Committee recognizes that Spina Bifida is the most common permanently disabling birth defect in the U.S. While Spina Bifida and related neural tube defects are sometimes preventable through education and adequate daily folic acid consumption, there are an estimated 166,000 individuals, more than half of whom are 18 and older, living with all forms of this complex birth defect. The Committee supports the efforts of the National Spina Bifida Program (NSBP) to continue the Spina Bifida Clinical Care Monitoring and Tracking program, which works with the National Spina Bifida Registry to guide the health care community in best treatment options for people living with Spina Bifida. The Committee encourages NIH to expand the National Spina Bifida Patient Registry to allow for the inclusion of more clinics.

Task Force on Research in Pregnant and Lactating Women.—The Committee is aware that PRGLAC's report to the Secretary dated September 2018 outlined 15 recommendations to facilitate the inclusion of pregnant women and lactating women in clinical research, and commends the Secretary for extending the task force for two additional years. The Committee believes with this extension, the Task Force should oversee the implementation of the already released recommendations working with other relevant NIH Institutes and Centers as well as the FDA; and should ensure health care professionals and consumers have accurate information on the safety and efficacy of drugs taken by these populations. The Committee looks forward to reviewing future recommendations from the task force and to working with NICHD on this issue. The Committee requests a progress report within 120 days of enactment of this Act.

NATIONAL EYE INSTITUTE (NEI)

Appropriation, fiscal year 2019	$796,536,000
Budget request, fiscal year 2020	685,644,000
Committee Recommendation	835,465,000
Change from enacted level	+38,929,000
Change from budget request	+149,821,000

Mission.—NEI conducts and supports basic and clinical research, research training, and other programs with respect to blinding eye diseases, visual disorders, and mechanisms of visual function, preservation of sight, and the special health problems and needs of individuals who are visually-impaired or blind.

Blepharospasm.—The Committee continues to encourage NEI to pursue collaboration with stakeholders on cross-cutting research opportunities that affect all forms of dystonia, including blepharospasm.

Human Ocular Tissue Availability.—The Committee encourages NEI to work with nonprofit eye banks to find solutions to provide high quality, low cost human ocular tissue to universities and other nonprofit research institutions.

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES (NIEHS)

Appropriation, fiscal year 2019	$774,707,000
Budget request, fiscal year 2020	666,854,000
Committee Recommendation	812,570,000
Change from enacted level	+37,863,000
Change from budget request	+145,716,000

Mission.—NIEHS's mission is to discover how the environment affects people in order to promote healthier lives.

Asthma.—The Committee notes with concern the evidence suggesting a causal link between air pollution and the development of asthma. The Committee urges NHLBI to explore this potential causal link and any interventions necessary to prevent the development of asthma.

NATIONAL INSTITUTE ON AGING (NIA)

Appropriation, fiscal year 2019	$3,083,410,000
Budget request, fiscal year 2020	2,654,144,000
Committee Recommendation	3,286,107,000
Change from enacted level	+202,697,000
Change from budget request	+631,963,000

Mission.—NIA's mission is to understand the nature of aging and the aging process, and diseases and conditions associated with growing older, in order to extend the healthy, active years of life.

Alzheimer's Disease.—In recognition that Alzheimer's disease poses a serious threat to the nation's long-term health and economic stability, the Committee recommends a total of no less than $2,392,000,000 for Alzheimer's disease research, as recommended in the NIH Bypass Budget Proposal for Fiscal Year 2020. NIA should continue to address the research goals set forth in the National Plan to Address Alzheimer's disease, as well as the recommendations from recent research summits on Alzheimer's disease and related dementias and care and services for individuals living with these conditions.

The Committee commends NIA for its leadership in supporting longitudinal, population-based cohort studies into the causes of dementia. Because rural, poor, and minority populations may be at enhanced risk for dementia, the value and application of these studies is enhanced when they include individuals from various geographic, ethnic, socio-economic and generational backgrounds. The Committee directs NIA to support diversity in its cohort studies, with the specific goal of better understanding disease burden and biomarkers by race and geographic region. The Committee believes this could be accomplished through enhanced partnerships between existing NIA-funded Alzheimer's Disease Research Centers (ADRC) and non-ADRC dementia centers in high-risk geographic regions or through the creation of new long-term cohorts in under-represented groups/regions.

The Committee also recognizes that as participants in these studies have aged, much has been learned about cognitive decline and the role of mid-life risk factors, but key challenges remain, particularly in the identification of biomarkers and in understanding the role of environmental versus genetic factors. The Committee encourages NIA to support a pilot program to test community-based clinical trials for the prevention of cognitive decline. Such a longitudinal study should include an ethnically representative sample, incorporate genomic and environmental Alzheimer's disease risk factors, and monitor cognitive and motor function, disability, and morbidity over time.

Population Research.—The Committee applauds NIA for supporting an innovative and productive population aging research portfolio. The Committee urges NIA to pursue its plans to renew and expand the Demography and Economics of Aging Centers Program and to reaffirm the Institute's commitment to supporting population aging research overall as part of its revised strategic directions document, Aging Well in the 21st Century: Strategic Directions for Research on Aging.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES (NIAMS)

Appropriation, fiscal year 2019	$605,065,000
Budget request, fiscal year 2020	520,829,000
Committee Recommendation	634,637,000
Change from enacted level	+29,572,000
Change from budget request	+113,808,000

Mission.—NIAMS's mission is to support research into the causes, treatment, and prevention of arthritis and musculoskeletal and skin diseases; the training of basic and clinical scientists to carry out this research; and the dissemination of information on research progress in these diseases.

Alopecia Areata.—The Committee notes NIAMS leadership is continuing autoimmune research to advance treatment development for alopecia areata and related conditions. The Committee requests an update from NIAMS on developments from cross-cutting autoimmune research projects in the fiscal year 2021 Congressional Justification.

Epidermolysis Bullosa.—The Committee continues to recognize promising scientific gains and applauds private partners advancing research in pursuit of treatments for Epidermolysis Bullosa. The Committee encourages NIH to continue supporting research for Epidermolysis Bullosa.

Scleroderma.—The Committee notes the work of NIAMS and other stakeholders in the recent discovery of the biomarker CCL2 that can lead to early detection of scleroderma. The Committee continues to encourage NIAMS to support the scleroderma research portfolio and continue collaborative opportunities with other Institutes and community stakeholders to advance critical research.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION DISORDERS (NIDCD)

Appropriation, fiscal year 2019	$474,404,000
Budget request, fiscal year 2020	408,358,000
Committee Recommendation	497,590,000
Change from enacted level	+23,186,000
Change from budget request	+89,232,000

Mission.—NIDCD conducts and supports biomedical and behavioral research and research training in the normal and disordered processes of hearing, balance, taste, smell, voice, speech, and language. NIDCD also conducts and supports research and research training related to disease prevention and health promotion; addresses special biomedical and behavioral problems associated with people who have communication impairments or disorders; and supports efforts to create devices which substitute for lost and impaired sensory and communication function.

Spasmodic Dysphonia.—The Committee continues to encourage NIDCD to work with stakeholders to advance critical research into spasmodic dysphonia.

NATIONAL INSTITUTE OF NURSING RESEARCH (NINR)

Appropriation, fiscal year 2019	$162,992,000
Budget request, fiscal year 2020	140,301,000
Committee Recommendation	170,958,000
Change from enacted level	+7,966,000
Change from budget request	+30,657,000

Mission.—The mission of NINR is to promote and improve the health of individuals, families, and communities. To achieve this mission, NINR supports and conducts clinical and basic research and research training on health and illness, research that spans and integrates the behavioral and biological sciences, and develops the scientific basis for clinical practice.

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM (NIAAA)

Appropriation, fiscal year 2019	$525,591,000
Budget request, fiscal year 2020	452,419,000
Committee Recommendation	551,278,000
Change from enacted level	+25,687,000
Change from budget request	+98,859,000

Mission.—NIAAA's mission is to generate and disseminate fundamental knowledge about the effects of alcohol on health and well-being, and apply that knowledge to improve diagnosis, prevention, and treatment of alcohol-related problems, including alcohol use disorder, across the lifespan.

NATIONAL INSTITUTE ON DRUG ABUSE (NIDA)

Appropriation, fiscal year 2019	$1,419,844,000
Budget request, fiscal year 2020	1,296,379,000
Committee Recommendation	1,489,237,000
Change from enacted level	+69,393,000
Change from budget request	+192,858,000

Mission.—NIDA's mission is to advance science on the causes and consequences of drug use and addiction and to apply that knowledge to improve individual and public health.

Opioids.—The Committee continues to support the HEAL (Helping to End Addiction Long-Term) Initiative, a trans-NIH effort to

speed scientific solutions to stem the national opioid public health crisis. This Initiative builds on extensive, well-established NIH research, including basic science of the complex neurological pathways involved in pain and addiction, implementation science to develop and test treatment models, and research to integrate behavioral interventions with medication-assisted treatment for opioid use disorder. The Committee includes no less than the fiscal year 2019 enacted level of $250,000,000 within NIDA for this research.

The Committee continues to be extremely concerned about the crisis of prescription opioids, heroin, and illicit synthetic opioid use, addiction and overdose in the U.S. Approximately 192 people die each day in this country from drug overdose (over 130 of those are directly from opioids). This crisis has been exacerbated by the availability of illicit fentanyl and its analogs in many communities. The Committee appreciates the important role that research plays in the various federal initiatives aimed at this crisis. The Committee encourages NIDA to emphasize: the development of safe and effective medications, including new formulations and combinations to treat opioid use disorders and to prevent and reverse overdose; the role of comprehensive care models to prevent opioid misuse, expand treatment capacity, enhance access to overdose reversal medications, and enhance prescriber practice; testing the effectiveness of medications and other treatment interventions within the justice system; and developing evidence-based strategies to integrate screening and treatment for opioid use disorders in emergency department and primary care settings.

Addressing the Opioid Crisis in Rural Regions.—The Committee encourages NIDA to continue its partnership with the CDC, SAMHSA, and the Appalachian Regional Commission in support of research to help communities develop comprehensive approaches to prevent and treat consequences of opioid injection, including substance use disorders, overdose, HIV, hepatitis B and C virus infections, and sexually transmitted infections. These projects will serve as models for addressing the consequences associated with opioid injection epidemics that can be implemented by health systems in similar rural communities in the U.S.

Barriers to Research.—The Committee is concerned that restrictions associated with Schedule I of the Controlled Substance Act effectively limit the amount and type of research that can be conducted on certain Schedule I drugs, especially marijuana or its component chemicals and new synthetic drugs and analogs. At a time when we need as much information as possible about these drugs to find antidotes for their harmful effects, we should be lowering regulatory and other barriers to conducting this research. The Committee directs NIDA to provide a short report on the barriers to research that result from the classification of drugs and compounds as Schedule I substances.

Electronic Cigarettes.—The Committee understands that electronic cigarettes (e-cigarettes) and other vaporizing equipment are increasingly popular among adolescents, and requests that NIDA fund research on the use and consequences of these devices. The Committee also supports the Population Assessment of Tobacco and Health (PATH) Study, a collaboration between NIDA and the FDA Center for Tobacco Products to help scientists learn how and why people start using tobacco products, quit using them, and start

using them again after they have quit, as well as how different tobacco products affect health outcomes over time.

The HEALthy Brain and Child Development Study.—The Committee recognizes and supports the NIH HEALthy Brain and Child Development (HEALthy BCD) Study, which will establish a large cohort of pregnant women, including those affected by the opioid crisis, and follow them and their children for at least 10 years. This knowledge will be critical to help predict and prevent some of the known impacts of pre- and postnatal exposure to drugs or adverse environments, including risk for future substance use, mental disorders, and other behavioral and developmental problems. The Committee recognizes that the HEALthy BCD Study is supported in part by the HEAL Initiative, and encourages other NIH Institutes, such as NICHD, NIMH, NHLBI, NCI, NIAAA, NIMH, NINR, as well as the Office of the Director, to support this important study.

Housing Supports and Substance Use Disorder Treatment Outcomes and Costs.—The Committee acknowledges that there is growing anecdotal evidence to suggest a strong correlation between successful substance use disorder treatment outcomes and stable housing arrangements, especially for those facing mental health challenges or of limited economic means. The Committee strongly encourages NIDA to support a multidisciplinary academic research partnership using clinical expertise and cost function analysis (CFA) to assess how affordable housing impacts substance use disorder treatment outcomes and costs in acutely affected regions like New England where, according to the Federal Reserve Bank of Boston, each state in the six-state region spends more per capita on opioid related costs including criminal justice, medical treatment, and medical complications, and where treating opioid use disorder on an emergency and long-term basis comprises the majority of costs.

Kratom.—The Committee requests that NIH expand research on all health impacts of kratom, including its constituent compounds, mitragynine, and 7-hydroxymitragynine. The Committee is aware of the potential promising results of kratom for acute and chronic pain patients who seek safer alternatives to sometimes dangerously addictive and potentially deadly prescription opioids.

Marijuana Research.—The Committee is concerned that marijuana public policies in States (medical marijuana, recreational use, etc.) are being changed without the benefit of scientific research to help guide those decisions. The Committee encourages NIH to continue supporting a full range of research on the health effects of marijuana and its components, including research to understand how marijuana policies affect public health.

Raising Awareness and Engaging the Medical Community in Drug Abuse and Addiction Prevention and Treatment.—The Committee notes that education is a critical component of any effort to curb drug use and addiction, and it must target every segment of society, including healthcare providers (doctors, nurses, dentists, and pharmacists), patients, and families. Medical professionals must be in the forefront of efforts to curb the opioid crisis. The Committee continues to be pleased with the NIDAMED initiative, targeting physicians-in-training, including medical students and resident physicians in primary care specialties (e.g., internal medi-

cine, family practice, and pediatrics). The Committee encourages NIDA to continue its efforts in this space, providing physicians and other medical professionals with the tools and skills needed to incorporate substance misuse and addiction screening and treatment into their clinical practices. The Committee encourages NIDA and CDC to develop strategies for increasing participation in its online continuing medical education course on safe prescribing for pain and managing patients who misuse prescription opioids. The Committee also encourages NIDA and CDC to develop strategies for increasing participation in its online continuing medical education courses on safe prescribing for pain and managing patients who abuse prescription opioids.

NATIONAL INSTITUTE OF MENTAL HEALTH (NIMH)

Appropriation, fiscal year 2019	$1,870,296,000
Budget request, fiscal year 2020	1,630,442,000
Committee Recommendation	1,961,704,000
Change from enacted level	+91,408,000
Change from budget request	+331,262,000

Mission.—NIMH's mission is to transform the understanding and treatment of mental illnesses through basic and clinical research, paving the way for prevention, recovery, and cure.

BRAIN Initiative.—The Committee directs NIH to transfer $70,000,000 from the NIH Innovation Account to NIMH to support the BRAIN Initiative. These funds are authorized by the 21st Century Cures Act (P.L. 114–255). This collaborative effort is revolutionizing our understanding of how neural components and their dynamic interactions result in complex behaviors, cognition, and disease, while accelerating the development of transformative tools to explore the brain in unprecedented ways making information previously beyond reach accessible.

Disproportionate Suicides by Youth of Color.—The Committee is pleased with NIMH efforts to prioritize suicide prevention research. The Committee notes that the rate of suicide has increased by 2 percent each year since 2006, and that suicide is the second leading cause of death among children ages 10 to 17. The Committee is especially concerned with recent findings that African-American children ages 5 to 12 are dying by suicide at nearly twice the rate of their white counterparts. Accordingly, the Committee encourages NIMH to continue its support of research to address youth suicide, with a focus on addressing the disparity in youth of color. NIMH should collaborate with other NIH institutes, including NIMHD, as appropriate.

NATIONAL HUMAN GENOME RESEARCH INSTITUTE (NHGRI)

Appropriation, fiscal year 2019	$575,579,000
Budget request, fiscal year 2020	495,448,000
Committee Recommendation	603,710,000
Change from enacted level	+28,131,000
Change from budget request	+108,262,000

Mission.—NHGRI's mission is to accelerate scientific and medical breakthroughs that improve human health by driving cutting-edge research, developing new technologies, and studying the impact of genomics on society.

Emerging Centers of Excellence in Genomic Sciences.—The Committee includes $10,000,000 for a new competitively awarded cen-

ter-based award program for "Emerging Centers of Excellence". The purpose of the awards is to build capacity at institutions that are not prior or present awardees of the Centers for Excellence in Genomic Sciences program. The Committee urges NHGRI to include plans for sustainment of this capacity-building mechanism in its 2020 vision report.

NATIONAL INSTITUTE OF BIOMEDICAL IMAGING AND BIOENGINEERING (NIBIB)

Appropriation, fiscal year 2019	$389,464,000
Budget request, fiscal year 2020	335,986,000
Committee Recommendation	408,498,000
Change from enacted level	+19,034,000
Change from budget request	+72,512,000

Mission.—The NIBIB mission is to improve health by leading the development and accelerating the application of biomedical technologies.

NATIONAL INSTITUTE ON MINORITY HEALTH AND HEALTH DISPARITIES (NIMHD)

Appropriation, fiscal year 2019	$314,679,000
Budget request, fiscal year 2020	270,870,000
Committee Recommendation	341,244,000
Change from enacted level	+26,565,000
Change from budget request	+70,374,000

Mission.—NIMHD's mission is to lead scientific research to improve minority health and reduce health disparities.

Research Centers at Minority Institutions.—The Committee recognizes the important role of the RCMI program in developing the infrastructure required to enhance biomedical research conducted at historically minority serving institutions. This infrastructure is critical to supporting the development of new investigators and sustaining an established workforce conducting world-class biomedical research that emphasizes the advancement of minority health and the reduction of health disparities. Therefore, the Committee includes $75,000,000, an increase of $11,186,000, for RCMIs to ensure that critical capacity development in historically minority graduate and health professional schools continues to be enhanced to meet these critical needs. In addition, the Committee recognizes the importance of the RCMI Translational Research Network in ensuring that collectively, institutions can engage in multi-site collaborative research.

Research Endowment Program.—The Committee is concerned by NIMHD's lack of engagement with stakeholders and the broader community regarding Research Endowment Program (REP) eligibility. The Committee urges NIMHD to move forward with the recommendations made by the Advisory Council workgroup to restore endowment eligibility for REP to the original Congressional intent. The Committee requests that NIMHD report to the Committee on progress made to implement these recommendations prior to NIMHD issuing its next FOA for REP.

Focal Segmental Glomerulosclerosis.—The Committee encourages NIMHD to collaborate with other Institutes and Centers and stakeholders to expand research opportunities on the APOL1 gene that causes African-Americans to be disproportionately affected by focal segmental glomerulosclerosis.

Interdisciplinary Rural African-American Aging Research.—Although racial and rural disparities in health have been well-documented, there remain major gaps in our understanding of how psycho-social stressors, particularly those salient and unique to the experiences of rural African-Americans, contribute to multi-system aging across biological systems. The committee urges NIMHD to work with extramural partners to develop the infrastructure needed for conducting interdisciplinary aging epidemiologic studies in rural contexts despite the above challenges. The committee encourages NIMHD to prioritize efforts focused on establishing partnerships with rural stakeholders and service providers; implementing a multistage probability sampling design for rural populations, and creating a sophisticated recruitment and project management and database system; and conducting research involving collection of biological and physiological aging measures, specifically in rural areas through the application of novel methods to collect biospecimens in participants' homes.

Maximizing Access to Research Careers.—The Committee recognizes the importance of the Maximizing Access to Research Centers (MARC) program and encourages the continuation and enhancement of efforts underway with our nation's historically black colleges and universities (HBCUs). The Committee also recognizes the important work of those HBCUs located in rural parts of the U.S., particularly the Black Belt region in educating significant numbers of underserved students in STEM fields, and it encourages the NIH to continue and strengthen its engagement of institutions located in this region.

NATIONAL CENTER FOR COMPLEMENTARY AND INTEGRATIVE HEALTH (NCCIH)

Appropriation, fiscal year 2019	$146,473,000
Budget request, fiscal year 2020	126,081,000
Committee Recommendation	153,632,000
Change from enacted level	+7,159,000
Change from budget request	+27,551,000

Mission.—The mission of NCCIH is to define, through rigorous scientific investigation, the usefulness and safety of complementary and integrative health interventions and their roles in improving health and health care.

NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES (NCATS)

Appropriation, fiscal year 2019	$806,373,000
Budget request, fiscal year 2020	694,112,000
Committee Recommendation	845,783,000
Change from enacted level	+39,410,000
Change from budget request	+151,671,000

Mission.—NCATS was established to transform the translational process so that new treatments and cures for disease can be delivered to patients faster.

Clinical and Translational Science Awards.—The Committee expects NIH to fund Clinical and Translational Science Awards at not less than the level provided in fiscal year 2018.

JOHN E. FOGARTY INTERNATIONAL CENTER (FIC)

Appropriation, fiscal year 2019	$78,109,000
Budget request, fiscal year 2020	67,235,000
Committee Recommendation	84,926,000
Change from enacted level	+6,817,000
Change from budget request	+17,691,000

Mission.—FIC's mission is to support and facilitate global health research conducted by U.S. and international investigators, building partnerships between health research institutions in the U.S. and abroad, and training the next generation of scientists to address global health needs.

NATIONAL LIBRARY OF MEDICINE (NLM)

Appropriation, fiscal year 2019	$441,997,000
Budget request, fiscal year 2020	380,463,000
Committee Recommendation	463,599,000
Change from enacted level	+21,602,000
Change from budget request	+83,136,000

Mission.—The NLM collects and organizes information important to biomedicine; serves as a national information resource for medical education, research, and health service activities; enhances access to biomedical literature through electronic services; serves the public by providing electronic access to reliable health information for consumers; supports and directs the national network of libraries of medicine; provides grants for research in biomedical communications, medical library development, and training health information specialists; conducts and supports research in biomedical informatics and computational biology; and creates information resources for genomics, molecular biology, toxicology, medical images, environmental health, emergency preparedness and response, and health services research.

OFFICE OF THE DIRECTOR (OD)

Appropriation, fiscal year 2019	$1,909,075,000
Budget request, fiscal year 2020	1,756,544,000
Committee Recommendation	2,049,992,000
Change from enacted level	+140,917,000
Change from budget request	+293,448,000

Mission.—The OD provides leadership to NIH research enterprise and coordinates and directs initiatives that crosscut NIH. OD is responsible for the development and management of intramural and extramural research and research training policy, the review of program quality and effectiveness, the coordination of selected NIH-wide program activities, and the administration of centralized support activities essential to the operations of NIH.

All of Us Program.—The Committee provides a total of $500,000,000 for the All of Us precision medicine initiative, an increase of $124,000,000 above the fiscal year 2019 enacted level.

The Committee recognizes the importance of including populations historically underrepresented in biomedical research in the All of Us research program, a key component of the precision medicine initiative. By ensuring meaningful and broad inclusion, the program ensures more equitable benefit from future medical discoveries using All of Us data, including those in the field of cancer research. The Committee directs NIH to continue its efforts to re-

cruit and retain participants from these historically underrepresented populations so that the All of Us scientific resources reflect the rich diversity of our country.

Biomedical Research Facilities.—The Committee includes $25,000,000 for grants or contracts to public and not-for-profit entities to expand, remodel, renovate, or alter existing research facilities or construct new research facilities as authorized under 42 U.S.C. section 283k.

We also support the Director's efforts to ensure geographic and institutional diversity of the grant program through the Institutions of Emerging Excellence, and direct NIH to allocate no less than 25 percent of funding for this program to these institutions.

Common Fund.—The Committee recommends $617,761,000 for the Common Fund (CF), and an additional $12,600,000 provided to support the Gabriella Miller Kids First Research Act for the sixth year of the ten-year Pediatric Research Initiative. NIH is expected to continue the longstanding CF policy for projects to be short-term, high-impact awards, with no projects receiving funding for more than ten years.

Environmental Influences on Child Health Outcomes.—The Committee includes no less than the fiscal year 2019 enacted level for the Environmental Influences on Child Health Outcomes (ECHO) Project, which has the potential to greatly increase understanding of these critical determinants of health across the lifespan, through its observational cohorts and the IDeA States Pediatric Clinical Trials Network. The Committee encourages continued communication about to the program's progress toward goals, milestones, and projected funding estimates with both external stakeholders and Congress.

Regenerative Medicine.—The Committee provides $8,000,000 for regenerative medicine activities authorized in the 21st Century Cures Act.

Regenerative medicine and tissue engineering are emerging disciplines that aim to revolutionize the treatment of disease by providing cures rather than treating symptoms. Approaches include the use of Induced Pluripotent Stem Cell technology, derived from adult skin cells, to provide limitless supplies of cells for transplant therapy and disease modeling as well as bioengineering and tissue engineering to generate replacement tissues and organs. The Committee encourages NIH to support research into the fields of regenerative medicine and tissue engineering.

Advisory Committees.—The Committee is concerned that despite the legal requirement that all NIH advisory councils have at least two representatives from the fields of public health and the behavioral or social sciences, recent reviews of the membership of advisory councils reveal that not all Institutes and Centers are in compliance with this requirement. The Committee urges compliance with this statute and requests a report on the fields of public health and behavioral and social sciences that are represented on each advisory committee.

Biorepository Catalog.—The Committee is encouraged by efforts within the medical research community to better understand chronic diseases through biorepositories which store medical tissues and associated information for scientific research. Increasing awareness and utilization of these biorepositories by the wider

medical community would be highly useful to science, medicine, and national security. The Committee directs NIH to partner with one or more research institutions to implement innovative approaches for improving the discoverability of biorepositories for tissues and associated data for cardiovascular diseases, neurodegenerative diseases, and cancer. The Committee expects NIH, along with the sponsoring research institution or institutions, to establish protocols for the release of tissues and associated data from such biorepositories.

Harassment Policies.—The Committee recognizes that recent events make clear that harassment occurs in all workplaces, including science and medicine, and that changing the culture that fosters sexual harassment will require sustained commitment and resources. The National Academies of Sciences, Engineering, and Medicine report released last year found that sexual harassment is rampant in the labs and institutions supported by NIH and American taxpayers. The Committee commends NIH for taking steps to remind institutions of the agency's expectation that they implement and enforce policies for reporting sexual harassment and notify NIH when key personnel named on an NIH grant award have been removed because of sexual harassment concerns. However, as the funder of the vast majority of biomedical research conducted in the U.S., the Committee believes NIH must play a more active role in changing the culture that has long perpetuated the problem. The Committee directs NIH to require institutions not just to notify the agency when key personnel named on an NIH grant award are removed because of sexual harassment concerns, but also when they are placed on administrative leave for such concerns, and to submit to the Committee plans to implement measures that attend to harassment in extramural settings with the same level of attention and resources as those devoted to other research misconduct. The Committee also directs NIH to support research in the areas identified in the Report, including the psychology underlying harassment and the experiences and outcomes of diverse groups when subjected to harassment. Additionally, the Committee directs NIH to collaborate with the National Academies to develop best practices for developing more diverse and inclusive cultures in the grantee research environments, including training individuals in institutions that receive NIH funds to recognize and address sexual harassment, and evaluating the efficacy of various sexual harassment training programs.

Mitochondrial Disease.—The Committee is aware that medical research continues to identify new mitochondrial disorders and to confirm the central role that mitochondrial dysfunction plays in a host of major diseases. The Committee urges the Director to support one or more mitochondrial disease centers of excellence. The Committee also encourages the Director to continue supporting and empowering efforts to coordinate this work, including through the trans-NIH Mitochondrial Disorders Working Group. The Committee strongly supports continuing the work of the North American Mitochondrial Disease Consortium (NAMDC) and the Mitochondrial Disease Sequence Data Resource (MSeqDR) Consortium, and applauds the work of NINDS to develop the first set of Common Data Elements (CDEs) for mitochondrial disease to sup-

port further research, including through the BRAIN Initiative as well as the All of Us and ECHO research programs.

Needs of Children in NIH-Wide Initiatives.—The Committee requests an update from the NIH Director within 120 days of enactment of this Act on how NIH will focus on the unique needs of children in its NIH-wide initiatives that span multiple institutes and centers, as well as its highest priority initiatives, including but not limited to the All of Us Research Program, the BRAIN Initiative, and the Cancer Moonshot. The Committee asks that this update describe the inclusion of pediatric subjects, research relevant to pediatrics, specific funding allocations, support for pediatric physician scientists, and a strategy to more proportionally target funds within these initiatives to pediatric research. The Committee commends NIH for the establishment of the Trans-NIH Pediatric Research Consortium to help coordinate pediatric research at NIH. The Committee also requests an update on the activities of the Consortium and its plans to better coordinate pediatric research across the institutes, including identifying gaps and opportunities for collaboration.

Office of AIDS Research.—The Committee directs NIH to increase funding for HIV/AIDS research by at least the same percentage as the increase in NIH overall funding. The Committee recognizes that OAR's AIDS allocation to each IC is based on scientific need and opportunity. Therefore, individual IC AIDS budgets may not each grow at the same rate, but total AIDS and non-AIDS funding will continue to grow at a comparable rate.

Office of Behavioral and Social Sciences Research.—The OBSSR was established to coordinate and promote basic, clinical, and translational research in the behavioral and social sciences in support of the NIH mission. The Committee supports OBSSR's activities aimed at strengthening these sciences by enhancing trans-NIH investments in longitudinal datasets, technology in support of behavior change, innovative research methodologies, and promoting the inclusion of behavioral and social sciences in initiatives at the NIH Institutes and Centers. In partnership with other Institutes and Centers, OBSSR co-funds highly-rated grants that the ICs cannot fund alone. While the NIH budget has grown in recent years, OBSSR funding has remained stagnant. Therefore, the Committee encourages NIH to provide OBSSR funding commensurate with increases given to the ICs.

Women and Opioid Use Disorder.—Research suggests that gender differences in opioid use have significant implications for preventing opioid misuse and treating pain and opioid use disorder (OUD), For example, women are more likely to be prescribed opioids for pain, even for chronic conditions such as headache for which there is little evidence that opioids are an effective treatment. Some medications for treatment of addiction are not as effective in women as they are in men, and vice versa. Additionally, OUD treatment approaches that address an individual's needs as a caregiver, such as child care and domestic counseling, have shown improved engagement of women in treatment. However, much of what is known about substance use interventions is based on the experiences and concerns of men. The Committee urges NIH to support research related to women and OUD, including research

that identifies treatment approaches that may be more effective in women.

Women in Research.—Women represent half of the U.S. population. As such, conditions and diseases that are specific to women's health, or those that present differently in women than men, must be a priority for Federally-funded research. The Committee encourages the NIH, under the leadership of the Office of Research on Women's Health and the NICHD, to do the following: report on the total dollar amount of research invested in health conditions specific to women over the last ten years, including but not limited to pregnancy, gynecologic oncology, and infertility; provide a list of which Institutes provide the highest amount of funding toward health research on conditions specific to women; and report on how and whether funding for research in this area is coordinated across the NIH. The Committee looks forward to a report from the NIH in the fiscal year 2020 Congressional Justification.

Multi-Institute Research Issues

Firearm Injury and Mortality Prevention Research.—The Committee includes at least $25,000,000 to support research on the prevention of gun violence. Research should focus on biological, behavioral, and environmental mechanisms that underlie aggression, as well as prevention of self-directed violence.

Trisomy 21.—The Committee commends NIH for its support of the Investigation of Co-Occurring Conditions Across the Lifespan to Understand Down Syndrome (INCLUDE) Initiative. The Committee includes no less than $60,000,000 within the Office of the Director for the INCLUDE Initiative, an increase of $22,000,000 above the expected fiscal year 2019 funding level. The Committee expects that this multi-year, trans-NIH research initiative may yield scientific discoveries that could significantly improve the health and quality of life of individuals with Down syndrome as well as millions of typical individuals.

Amyloidosis.—The Committee encourages NIH to continue its expansion of research efforts into amyloidosis, a group of rare diseases characterized by abnormally folded protein deposits in tissues. Amyloidosis is often fatal, and there is no known cure. Left untreated, there is an average survival of 15 months. Current methods of treatment are risky and unsuitable for many patients. The Committee directs NIH to inform the Committee on the steps taken to increase the understanding of the causes of amyloidosis and the measures taken to improve the diagnosis and treatment of this devastating group of diseases in the fiscal year 2021 Congressional Justification.

Amyotrophic Lateral Sclerosis (compromise language proposed by NIH).—The Committee directs the NIH Director to facilitate further efforts involving at a minimum, NINDS and NIA to study ALS disease mechanisms and identified genes to facilitate the expeditious development of targeted therapies. These efforts shall bring together research results that will be available to academic researchers, nonprofit organizations, and industry researchers, and will supplement, not supplant, existing NIH-supported activities for ALS research. The near-term research opportunity to find a cure is real for ALS. Any such breakthroughs will have significant benefits for related neurological conditions including traumatic brain in-

jury (TBI), Parkinson's, and Alzheimer's. The Committee directs the NIH to report to the Committee within 180 days of enactment of this act on progress in furthering these research areas.

Brain and Body Health.—The Committee encourages partnership and collaboration with entities able to explore the similarities in the brains and comorbid conditions of those with Alzheimer's disease, dementia, and autism, to facilitate studies related to brain and body health, including studies designed to improve and empirically validate a variety of supports for complex conditions.

Childhood Post-Infectious Neuroimmune Disorders.—The Committee is concerned that children, following streptococcal and other infections, are experiencing the onset of neuropsychiatric and behavioral disorders. These auto-inflammatory encephalopathic conditions, including Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections (PANDAS) and Pediatric Acute-onset Neuropsychiatric Syndrome (PANS), are often misdiagnosed. Delays in diagnosis and lack of developed avenues of treatment result in a devastating escalation of mental health symptoms and associated costs. The Committee encourages the NIH to prioritize research efforts in this area and report to the Committee on incidence, causes, diagnostic criteria, and treatment of these conditions, including ways to further understanding and improve clinical care.

Chronic Fatigue Syndrome.—The Committee commends the NIH on its new ME/CFS efforts, including its plans for a 2019 conference on accelerating research into ME/CFS and its formation of the National Advisory Neurological Disorders and Stroke (NANDS) Council Working Group. The Committee encourages NIH to expand ME/CFS efforts such as (1) new ME/CFS disease specific funding announcements, including those with set-aside funds, to deliver needed diagnostics and treatments as quickly as possible, (2) an initiative to reach consensus on the ME/CFS case definition, and (3) mechanisms to incentivize researchers to enter the field.

Coordination with the National Endowment for the Humanities.—The Committee supports interagency collaboration between NIH and the National Endowment for the Humanities (NEH). The Committee strongly encourages NIH to engage with NEH in collaborative funding initiatives that combine research in health and medical fields with scholarship originating in humanities disciplines. The Committee recognizes that integrated research and education should include scientists, health professionals, and humanists to create opportunities for new approaches to both research and practice in health care.

Dual Diagnosis Addiction and Mental Health Research.—A Surgeon General report recently showed that over 40 percent of Americans with a substance use disorder suffer a dual diagnosis with comorbid mental illness. Understanding the relationship between mental illness and addiction is imperative to providing effective treatment. The Committee encourages NIMH, NIDA, and other relevant Institutes and Centers as appropriate to support research on this topic.

Duchenne Muscular Dystrophy.—Duchenne muscular dystrophy is a severe type of muscular dystrophy for which there is no cure and for which the average life expectancy is in the second decade. The Committee strongly encourages NIH to significantly expand its

support for research on Duchenne muscular dystrophy, particularly accelerating and optimizing the clinical trial process through novel and innovative trial designs, such as platform trials, which might serve as a model for other rare diseases communities. The Committee also urges NIH to support methodological research on challenges, such as redosing, manufacturing supply, and potential immune response, associated with the advent of gene therapies for rare diseases, such as Duchenne.

Ehlers-Danlos Syndrome.—The Committee encourages NIH to support research with respect to Ehlers-Danlos Syndrome and related connective tissue disorders.

Fibrotic Diseases.—The Committee notes recent discoveries by Institutes concerning fibrotic diseases. The Committee continues to encourage NIH to work to advance critical fibrotic disease research.

Food is Medicine.—The Committee recognizes the important role of nutrition in health outcomes and commends work being done across integrated care organizations, as coordinated by NIDDK, to conduct research on Food is Medicine. The Committee further encourages additional collaboration among the Institutes on these topics, included but not limited to: medically-tailored meals, medical nutrition therapy, produce prescription programs, maternal nutrition, and gut microbial changes.

Fragile X.—The Committee commends NIH for supporting research to understand the nature of Fragile X (FX) and its association with other conditions such as autism. The Committee encourages NIH to continue to fund at least three FX research centers, supporting interdisciplinary research in important new areas. The Committee urges NIH to assure that the FX research centers program includes clinical and translational research that directly addresses the needs of affected children and their families, and that applicants for new centers may propose clinical trials as part of their research portfolio. Given the inextricable connection between the FX protein and autism, the Committee urges the Director and her counterparts at each institute with Fragile X and autism portfolios to explore ways to create greater efficiency and synergy among these two research tracks to accelerate translational research toward a better understanding of both conditions and to shorten the time to bring effective treatments for both conditions to market including the funding for clinical trials for both disorders.

Full Spectrum of Medical Research.—The Committee applauds NIH efforts to support and advance the full spectrum of medical research, which ensures breakthroughs in basic science are translated into therapies and diagnostic tools that benefit patient care while disseminating cutting-edge information to the professional community. The Committee notes the importance of flagship initiatives, including the Clinical and Translational Science Awards program, to these important efforts.

Gene-Environment Interactions in Neurodegenerative Disorders in the Diverse Populations of African-Americans and Latinos.—In the context of NIH's robust neurological disease research portfolio, the committee commends the leadership of the NIH in advancing the relevant objectives of the 21st Century Cures Act and the BRAIN Initiative. The Committee is concerned and recognizes the need to better understand the interactions between genetics and environ-

mental factors, in particular with elderly and diverse populations of African Americans and Latinos. The Committee encourages NIH to accelerate collaborative research across relevant institutes and the research community to address the goal of determining the role of the interaction between environmental exposures to toxic chemicals and genetics and their impact on neurodegenerative disorders in diverse populations of African Americans and Latinos, to allow for earlier diagnosis and subsequent treatment to arrest the progression of these devastating neurodegenerative disorders.

Headache Disorders.—The Committee recognizes that migraine is the second leading cause of global disability, and that migraine and other headache disorders are poorly responsive to opioids, but that these drugs are often inappropriately prescribed for these diseases. Under the HEAL Initiative, the NIH has recently issued Funding Opportunity Announcements for research relevant to all types of pain, including migraine and headache disorders, and a few specific announcements that focus specifically on increasing research on back pain and hemodialysis-related pain. The Committee strongly urges the Director of NIH to consider a similar focused group of HEAL Initiative Requests for Applications to fund fundamental, translational, and clinical research on headache disorders, including migraine, post-traumatic headache, the trigeminal autonomic cephalalgias, and intracranial hypo/hypertension.

Hepatitis B.—The Committee commends the Director for establishing a trans-NIH Hepatitis B Working group to include representation from NCI, NIAID, NIDDK and NIMHD to coordinate their research agendas to fund the research necessary to find a cure for hepatitis B and improve liver cancer outcomes. The Committee urges the Director to use the Common Fund to support the integrated trans-NIH research needed to fully address these conditions. The Committee requests that the Office of the Director keep the Committee informed on progress of the Trans-Institute Hepatitis B Working Group and requests a status report be sent to the Committee within 90 days of enactment of this bill into law.

Inflammatory Bowel Diseases.—The Committee recognizes that as many as 3.1 million persons in the U.S. are impacted by Crohn's disease and ulcerative colitis and is concerned about the growing prevalence of IBD and other autoimmune diseases and disorders in the country. The Committee also recognizes that IBD is a complex, immune-mediated, chronic disease model relevant to other such disorders, and that multiple research topics must be explored to understand IBD including psychosocial issues; health disparities; triggering environmental factors; the complex interplay between food, mind-gut, and immune response; and the maternal health of IBD patients as well as their children. The Committee encourages NIH to explore these and other research questions with multiple Institutes and Centers, including NIDDK, NICHD, and NIMHD.

Intramural Non-Human Primate Research.—The Committee has expressed concern since 2015 about the NIH's intramural use of nonhuman primates in biomedical research. The Committee is especially concerned by a nearly 50 percent increase in NIH's use of nonhuman primates in research involving pain and distress since fiscal year 2014. The Committee is encouraged, however, by the NIH's January 2019 letter to Congress expressing support for the retirement of primates no longer needed for research. The Com-

mittee urges the NIH to accelerate efforts to reduce and replace the use of nonhuman primates with alternative research models and directs the NIH to provide a report to the Committee no later than 180 days after enactment that includes: (1) an overview of current NIH nonhuman primate use, including a table with summaries of all active projects, USDA pain categories, and their cost; (2) a detailed explanation of current NIH efforts to reduce and replace the use of primates in research with alternative methods; (3) an assessment of existing research technology not already in use by NIH to reduce and replace primate research and the feasibility of employing it to meet current and future research needs; (4) an assessment of areas where alternatives to primate research may not yet be available; (5) a detailed strategy and timeline for the reduction and replacement of NIH primate research with alternative research methods; and (6) standard operating procedures for the retirement of nonhuman primates no longer needed in research to suitable sanctuaries.

Lyme and Other Tick-Borne Diseases.—The Committee encourages NIH to improve early diagnosis and treatment of Lyme and other tick-borne diseases (TBD) to prevent the development of late stage disease and more serious and longer-term disability, but also intensify research on diagnosis and treatment of late stage and chronic disease. In addition to development of highly sensitive and specific diagnostics for all stages of disease, a goal should be to develop diagnostics with appropriate sensitivity and specificity for the detection of infection. Treatments also should be developed for all stages of Lyme and other TBD, determining optimal combinations of new candidate or older drugs and exploring novel combinations.

The Committee strongly encourages NIH to hold a workshop on the numerous molecular and functional mechanisms that Borrelia burgdorferi (Bb) employs to evade and subvert the immune system of the human host and the immune responses and consequences. The Committee supports inclusion of other TBD pathogens to consider shared and unique characteristics of the pathogens as NIH determines practical for the workshop, with participation by researchers who have published peer-reviewed articles describing such mechanisms and immune cell responses, particularly for Bb.

National Commission on Lymphatic Diseases.—The Committee applauds the Office of the Director, NHLBI, NIDDK, and NIAID for facilitating the 2015 Trans-NIH Lymphatics Symposium. The Committee notes the scientific potential that lymphatics research has to treat a wide variety of severe diseases, including heart disease, AIDS, diabetes, rheumatoid arthritis, Alzheimer's, and cancer. The Committee recommends continuing and extending the efforts of the trans-NIH Coordinating Committee for Lymphatic Research, with participation from other relevant institutes, to explore scientific directions that might expand and advance research in this field.

National Laboratories.—Collaborative research efforts between the NIH and the Department of Energy (DOE) are pushing the boundaries in health research, including drug discovery, brain research and other biomedical research areas. The Committee encourages NIH to expand its relationships with DOE and the National Laboratories to work together more closely and in more strategic ways to leverage DOE's research capabilities, including in-

strumentation, materials, modeling and simulation, and data science, which will support application in many areas of biomedical research. Not later than 180 days after enactment of this Act, NIH shall provide to the Committee a report on successful NIH–DOE collaborations to date.

Neurofibromatosis.—The Committee supports efforts to increase funding and resources for NF research and treatment at multiple Institutes, including NCI, NINDS, NIDCD, NHLBI, NICHD, NIMH, NCATS, and NEI. Children and adults with NF are at significant risk for the development of many forms of cancer, as well as deafness, blindness, developmental delays and autism; the Committee encourages NCI to increase its NF research portfolio in fundamental laboratory science, patient-directed research, and clinical trials focused on NF-associated benign and malignant cancers. The Committee also encourages NCI to support clinical and preclinical trials consortia. Because NF can cause blindness, pain, and hearing loss, the Committee urges NINDS to continue to aggressively fund fundamental basic science research on NF relevant to restoring normal nerve function. Based on emerging findings from numerous researchers worldwide demonstrating that children with NF are at significant risk for autism, learning disabilities, motor delays, and attention deficits, the Committee encourages NINDS, NIMH, and NICHD to increase their investments in laboratory-based and patient-directed research investigations in these areas. Since NF2 accounts for approximately 5 percent of genetic forms of deafness, the Committee encourages NIDCD to expand its investment in NF2-related research. NFl can cause vision loss due to optic gliomas. The Committee encourages NEI to expand its investment in NF1-focused research on optic gliomas and vision restoration.

Pediatric Physician-Scientist Workforce.—The Committee is concerned about the challenges in attracting and retaining researchers, particularly physician-scientists, to careers in pediatrics and the impact these challenges will have on the pace of innovation and discovery. The Committee directs NIH to build upon the formation of the Trans-NIH Pediatric Research Consortium (N–PeRC) to develop a framework for expanded pediatric research training that would supplement and not supplant existing programs, cut across multiple Institutes and Centers, and focus on supporting individual physician-scientists who have not yet achieved a level of research independence so they can be qualified to meet current and future needs in pediatric research.

Undiagnosed Disease Network.—The Committee continues to support the work of the Undiagnosed Disease Network (UDN) and urges the UDN to continue efforts to enhance access to patients, caregivers, and other stakeholders as well as make information obtained through the UDL available to other Federal agencies.

Wound Care Research.—In its fiscal year 2019 Congressional Justification, NIGMS estimates the direct cost of chronic wounds to the healthcare system to exceed $50 billion. Patients with nonhealing wounds are likely to be older adults, nonambulatory or paralyzed, unable to provide self-care, and/or suffering from dementia. The committee urges NIH to explore ways to optimize resources for specific chronic and acute wound care research at multiple Institutes. The research may include understanding the development of chronic wounds, including transition from acute wounds, and on

development of treatments that simultaneously reduce pain, promote healing, and prevent infection and on methods to diagnose and monitor chronic wounds. The Committee directs NIH to provide a report to the Committee summarizing NIH's investments in wound care funding over the past five years within 90 days of enactment of this Act.

BUILDINGS AND FACILITIES

Appropriation, fiscal year 2019	$200,000,000
Budget request, fiscal year 2020	200,000,000
Committee Recommendation	200,000,000
Change from enacted level	– – –
Change from budget request	– – –

Mission.—This account provides for the design, construction, improvement, and major repair of clinical, laboratory, and office buildings and supporting facilities essential to the mission of the NIH. The funds in this appropriation support the buildings on the main NIH campus in Bethesda, Maryland; the Animal Center in Poolesville, Maryland; the National Institute of Environmental Health Sciences facility in Research Triangle Park, North Carolina; and other smaller facilities throughout the U.S.

NIH INNOVATION ACCOUNT

This account supports NIH programs authorized in the 21st Century Cures Act (P.L. 114–255).

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

Appropriation, fiscal year 2019	$5,742,496,000
Budget request, fiscal year 2020	5,677,600,000
Committee Recommendation	5,856,996,000
Change from enacted level	+114,500,000
Change from budget request	+179,396,000

The Committee recommendation for the Substance Abuse and Mental Health Services Administration (SAMHSA) program level includes $5,711,329,000 in discretionary budget authority, $133,667,000 in PHS Evaluation Tap Funding, and $12,000,000 in transfers from the Prevention and Public Health (PPH) Fund.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

The Committee continues to include bill language that exempts the Mental Health Block Grant and the Substance Abuse Prevention and Treatment Block Grant as a source for the Public Health Service Act section 241 evaluation set-aside in fiscal year 2020.

MENTAL HEALTH

Appropriation, fiscal year 2019	$1,558,013,000
Budget request, fiscal year 2020	1,506,086,000
Committee Recommendation	1,652,013,000
Change from enacted level	+94,000,000
Change from budget request	+145,927,000

Within the total provided for Mental Health Programs of Regional and National Significance, the Committee includes the following amounts:

Budget Activity	FY 2020 Committee
Capacity:	
Seclusion and Restraint	$1,147,000
Project AWARE	84,001,000
Mental Health Awareness Training	20,963,000
Healthy Transitions	30,951,000
Infant and Early Childhood Mental Health	10,000,000
Children and Family Programs	7,229,000
Consumer and Family Network Grants	4,954,000
Project LAUNCH	23,605,000
Mental Health System Transformation	3,779,000
Primary and Behavioral Health Care Integration	49,877,000
National Strategy for Suicide Prevention	16,200,000
Zero Suicide	*14,000,000*
American Indian and Alaska Native Set-Aside	*2,200,000*
Suicide Lifeline	17,000,000
Garrett Lee Smith-Youth Suicide Prevention.	
State Grants	35,427,000
Campus Grants	6,488,000
American Indian and Alaska Native Suicide Prevention	2,931,000
Tribal Behavioral Health Grants	20,000,000
Homeless Prevention Programs	30,696,000
Minority AIDS	9,224,000
Criminal and Juvenile Justice Programs	9,269,000
Assisted Outpatient Treatment	15,000,000
Assertive Community Treatment for Individuals with Serious Mental Illness	10,000,000
Science and Service:	
Garrett Lee Smith-Suicide Prevention Resource Center	5,988,000
Practice Improvement and Training	7,828,000
Consumer and Consumer Support Technical Assistance Centers	1,918,000
Primary and Behavioral Health Care Integration Technical Assistance	1,991,000
Minority Fellowship Program	10,059,000
Disaster Response	1,953,000
Homelessness	2,296,000

Criminal and Juvenile Justice Programs.—The Committee includes an increase of $5,000,000 to continue to address unmet need for effective behavioral health services and supports that are accessible before, during, and after incarceration and continue in the community for those with a mental or substance use disorder.

Infant and Early Childhood Mental Health.—The Committee includes an increase of $5,000,000 to fund grants in additional States, which will expand access to a range of evidence-based and culturally-appropriate infant and early childhood mental health services, and to aid in addressing the national shortage of mental health professionals with infant and early childhood expertise.

Minority Fellowship Program.—As Congress seeks to better address substance abuse and mental health disorders across all populations, the Committee includes an increase of $2,000,000 in the Minority Fellowship Program in order to improve prevention, wellness, and treatment across the lifespan. The Committee recognizes the critical importance of supporting a diverse behavioral health workforce and its effectiveness in addressing substance use disorders and mental health issues impacting minority and underserved populations.

Now is the Time.—To increase access to mental health services, as set out by the 2013 "Now is the Time" plan, the Committee in-

cludes an increase of $13,000,000 for Project AWARE, which is designed to identify children and youth in need of mental health services, to increase access to mental health treatment, and promote mental health literacy among teachers and school personnel. Recent data from the National Survey on Drug Use and Health indicates that there has been a significant increase in the number of youth and young adults aged 12 to 25 reporting symptoms of major depression, serious psychological distress, and suicidal thoughts and actions. The Committee encourages SAMHSA to sustain and strengthen its grant and other programs that support school-based and campus-based services aimed at preventing and treating mental health challenges experienced by youth and young adults. In addition, the Committee provides an increase of $5,000,000 for the Healthy Transitions program, which provides grants to States and Tribes to improve access to mental disorder treatment and related support services for young people aged 16 to 25 who either have, or are at risk of developing a serious mental health condition.

PTSD in First Responders.—The Committee is aware of research indicating that individuals working in the civilian first responder disciplines of law enforcement, fire services, and emergency medical services are at greater risk for full or partial post-traumatic stress disorder (PTSD) than most other occupations because their responsibilities routinely entail confrontation with traumatic stressors. The Committee encourages SAMHSA to examine PTSD among this population, including prevalence rate, risk factors, symptom presentation, course, comorbidities, and rates of suicidal thoughts and actions.

Suicide Prevention.—The Committee recognizes the rising rate of suicide and notes that family and friends are often in the best position to recognize the warning signs of suicide and to help an at-risk individual get treatment. The Committee urges SAMHSA to develop and disseminate programs to provide specialized training and resources on identifying and responding to people at risk of suicide for families and friends of at-risk individuals. The Committee includes an increase of $5,000,000 to expand the implementation of the Zero Suicide model, a comprehensive, multi-setting approach to suicide prevention in health care systems. The Committee also includes an increase of $5,000,000 for the Suicide Lifeline to expand support for rapid access at any time of the day or night to crisis intervention, and when needed, emergency response. In fiscal year 2018, the Lifeline answered 18 percent more calls than in the prior fiscal year.

Mental Health Block Grant

The Committee includes a total of $757,571,000, an increase of $35,000,000, for the Mental Health Block Grant. The block grant provides funds to States to support mental illness prevention, treatment, and rehabilitation services. Funds are allocated according to a statutory formula among the States that have submitted approved annual plans.

The Committee continues the 10 percent set-aside within the Mental Health Block Grant total for evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders. The Committee expects SAMHSA to continue its collaboration with the National Institute of Mental

Health to encourage States to use this block grant funding to support programs that demonstrate strong evidence of effectiveness.

Furthermore, the Committee directs a new five percent set-aside of the total for evidence-based crisis care programs addressing the needs of individuals with serious mental illnesses and children with serious mental and emotional disturbances. The Committee directs SAMHSA to use the set-aside to fund, at the discretion of eligible States and Territories, some or all of a set of core crisis care elements including: centrally deployed 24/7 mobile crisis units, short-term residential crisis stabilization beds, evidence-based protocols for delivering services to individuals with suicide risk, and regional or State-wide crisis call centers coordinating in real time. The Committee directs SAMHSA to include in the fiscal year 2021 budget request a detailed table showing at a minimum: State allotments, the name of the program being implemented, and a short description of the program.

National Child Traumatic Stress Initiative

The Committee includes $70,887,000, an increase of $7,000,000, for the National Child Traumatic Stress Initiative. The National Child Traumatic Stress Initiative continues to be an extremely valuable resource to improve behavioral health services and interventions for children and adolescents exposed to traumatic events. The increase in funding is provided for new grants to expand support for community-based mental health clinics through the National Child Traumatic Stress Network, who develop and promote effective community practices for children and adolescents exposed to a wide array of traumatic events.

Children's Mental Health

The Committee includes $130,000,000, an increase of $5,000,000, for the Children's Mental Health program. This program supports grants and technical assistance for community-based services for children and adolescents with serious emotional, behavioral, or mental disorders, and assists States and local jurisdictions in developing integrated systems of community care.

Projects for Assistance in Transition from Homelessness

The Committee includes $66,635,000, an increase of $2,000,000 for the Projects for Assistance in Transition from Homelessness (PATH) program. The PATH program supports grants to States and Territories for assistance to individuals suffering from severe mental illness and/or substance abuse disorders and who are homeless or at imminent risk of becoming homeless. Grants may be used for outreach, screening and diagnostic treatment services, rehabilitation services, community mental health services, alcohol or drug treatment services, training, case management services, supportive and supervisory services in residential settings, and a limited set of housing services.

Protection and Advocacy for Individuals with Mental Illness

The Committee includes $36,146,000 for the Protection and Advocacy for Individuals with Mental Illness program. This program serves to ensure that the rights of mentally ill individuals are protected while they are patients in all public and private facilities or

while they are living in the community. Funds are allocated to States according to a formula based on population and relative per capita incomes.

Certified Community Behavioral Health Clinics

The Committee includes $150,000,000 to provide grants to continue the improvement of mental disorder treatment, services, and interventions for children and adults, including the use of long-acting injectable medications approved for the treatment of serious mental illness and assistance to those with severe mental health needs who are at risk of recidivism. These mental health centers can provide, but are not limited to, the following services: crisis care, residential treatment, outpatient mental health and primary care services, and community re-entry supports.

SUBSTANCE ABUSE TREATMENT

Appropriation, fiscal year 2019	$3,818,756,000
Budget request, fiscal year 2020	3,787,967,000
Committee Recommendation	3,832,256,000
Change from enacted level	+13,500,000
Change from budget request	+44,289,000

Substance Abuse Prevention and Treatment Block Grant

The Committee includes a program level of $1,858,079,000 for the Substance Abuse Prevention and Treatment Block Grant provide funding to States to support alcohol and drug abuse prevention, treatment, and rehabilitation services. The Committee recognizes the critical role the block grant plays in State systems across the country.

State Opioid Response Grants

The Committee includes $1,500,000,000 for grants to States to address the opioid crisis, of which $50,000,000 is for grants to Indian Tribes or tribal organizations. In addition, the Committee continues the 15 percent set-aside for States with the highest age-adjusted mortality rate related to opioid use disorders. Consistent with the objective of Comprehensive Opioid Recovery Centers, as authorized in section 7121 of the SUPPORT Act, the Committee recognizes that there is a tremendous need for increasing access to coordinated, comprehensive care services that utilize the full range of FDA-approved medications and evidence-based treatments. These long-term care and support services provided through the State Opioid Response grants program dramatically improve outcomes for individuals and generate meaningful outcomes data to contribute to best practices for substance use disorders.

Within the total provided for Programs of Regional and National Significance, the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Capacity:	
Opioid Treatment Programs and Regulatory Activities	$8,724,000
Screening, Brief Intervention, Referral to Treatment	33,000,000
Budget Authority	*31,000,000*
PHS Evaluation Funds	*2,000,000*
Targeted Capacity Expansion-General	100,192,000
Medication-Assisted Treatment	*89,000,000*
Tribal Set-aside	*10,000,000*

Budget Activity	FY 2020 Committee
Grants to Prevent Prescription Drug/Opioid Overdose	12,000,000
First Responder Training	*36,000,000*
Rural Focus	*18,000,000*
Grants to Develop Curricula for DATA Act Waivers	4,000,000
Pregnant and Postpartum Women	29,931,000
Recovery Community Services Program	2,434,000
Children and Families	29,605,000
Treatment Systems for Homeless	38,386,000
Minority AIDS	65,570,000
Criminal Justice Activities	89,000,000
Drug Courts	*70,000,000*
Improving Access to Overdose Treatment	1,000,000
Building Communities of Recovery	6,000,000
Peer Support Technical Assistance Center	2,000,000
Strengthening Community Crisis Response Systems	2,500,000
Science and Service:	
Addiction Technology Transfer Centers	9,046,000
Minority Fellowship Program	4,789,000

Criminal Justice Activities.—The Committee provides $89,000,000 for the Criminal Justice Activities program. Of this amount, the Committee directs that not less than $70,000,000 will be used exclusively for Drug Court activities. The Committee continues to direct SAMHSA to ensure that all funding appropriated for Drug Treatment Courts is allocated to serve people diagnosed with a substance use disorder as their primary condition. The Committee directs SAMHSA to ensure that all drug treatment court grant recipients work directly with the corresponding State substance abuse agency in the planning, implementation, and evaluation of the grant. The Committee further directs SAMHSA to expand training and technical assistance to drug treatment court grant recipients to ensure evidence-based practices are fully implemented.

The Committee recognizes the importance of providing comprehensive services to those who suffer from severe mental health issues. The Committee is aware that there can be a correlation between mental health disturbances and repeat criminal offenders. Therefore, the Committee strongly encourages SAMHSA's Criminal Justice Activities to prioritize funding for centers that provide assistance to those with severe mental health needs who are at risk of recidivism. These mental health centers can provide, but are not limited to, the following services: crisis care, residential treatment, outpatient mental health and primary care services, and community re-entry supports. The Committee strongly encourages SAMHSA to prioritize applications from areas with high rates of uninsured individuals, poverty, and substance use disorders.

Grants to Develop Curricula for DATA Act Waivers.—The Committee includes $4,000,000 for this new program, which is authorized by section 3203 of the SUPPORT for Patients and Communities Act, to enhance access to substance use disorder treatment by providing grants to accredited schools of allopathic or osteopathic medicine and teaching hospitals located in the U.S. to support the development of curricula.

Grants to Prevent Prescription Drug/Opioid Overdose and First Responder Training.—The Committee includes $12,000,000 for Grants to Prevent Prescription Drug/Opioid Overdose Related Deaths. The Committee also includes $36,000,000 for First Re-

sponder Training for Opioid Overdose Reversal Drugs, of which $18,000,000 is to address the critical needs of the rural populations.

The Committee notes strong concerns about the increasing number of unintentional overdose deaths attributable to prescription and nonprescription opioids. SAMHSA is urged to take steps to encourage and support the use of Substance Abuse and Prevention Block Grant funds for opioid safety education and training, including initiatives that improve access for licensed healthcare professionals, including paramedics, to emergency devices used to rapidly reverse the effects of opioid overdoses. Such initiatives should incorporate robust evidence-based intervention training and facilitate linkage to treatment and recovery services.

Peer Support Technical Assistance Center.—The Committee provides $2,000,000 for the creation of a Peer Support Technical Assistance Center, as authorized in section 7152 of the SUPPORT Act. The Center will provide technical assistance and support to recovery community organizations and peer support networks, including such assistance and support related to best practices and data collection.

Pregnant and Postpartum Women.—The Committee provides $29,931,000 for Pregnant and Postpartum Women. The Committee recognizes SAMHSA for its work managing the Pregnant and Postpartum Women program which utilizes a family-centered approach to provide comprehensive residential substance use disorder treatment services for pregnant and postpartum women, their minor children and for other family members. A provision in the Comprehensive Addiction and Recovery Act (CARA) authorizes SAMHSA to allocate a portion of these resources for a pilot program to State alcohol and drug agencies to support outpatient, intensive outpatient and related services in a family-centered approach. The Committee encourages SAMHSA to fund an additional cohort of States above and beyond those pilots already funded.

Screening, Brief Intervention, and Referral to Treatment.—The Committee includes an increase of $3,000,000 for a new effort focused on reducing underage drinking. The Committee provides this additional funding for grants to pediatric health care providers in accordance with the specifications outlined in section 9016 of the 21st Century Cures Act. Training grants should focus on screening for underage drinking, and opioid and other drug use.

Strengthening Community Crisis Response Systems.—The Committee provides $2,500,000 for the creation of a competitive grant opportunity to support communities for crisis intervention and prevention, as authorized by section 9007 of the 21st Century Cures Act.

Targeted Capacity Expansion.—The Committee includes $100,192,000 for Targeted Capacity Expansion activities. Of this amount, the Committee includes $89,000,000 for the Medication-Assisted Treatment for Prescription Drug and Opioid Addiction program, of which $10,000,000 is for grants to Indian tribes, tribal organizations, or consortia. The Center for Substance Abuse Treatment is directed to include as an allowable use medication-assisted treatment and other clinically appropriate services to achieve and maintain abstinence from all opioids and heroin and prioritize

treatment regimens that are less susceptible to diversion for illicit purposes.

Treatment Systems for Homeless.—The Committee includes $38,386,000 for the Treatment Systems for Homeless program, which is an increase of $2,000,000 to expand the Grants for the Benefit of Homeless Individuals program.

Center for Substance Abuse Treatment

Addiction Treatment Centers.—The Committee encourages all addiction treatment centers to either offer comprehensive care for substance use and mental health disorders on site or have a network in place should they need to refer patients to services not available in their location. This includes having available a multidisciplinary staff to provide a range of diagnostic tools, psychopharmacology, all forms of evidence-based medication assisted treatment for substance use disorders (methadone, buprenorphine, vivitrol, and naltrexone), psychotherapy, contingency management, and recovery supports.

Continuum of Care.—Evidence demonstrates that efforts to coordinate opioid abuse treatment that promote a continuum of care model can produce effective results. Successful examples include the development of "no wrong door" treatment models like scale-up training, availability of peer coaches, and the use of mobile application technology to enhance access to services and successful treatment outcomes and support long-term relapse prevention. SAMHSA is encouraged to work with State and local grantees to prioritize the implementation of coordinated continuum of care approaches.

Medication-Supported Therapy.—The Committee is concerned that relapse following opioid detoxification is a contributing factor to the overdose crisis. The Committee appreciates SAMHSA's efforts to address this within the Federal grant population by emphasizing that opioid detoxification should be followed by medication to prevent relapse to opioid dependence and encourages SAMHSA to disseminate and implement this policy in all settings where detoxification is offered, including rehabilitation and criminal justice settings.

Opioid Treatment.—The Committee is aware that pregnancy and child birth can present a unique window of opportunity to assist parents in overcoming addiction to opioids and other substances. The Committee encourages SAMHSA to support approaches that consider the needs of infants and mothers impacted by substance use as a dyad, to enhance treatment effectiveness, improve treatment outcomes, and reduce relapse and the number of subsequent substance-impacted pregnancies.

Sober Homes.—The Committee urges SAMHSA to provide information, training and support for communities dealing with the opioid addiction crisis. Specifically, to provide information to local government officials regarding sober home best practices, providing information and support to State and local governments on model legislation dealing with effective oversight of drug treatment facilities, sober homes and marketing entities, in an effort to protect vulnerable persons with substance use disorder, and their families, from fraudulent and abusive practices.

SUBSTANCE ABUSE PREVENTION

Appropriation, fiscal year 2019	$205,469,000
Budget request, fiscal year 2020	244,090,000
Committee Recommendation	212,469,000
Change from enacted level	+7,000,000
Change from budget request	−31,621,000

The Committee does not accept the proposal to include $100,000,000 for the Drug-Free Communities program in SAMHSA's Substance Abuse Prevention appropriation. The Committee directs the program to remain in the Office of National Drug Control Policy.

Within the total provided for Programs of Regional and National Significance, the Committee provides the following amounts:

Budget Activity	FY 2020 Committee
Capacity:	
Strategic Prevention Framework	$119,484,000
Strategic Prevention Framework Rx	*10,000,000*
Federal Drug-Free Workplace	4,894,000
Minority AIDS Initiative	46,205,000
Sober Truth on Preventing Underage Drinking	10,000,000
National Adult-Oriented Media Public Service Campaign	*2,000,000*
Community Based Coalition Enhancement Grants	*7,000,000*
Interagency Coordinating Committee to Prevent Underage Drinking	*1,000,000*
Tribal Behavioral Health Grants	20,000,000
Science and Service:	
Center for the Application of Prevention Technologies	7,493,000
Science and Service Program Coordination	4,072,000
Minority Fellowship Program	321,000

Minority AIDS Initiative.—The Committee includes an increase of $5,000,000 for the Minority AIDS Initiative to expand efforts for HIV/AIDS prevention, screening, treatment, education, and outreach to minority communities heavily impacted by HIV/AIDS though culturally and linguistically appropriate care and services.

Sober Truth on Preventing Underage Drinking Act (STOP Act).—The Committee includes an increase of $1,000,000 for the public service campaign and an increase of $1,000,000 for community-based coalition enhancement grants. These increases will strengthen efforts to reduce and prevent underage drinking.

HEALTH SURVEILLANCE AND PROGRAM SUPPORT

Appropriation, fiscal year 2019	$160,258,000
Budget request, fiscal year 2020	139,457,000
Committee Recommendation	160,258,000
Change from enacted level	– – –
Change from budget request	+20,801,000

The Committee provides the following amounts for Health Surveillance and Program Support:

Budget Activity	FY 2020 Committee
Health Surveillance	$47,258,000
PHS Evaluation Funds	*30,428,000*
Program Support	79,000,000
Public Awareness and Support	13,000,000
Performance and Quality Information Systems	10,000,000
Drug Abuse Warning Network	10,000,000
Behavioral Health Workforce	1,000,000

Budget Activity	FY 2020 Committee
PHS Evaluation Funds	*1,000,000*

Inpatient Treatment for Mental Health and Substance Abuse Disorders.—The Committee recognizes that communities across the nation are experiencing a shortage of psychiatric and substance abuse treatment capacity to provide acute inpatient care. According to the Treatment Advocacy Center, communities should have a capacity of 40 to 60 inpatient beds per 100,000 residents. However, the national average is 11.7 beds per 100,000 residents. Therefore, the Committee directs SAMHSA to study the impact of the inpatient hospital bed shortage on mental health and substance abuse treatment and recovery and provide those findings to the Committee within 90 days of enactment of this Act.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

HEALTHCARE RESEARCH AND QUALITY

Appropriation, fiscal year 2019	$338,000,000
Budget request, fiscal year 2020	– – –
Committee Recommendation	358,217,000
Change from enacted level	+20,217,000
Change from budget request	+358,217,000

The Committee includes $358,217,000 in program level funding for the Agency for Healthcare Research and Quality (AHRQ), including $339,809,000 in budget authority and $18,208,000 in transfers available under section 241 of the PHS Act.

AHRQ's mission is to produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and to work within HHS and with other partners to make sure that the evidence is understood and used. AHRQ conducts, supports, and disseminates scientific and policy-relevant research on topics such as promoting high-quality care, eliminating healthcare disparities, using information technology, and evaluating the effectiveness of clinical services.

Within the total for AHRQ, the House includes the following amounts:

Budget Activity	FY 2020 Committee
Prevention/Care Management	$12,649,000
Health Information Technology (IT)	16,500,000
Patient Safety Research	80,776,000
Health Services Research, Data, and Dissemination	105,192,000
Medical Expenditure Panel Survey	71,800,000
Program Management	71,300,000

Antimicrobial Resistance.—The Committee continues to provide no less than $10,000,000 for combating antibiotic-resistant bacteria.

Diagnostic Errors.—Within the Patient Safety portfolio, the Committee includes no less than $4,000,000 to support improving diagnosis in medicine, including a multiyear competitive grant program to address diagnostic errors, which may include the establishment of Research Centers of Diagnostic Excellence to develop systems, measures, and new technology solutions to improve diagnostic safe-

ty and quality. This is an increase of $2,000,000 above the fiscal year 2019 enacted level.

EvidenceNOW Health Extension Regional Offices.—The Committee supports the work of AHRQ to better serve the health needs of rural and under-served minorities through such programs as the Evidence Now network. The Committee encourages AHRQ to expand its efforts to include additional health extension program sites connected to public academic health centers in States with high populations of ethnically under-served minorities, rural communities, and tribal populations.

Kratom.—The Committee notes that little research has been done to date on natural products that are used by many to treat pain in place of opioids. These natural plants and substances include kratom and cannabidiol (CBD). Given the wide availability and increased use of these substances, it is imperative to know more about potential risks or benefits, and whether or not they can have a role in finding new and effective non-opioid methods to treat pain. The Committee recommends an additional $3,000,000 for this research and directs AHRQ to make center-based grants to address research which will lead to clinical trials in geographic regions which are among the hardest hit by the opioid crisis.

Understanding the Impact of Prior Authorization.—The Committee is concerned about the potential adverse impacts the prior authorization process has on patient health outcomes. The Committee includes no less than $500,000 for research that examines whether and to what extent delays in treatment due to prior authorization negatively impact patient outcomes.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

GRANTS TO STATES FOR MEDICAID

Appropriation, fiscal year 2019	$276,236,212,000
Budget request, fiscal year 2020	273,188,478,000
Committee Recommendation	273,188,478,000
Change from enacted level	−3,047,734,000
Change from budget request	−−−

Medicaid provides health coverage to eligible populations, including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities. Medicaid is administered by States, according to Federal requirements. The program is funded jointly by States and the Federal government.

This amount does not include $137,931,797,000, which was provided as advance funding for the first quarter of fiscal year 2020. In addition, the Committee recommends an advance appropriation of $139,903,075,000 for program costs in the first quarter of fiscal year 2021.

The Committee continues bill language providing indefinite budget authority for unanticipated costs in fiscal year 2020. Federal Medicaid grants reimburse States for a portion of their expenditures in providing health care for individuals whose income and resources fall below specified levels. Subject to certain minimum requirements, States are provided certain limited authority within the law to set eligibility, coverage, and payment levels.

PAYMENTS TO THE HEALTH CARE TRUST FUNDS

Appropriation, fiscal year 2019	$378,343,800,000
Budget request, fiscal year 2020	410,796,100,000
Committee Recommendation	410,796,100,000
Change from enacted level	+32,452,300,000
Change from budget request	– – –

This account includes the general fund subsidy to the Federal Supplementary Medical Insurance Trust Fund for Medicare Part B benefits, and Medicare drug benefits and administration, as well as other reimbursements to the Federal Hospital Insurance Trust Fund for benefits and related to administrative costs, which have not been financed by payroll taxes or premium contributions. The Committee continues bill language providing indefinite authority to pay the general revenue portion of the Medicare Part B premium match and providing resources for the Medicare Part D drug benefit program in the event that the annual appropriation is insufficient.

PROGRAM MANAGEMENT

Appropriation, fiscal year 2019	$3,669,744,000
Budget request, fiscal year 2020	3,579,427,000
Committee Recommendation	3,984,744,000
Change from enacted level	+315,000,000
Change from budget request	+405,317,000

Research, Demonstration, and Evaluation

The Committee includes $20,054,000 for Research, Demonstration, and Evaluation, which is the same as the fiscal year 2019 enacted level and $20,054,000 more than the fiscal year 2020 budget request.

Program Operations

The Committee includes $2,824,823,000 for Program Operations, which is $305,000,000 more than the fiscal year 2019 enacted level and $435,121,000 more than the fiscal year 2020 budget request. This office administers the programs under the Centers for Medicare & Medicaid Services (CMS), funds beneficiary outreach and education, maintains information technology infrastructure needed to support various claims processing systems, and supports other programmatic improvements.

Adult Vaccinations.—Adults seeking access to and coverage for vaccines encounter multiple financial hurdles. Addressing cost-sharing and payment issues with Part D vaccines is critical to ensuring that Medicare beneficiaries have access to vaccines that have the potential to prevent serious disease. To help in addressing current low vaccination rates, the Committee encourages CMS to find ways for patients to have no-cost access to Part D vaccines, similar to the coverage of Part B vaccines.

Alternatives to Cardiac Stress Test.—The Committee is aware of the significant health and cost savings advantages of new technology for non-invasive diagnosis of coronary arterial disease (e.g., coronary computed tomography angiography and associated technologies). These less invasive diagnostic options have been recognized by private insurers, health associations, and other health systems as a preferred option for diagnosing coronary arterial disease. The Committee strongly encourages CMS to assess the benefits to

patient care and savings to Federal health programs these less invasive options represent, when determining reimbursement policies. The Committee requests an update in the fiscal year 2021 Congressional Justification on the diagnostic options available under CMS-administered health programs for coronary arterial disease.

Ambulatory Surgical Centers.—The Committee requests an update on any increased costs to the Medicare program and its beneficiaries due to the potential migration of procedures from ambulatory surgical centers (ASCs) to higher cost settings. The update should examine volume changes over the past ten years and identify whether there are procedures that are migrating from ASCs to higher cost settings. The update also should include any recent changes in the ASC payment system to address migration of procedures.

Biosimilars.—The Committee is concerned about the underutilization of lower cost biosimilars, particularly those in Medicare Part B, and encourages the Administration to support development and implementation of new policies such as reducing patient copays or creating shared cost savings programs with healthcare providers that would help to increase the uptake of biosimilars in the United States. The Committee encourages CMS to identify the uptake rate for biosimilars in the Medicare and Medicaid populations.

Birth Centers.—The Committee is concerned that the U.S. spends significantly more per capita on childbirth than any other industrialized nation, with costs estimated to be well over $50 billion annually, and yet despite this investment continues to rank far behind almost all other developed countries in birth outcomes for both mothers and babies, including high rates of preterm birth, low birth weight, and high maternal and infant mortality. The Committee was pleased that the CMMI Strong Start Initiative was created to look at how three different models of care (Maternity Care Homes, Centering Group Model Prenatal Care, and Birth Centers) would impact these outcomes and the costs associated with childbirth. The Committee notes that findings of this five-year study showed no differences in cost or outcomes for the Maternity Care Home model, and some slight cost savings and improved rates of low birthweight for the Centering model. But the birth centers, which provided a midwife-led model of holistic care, showed significant cost savings and improved childbirth outcomes across all measures. The Committee urges CMS to widely disseminate these findings to payors and consumers. Since Medicaid is the primary payor for almost half of all childbearing women and newborns in this country, the Committee strongly urges CMS to develop a proposal for how it will increase access to birth centers and midwives in all state Medicaid programs, and incentivize this model of care for low-risk women. The Committee requests a report within 120 days of enactment of this Act.

BRCA Genetic Testing.—The Committee understands that the use of pre-treatment interventions, such as screening for biomarkers or testing through the use of companion diagnostics, can help healthcare providers select treatment options with a greater probability of success leading to better outcomes for patients. The Committee also recognizes that the use of these interventions can reduce unnecessary costs in the current health care system by avoid-

ing ineffective treatments and that awareness of genetic risk factors can encourage preventive care and early diagnosis. An example is in breast cancer, the most common cancer among women. Genetic predisposition is responsible for up to 10 percent of cases of breast cancer. Two genetic mutations, BRCA1 and BRCA2, have been found to significantly contribute to the genetic risk of developing breast cancer. Between 55 percent and 90 percent of women with a BRCA mutation will develop breast cancer during their lifetime compared to only 12.5 percent among women in the general population, and breast cancers related to BRCA mutations have a higher chance of recurrence and of developing into triple-negative breast cancer, which is difficult to treat. The Committee urges CMS to identify ways to expand access to BRCA genetic testing, especially among the most vulnerable patient populations; expand eligibility criteria for testing and screenings; and increase public and health care provider awareness of the importance of early testing and companion diagnostics.

Center for Program Integrity.—The Committee applauds CMS's Center for Program Integrity's efforts to shift from a pay-and-chase model to one that prioritizes claim review prior to payment. The time to identify and resolve billing errors and therefore avoid improper payments is during the claim adjudication and prior to payments being made. Once a claim is paid, it is harder to address billing errors and improper payments. The Committee encourages the Center to explore how it can leverage effective commercial prepayment solutions to rapidly review and adjudicate outlier payments within Medicare's Inpatient Prospective Payment System.

Central Receiving Facilities.—The Committee is aware there are Central Receiving Facilities (CRFs), or similarly designated facilities, receiving mental health patients in Crisis Stabilization Unit in-patient care, which are not presently deemed eligible for Medicare Part A reimbursement for patient psychiatric admissions. The Committee encourages CMMI to explore the feasibility and cost savings to CMS resulting from a demonstration project authorizing reimbursements to full-continuum CRFs with an integrated medical and community-based service provider, admitting mental health patients where it is psychiatrically determined that a patient requires more than one night of hospitalization.

Charitable Assistance.—The Committee remains concerned with the promulgation of rules restricting the utilization of charitable assistance to Medigap plans, marketplace plans, and other forms of coverage, as well as the implementation of associated barriers to care, most notably out-of-pocket accumulators. These restrictions are particularly harmful for patients with rare, chronic, and life-threatening conditions that have historically relied on charitable assistance as a necessary safety net to maintain access to life-sustaining therapies or care. CMS is encouraged to examine efforts to protect patient access to charitable assistance and rein-in coverage practices where they harmfully or arbitrarily obstruct the availability of charitable assistance for patients with critical circumstances and limited alternatives.

Chief Dental Officer.—The Committee is concerned that the Chief Dental Officer position at CMS has been vacant since October 2017. Without a dentist to oversee oral health issues in Medicare and Medicaid, this vacancy leaves a significant gap of clinical oral

health expertise within CMS. Medicaid provides oral health services to millions of children, pregnant women, and adults across the country. The Early Periodic Screening, Diagnosis and Treatment program requires dental services to be provided to beneficiaries eligible for the program. The Children's Health Insurance Program also requires dental services as part of the benefit package available to children. A licensed dentist clinician is an invaluable resource to these programs and the agency's strategy to expand access to oral health care. The Committee urges CMS to move forward with filling this vacancy.

Diabetic Retinal Exams.—The Committee recognizes that diabetic retinopathy remains a major national health challenge. According to the National Eye Institute within the National Institutes of Health, early detection and treatment of diabetic retinopathy can reduce the risk of blindness by 95 percent. The Committee encourages CMS to update its policy to promote earlier diagnosis by making diabetic retinal exams more accessible to diabetic patients in primary care settings, through the use of digital retinal imaging with remote specialist interpretation.

Clinical Laboratory Fee Schedule.—The Committee is pleased that CMS developed and issued a panel pricing policy that ensures the agency is not paying more for a single clinical diagnostic laboratory test, or a group of individual clinical diagnostic tests, than it would for a clinical diagnostic laboratory testing panel that tests for the same analytic(s). This new policy was effective January 1, 2019, and the Committee requests that the agency submit a report no later than 90 days after enactment of this Act to the Committees on Appropriations, as well as the authorizing Committees of jurisdiction, on the status of the implementation of this new policy and the cost savings to the Medicare program.

Community Participatory Health Dashboard.—The Committee encourages CMS and CDC to devise a strategy on how to construct a decision-support tool that includes Geographic Information System epidemiologic data paired with Medicaid and other health program claims data that can contribute to community-participatory health prevention efforts. The strategy could guide HHS agencies to collaborate to construct a dashboard for community use to evaluate rates of disease and the associated costs.

Depression and Precision Medicine.—The Committee recognizes that millions of Medicare beneficiaries are living with depression and primary care physicians often treat these patients, prescribing a significant share of prescription drugs for depression. The Committee is concerned that current Medicare policies may interfere with the ability of primary care physicians to have access to precision medicine tests to guide the selection of drugs for depression. The Committee encourages CMS to review and update existing local coverage policies for genetic testing for depression to ensure Medicare beneficiaries have coverage for these tests when seen by their primary care physician.

Dialysis-Related Amyloidosis.—The Committee is concerned that patients suffering from Dialysis-Related Amyloidosis may not have access to FDA-approved treatments, including apheresis treatments administered in the dialysis facility. The Committee is particularly concerned that CMS has not acted in a timely manner in assigning an appropriate Medicare benefit category for such apheresis treat-

ments, following FDA approval in 2015. The Committee urges CMS to complete its benefit category analysis and issue a determination as soon as possible. The Committee directs CMS, in conjunction with FDA, to report to the Committee within 90 days of enactment of this act, on the status of CMS's benefit category analysis and expected timeline for determination.

Drug Pricing Report.—The Committee directs the Secretary of Health and Human Services to submit a report to the Committees on Appropriations not later than 120 days after the date of enactment of this Act regarding price changes of prescription drugs since 2008. The report should include comparative prescription drug prices (net of rebates) paid by the following programs for the 10 most frequently prescribed drugs and the 10 highest-cost drugs for each of the following: (1) The Medicare program under part B of title XVIII of the Social Security Act; (2) The Medicare prescription drug program under part D of title XVIII of the Social Security Act; (3) The Medicaid program under title XIX of the Social Security Act; and (4) The Department of Veterans Affairs. The report should also provide a breakdown of the comparative prices (net of rebates) for each of the 10 most frequently prescribed drugs and the 10 highest-cost drugs between ambulatory settings and retail settings. In addition, the report should include total annual costs due to prescription drugs to the Medicare program under part B of title XVIII of the Social Security Act, the Medicare prescription drug program under part D of title XVIII of such Act, and the Medicaid program under title XIX of such Act. Finally, the report should list the drugs that have been registered for sale by the Food and Drug Administration (FDA) in the past five years that have benefited significantly from government grants or research subsidies in either the pre-clinical or clinical stages of development, as well as the price (net of rebates) and total spending in Medicare and Medicaid for each of those drugs.

Duchenne/Becker ICD10 Code.—The Committee is aware of the addition of the new ICD10 code for Duchenne/Becker to the CMS FY 2019 Coding Addenda. The Committee requests an update in the FY 2021 Congressional Justification regarding the rates of utilization for the newly established ICD10 code.

Extravasations.—The Committee is aware of evidence demonstrating the prevalence of extravasations in nuclear medicine procedures. Extravasations of diagnostic radiopharmaceuticals negatively affect the sensitivity and quantification of nuclear medicine scans. Extravasations can affect disease staging and treatment assessment, result in unnecessary invasive procedures and additional radiation exposure, and lead to higher costs for patients and payers. The Committee encourages CMS to consider adding required monitoring of injection quality and submission of reportable extravasations to the Nuclear Regulatory Commission to its conditions of participation for nuclear medicine services. The Committee requests an update on this issue in the fiscal year 2021 Congressional Budget Justification.

Geographic Practice Cost Index.—The Committee encourages CMS to create a more transparent process for the development of Geographic Practice Cost Index so that the various inputs can be better understood.

Home Visiting Programs.—The Committee recognizes the wide range of improved outcomes and cost-savings that evidence-based home visiting programs provide to first-time at-risk mothers and their children. However, the Committee is concerned that the lack of clarity on how to use Medicaid dollars alongside other funding sources has slowed or stopped state action to effectively leverage Medicaid to support home visiting services. The Committee directs the Centers for Medicaid and CHIP Services (CMCS) to build on its 2016 Joint Informational Bulletin on this topic to clarify how Medicaid dollars can be blended and braided appropriately to reach eligible families, and also provide streamlined coverage options for home visiting. In addition, once CMCS has finalized its November 2018 Medicaid Managed Care rule, the Committee directs CMCS to update its November 2017 Informational Bulletin on Delivery System and Provider Payment Initiatives under Medicaid Managed Care Contracts to explain how states can use the revised managed care authority to fund evidence-based home visiting programs.

Hospital Outpatient Prospective Payment.—The Committee is concerned about the rule entitled "Medicare Program: Changes to Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs" (83 Fed. Reg. 58818, November 21, 2018) and urges CMS to reconsider this rule after taking into account harmful effects to hospitals that are designated as a Sole Community Hospital, or that are located in a HRSA-designated Health Professional Shortage Area (HPSA). The Committee requests a report within 180 days of enactment of this Act detailing the financial impacts of this rule on these two categories of hospitals and the impact of the rule on the health provider workforce within HRSA-designated HPSAs.

Limited Wraparound Coverage.—The Committee strongly urges CMS to extend the pilot program established by a final regulation published on March 18, 2015, to allow limited wraparound benefits, or supplements, to individual health insurance coverage (or Basic Health Plan coverage). Wraparound coverage is a specialized offering targeted to help part-time workers and retirees whose employers or former employers meet standards of responsibility and have agreed to provide this supplemental coverage as an option. The Committee recommends this pilot program be made permanent.

Liquid Oxygen.—The Committee urges the Secretary to monitor the supplemental liquid oxygen market to evaluate the impact that policy has on oxygen patients and suppliers and to ensure appropriate patient access to all modalities of supplemental oxygen, particularly in the gap years of competitive bidding, and address any market access problems as identified.

Malnutrition.—Malnutrition in older adults remains a serious health problem in the United States. One in two older adults is either malnourished, or at risk of becoming malnourished. In addition to the impact on quality of life for seniors, malnutrition imposes significant burdens on the U.S. health care system. The annual cost of disease-associated malnutrition in older Americans is more than $50 billion. And yet, CMS has declined to include malnutrition quality measurements in the Hospital Inpatient Quality Reporting Program. The Committee is concerned that, by failing to include such measures, the U.S. health care system is not taking advantage of the clinical and financial benefits of quality malnutri-

tion care. The Committee strongly urges CMS to include malnutrition quality measurements in the Hospital Inpatient Quality Reporting Program.

Medicaid Dental Audits.—The Committee is concerned that failure to use professional guidelines or established state Medicaid manual parameters in the auditing process can result in inaccurate and unreasonable Medicaid dental audits. These practices deter providers from participation in the program and negatively affect care to patients. The Committee therefore directs CMS to instruct contracted auditors to utilize dental profession clinical guidelines, best practices, and policies of the American Academy of Pediatric Dentistry and American Dental Association when conducting dental audits, and require independent peer-to-peer review. The Committee directs CMS to report back to the Committee within 90 days of enactment of this Act on steps taken to address these auditing concerns.

Medicare Promotion.—The Committee directs CMS to avoid taking any action that actively promotes one form of Medicare coverage over another, particularly with respect to the choice between traditional Medicare and Medicare Advantage (MA). The Committee further directs CMS to design and maintain its online coverage options tool in a manner that provides complete and unbiased information, particularly as CMS works to replace the Medicare Plan Finder with the new Medicare Coverage Tools platform. Furthermore, CMS should remain objective and neutral in its education and outreach materials concerning options that beneficiaries have during the open enrollment period and at any other time.

Medicare Simulation.—The Committee supports efforts by CMS to perform data simulations on the potential impact of more comprehensive payment incentives for efficiency and quality in the Medicare program. This Medicare simulation could test consolidation of Medicare's readmissions, complications, and value-based purchasing programs into one value-based payment program that is focused on a larger set of avoidable outcomes and uses clinically credible categorical risk-adjustment for comparing performance. Such a simulation would increase transparency and give CMS and Congress guidance about how to improve care and reduce health care costs within the programs.

Medicare Reimbursement in Noncontiguous States and Territories.—The Committee requests the Government Accountability Office conduct an audit to examine Medicare funding for noncontiguous U.S. States and the territories. This report would review the Medicare reimbursement rate formula for noncontagious states and block grant funding level for the territories compared to the expenses in these locations and the funding provided to states in the Continental United States.

Mental Health Parity.—The Mental Health Parity and Addiction Equity Act (MHPAEA) was enacted more than 10 years ago to prevent group health plans and health insurance providers that provide mental health or substance use disorder benefits from imposing less favorable benefit limitations on qualifying mental health benefits than on medical or surgical benefits. The Committee is aware of instances where insurers, covered health care plans and managed care organizations (MCO), including MCOs that manage state Medicaid programs, may be imposing conditions for access to

treatment for mental health services, including services for Down syndrome and autism spectrum disorder, that are not imposed on medical or surgical benefits. These limitations may include parent or caregiver participation requirements, preauthorization processes, location of services exclusions, and fail-first policies. The Committee directs CMS to ensure compliance with MHPAEA by regularly issuing guidance to insurers, covered healthcare plans, and MCOs, that outlines how compliance with MHPAEA is to be achieved. This guidance should include recommendations for appropriate training of personnel responsible for benefit authorizations, adverse benefit determinations, and payments. These agencies should ensure that such informational bulletins also provide appropriate consumer and complaint information that helps patients take action when they encounter MHPAEA violations.

National Health Expenditure (NHE) Database.—The Committee is concerned about discrepancies between official CMS estimates and industry surveys suggesting that CMS understates the growth of private health insurance and total health spending at the household level. If private health spending is under reported in NHE, estimates of total health U.S. spending may be too low as well. The Committee requests that CMS include information in its FY 2021 budget justification explaining its methodology for including data in the National Health Expenditure database, as well as an analysis of how CMS-published data compares to other comparable information on health expenditures.

New Medical Residency Training Programs.—Given the growing physician workforce shortage, the Committee strongly encourages CMS to utilize its discretion to extend the time period described in section 413.79(e) of title 42, Code of Federal Regulations, for new residency programs in areas facing physician shortages before a full-time equivalent resident cap is applied, as authorized in P.L. 105–33. Moreover, the Committee recommends that the agency meet with physician, hospital, and other industry stakeholders from underserved areas to better understand changes in population health. The agency shall provide an update to the Committees on Appropriations on these efforts within 90 days of enactment of this Act.

Nonemergency Medical Transportation.—The Committee is concerned about the impact of the administration's policy to permit state Medicaid programs to drop Nonemergency Medical Transportation (NEMT) coverage. The committee directs CMS to commission a study by the National Academy of Medicine to examine the impact on Medicaid beneficiaries of the potential elimination of NEMT from state Medicaid programs, including impacts to beneficiaries with chronic diseases including End Stage Renal Disease, substance abuse disorders, pregnant mothers, and patients living in remote areas. The Committee strongly urges CMS to delay implementation of any changes to NEMT benefits until the study has been submitted to the Congress.

Non-Opioid Pain Management.—The Committee believes that providing affordable non-opioid pain management to patients covered by Medicare and Medicaid is critical to combating drug addiction and the opioid crisis. Opioids may be inadvertently incentivized over alternative pain management treatments through CMS packages which provide hospitals with the same payment re-

gardless of whether the additional cost of a non-opioid postsurgical pain management treatment is incurred.

Nurse Practitioner/Physician Assistants.—The Committee is aware of the clinical training site shortage for Nurse Practitioner/Physician Assistant (NP/PA) students, and recognizes that re-performing student documentation is a significant administrative burden for teaching clinicians. Therefore, as CMS continues to eliminate paperwork burdens for clinicians, the Committee encourages the Secretary to authorize all teaching clinicians to verify, rather than re-document, notes provided by NP/PA students during the provision of evaluation and management services, in order to ensure that this paperwork burden is eliminated.

Nurse Staffing Requirements.—The Committee recognizes the link between appropriate nurse staffing levels and improved patient safety and outcomes. As part of its oversight function, CMS is charged with ensuring that Medicare-participating hospitals meet important patient safety standards, including meeting appropriate nurse staffing requirements. The Committee requests that CMS provide, in its fiscal year 2021 Congressional Justification, information relating to its criteria for evaluating appropriate nurse staffing.

Nursing Home Safety.—The Committee is concerned about the findings of the HHS Office of Inspector General (OIG) report entitled, "CMS Guidance to State Survey Agencies on Verifying Correction of Deficiencies Needs to be Improved to Help Ensure the Health and Safety of Nursing Home Residents." The Committee requests a report within 60 days of enactment of this Act on the actions that CMS has taken to implement the OIG's recommendations. In addition, the report should include an assessment of whether the CMS Special Focus Facility Initiative has substantially improved the quality of care at underperforming nursing facilities and what, if any, improvements to the initiative need to be made.

Orphan Drugs.—The Committee understands that 1 in 10 Americans is impacted by a rare disease and that the Orphan Drug Act incentivizes the discovery of diagnostics and treatments that confirm prognosis, prolong life, and realize health system savings. Despite progress, however, treatments exist for only 5 percent of rare diseases. Scientific advancement is discovering the next generation of biologic and gene therapy medicines that have the potential to both modify disease progression and revolutionize the treatment of fatal and debilitating rare diseases. To realize these potentials, the Committee urges CMS to support access to biologic and gene therapies, including potential testing of health insurance benefit designs that eliminate specialty tiers.

Out-of-State Cases.—The Committee recognizes that children, particularly those with highly complex conditions and healthcare needs, often require healthcare services outside of their home states and that the process of screening and enrolling out-of-state providers in Medicaid programs can delay a child's access to care. The Committee applauds CMS for recognizing these challenges, particularly by including plans for a pilot to screen Medicaid providers on behalf of states in its most recent Medicaid Program Integrity Strategy. The Committee urges the agency to advance this pilot.

Pneumococcal Vaccine.—The Committee is concerned about the underutilization of pneumococcal vaccinations for adults, including high-risk adults where vaccination rates do not exceed 20 percent, and strongly urges CMS to work toward achievement of the Healthy People 2020 goals to reduce invasive pneumococcal infections and increase the percentage of adults (age 65 or older) who are vaccinated against pneumococcal disease. The Committee encourages CMS to support development and implementation of electronic health records and other technologies, such as reminder recall programs, to identify Medicare beneficiaries who have not received the full course of pneumococcal vaccinations and remind those beneficiaries and their providers to adhere to the recommendations.

Preliminary Determinations.—As the Committee has reported, CMS previously granted "preliminary determinations" to hospitals to be designated as a Critical Access Hospitals (CAH). Following CMS guidance, these facilities made preparations to receive a final CAH designation, including paying for expensive upgrades and an on-site survey. Subsequently, CMS revised its guidance for attaining CAH designation. Due to the length of time required to comply with the requirements included in the preliminary determination, facilities that were deemed in compliance by CMS proceeded to comply with CMS guidance, but were then subsequently denied final CAH status due to the change in CMS policy regarding CAH designation. The Committee remains concerned about the financial and operational sustainability of these hospitals, which acted in good faith but may have been put in a difficult situation by revisions to Federal policy. The Committee supports efforts by HHS to help identify funding opportunities for these affected facilities, provided that the facilities meet all other requirements for any such funding opportunities.

Prior Authorization.—The Committee is aware that Medicare Advantage (MA) plans have increased the use of prior authorization (PA), which requires physicians and other health care providers to obtain advance approval from the plan before services can be delivered to patients. While PA is a valid utilization review tool to ensure appropriate care, health care provider experience and research studies demonstrate that inappropriate use of PA causes significant patient care delays, administrative costs and workflow disruptions. The Committee directs CMS to improve Medicare beneficiary timely access to care, increase transparency, and reduce the burdens on patients and providers by providing guidance to MA plans on their use of PA. Specifically, CMS should require MA plans to selectively apply PA requirements, excluding from PA those services that align with evidence-based guidelines and have historically high PA approval rates. In addition, CMS should increase transparency by requiring MA plans to report annually to the Secretary a list of items and services that are subject to PA, the percentage of PA requests approved, and the average time for approval. Finally, the Committee encourages CMS to work with stakeholders to increase the use of electronic prior authorization.

Protected Classes.—The Committee is concerned by the recent proposed rule, "Modernizing Part D and Medicare Advantage to Lower Drug Prices and Reduce Out-of-Pocket Expenses." Shortly after Congress enacted the Medicare Part D program, CMS re-

quired all Part D plans to have adequate coverage for six therapeutic categories of drugs, known as protected classes, to ensure patients have timely access to critical therapies combating HIV, cancer, mental health conditions, and other serious illnesses. The provisions of this proposed rule would allow increased use of prior authorizations and step therapy requirements and potentially delay access to these therapies.

Rural Health Care Access.—In order to address regional disparities in health care access and quality, when developing regulations, the Committee supports efforts by CMS to take into account factors that could negatively impact the ability of hospitals to provide care for rural communities. The Committee is particularly concerned about areas with low population density, low household income, or high rates of rural hospital closure.

Sepsis.— The Committee is concerned that sepsis and antibiotic resistant bacteria continue to be leading public health threats that are responsible for a significant number of deaths, as well as rising costs within the healthcare system. According to the most recent data, the national average compliance rate for CMS's sepsis treatment measure, known as SEP–1, is only 49 percent. The Committee urges CMS to issue a Request for Information to gather views on proposals to modernize and optimize CMS's current SEP–1 measure. The Committee requests an update on these activities in the fiscal year 2021 Congressional Budget Justification.

Social Determinants of Health.—The Committee is aware that social determinants of health are critical drivers of health outcomes and health care costs and that early childhood development is affected by social factors. The Committee encourages CMS to clarify and disseminate the strategies that states can implement under current Medicaid and CHIP authority, or through waivers, to address social determinants of health in the provision of health care, including strategies specifically targeting the pediatric population. This should include guidance on how states can encourage and incentivize managed care organizations to address social determinants of health through contracts.

Standardized Assessment-Based Data.—The Committee is aware that CMS has recently developed standardized assessment-based data that is designed specifically for adult Medicare beneficiaries and does not address the needs of an individual under the age of twenty-one, especially a child with complex medical needs that may also include an intellectual or developmental disability. The Committee recommends that CMS work with relevant partners to develop, test, and implement appropriate assessment tools and quality indicators for children currently served in pediatric post-acute and long-term healthcare facilities.

Sexually Transmitted Infection (STI) Screening.—The Committee continues to be concerned about high rates of STIs, especially in pregnant women and young adults. To help curb the spread of these diseases and address this public health problem, and to reach at-risk and vulnerable populations at every opportunity, the Committee directs CMS to collaborate with the CDC's Division of STD Prevention to develop a screening and treatment initiative under its Medicaid Program. The Committee also notes that some states are limiting reimbursement for STI testing to only once a year. This is counter to CDC guidelines which recommend testing at

three-to-six month intervals for certain individuals. The Committee urges CMS to encourage states to comply with CDC screening guidelines.

Virtual Health Care.—The Committee recognizes the potential for virtual health care to help meet the needs of patients and families across the country, especially in rural areas. The Committee is aware that the lack of consistency related to billing and coding for such services across Medicaid programs can result in challenges and inefficiencies related to payment for and data analysis of virtual care services. To address this issue, the Committee encourages CMS to issue guidance outlining a recommended but voluntary set of billing codes, modifiers, or place of service designations for use in state Medicaid programs.

State Survey and Certification

The Committee provides $407,334,000 for State Survey and Certification activities, which is $10,000,000 more than the fiscal year 2019 enacted level and $34,858,000 less than the fiscal year 2020 budget request. State Survey and Certification supports certifications of Medicare and Medicaid certified health care facilities to ensure that beneficiaries receive care at facilities that meet health, safety, and quality standards required by CMS.

Survey Frequency Rates.—The Committee is concerned that flat funding for several consecutive years has reduced the frequency of statutorily-mandated surveys of health care facilities. The Committee provides an increase of $10,000,000 to improve survey frequency rates for nursing homes, home health agencies, and hospice facilities, as well as increase quality oversight for facility types without statutorily-mandated survey frequency standards.

Federal Administration

The Committee provides $732,533,000 for Federal Administration activities related to the Medicare and Medicaid programs, which is the same as the fiscal year 2019 enacted level and $15,000,000 below the fiscal year 2020 budget request. The Federal Administration funding supports CMS staff, along with operating and administrative expenses for information technology, communication, utilities, rent and space requirements, as well as administrative contracts.

Quality Improvement Organizations.—The Committee does not include funding requested by the Administration to shift personnel costs to the Federal Administration account that have previously been funded by a mandatory appropriation.

HEALTH CARE FRAUD AND ABUSE CONTROL ACCOUNT

Appropriation, fiscal year 2019	$765,000,000
Budget request, fiscal year 2020	792,000,000
Committee Recommendation	786,000,000
Change from enacted level	+21,000,000
Change from budget request	−6,000,000

This includes a base amount of $311,000,000 and an additional $475,000,000 through a discretionary budget cap adjustment authorized under section 251(b) of the Balanced Budget and Emergency Deficit Control Act of 1985. The Health Care Fraud and Abuse Control Account (HCFAC) funds support activities conducted

by CMS, the HHS Office of Inspector General, and the Department of Justice. This level is $21,000,000 above the fiscal year 2019 enacted level and $6,000,000 below the fiscal year 2020 budget request.

This funding is in addition to other mandatory funding provided through authorizing legislation. The funding will provide resources to continue efforts for Medicaid program integrity activities, for safeguarding the Medicare prescription drug benefit and the Medicare Advantage program, and for program integrity efforts related to these programs carried out by the Department of Justice.

The Committee revises bill language to enable the Secretary to fund the Senior Medicare Patrol Program administered by the Administration for Community Living from either discretionary or mandatory funds provided to this account.

The Committee expects all recipients of funds from the Health Care Fraud and Abuse Control Account, the Centers for Medicare & Medicaid Services, the Department of Health and Human Services Office of Inspector General, and the Department of Justice, to use funds for efforts to address fraud and abuse as described in section 1128C of the Social Security Act.

Medicaid Program Integrity.—The Committee supports efforts by CMS to develop a Medicaid Program Integrity Strategy. The Committee encourage States to utilize all available tools to increase transparency and oversight, ensure compliance with Federal rules, and reduce improper payments.

ADMINISTRATION FOR CHILDREN AND FAMILIES

PAYMENTS TO STATES FOR CHILD SUPPORT ENFORCEMENT AND FAMILY SUPPORT PROGRAMS

Appropriation, fiscal year 2019	$2,922,247,000
Budget request, fiscal year 2020	2,890,000,000
Committee Recommendation	2,890,000,000
Change from enacted level	−32,247,000
Change from budget request	− − −

The Payments to States for Child Support Enforcement and Family Support Programs support State-administered programs of financial assistance and services for low-income families to promote their economic security and self-sufficiency.

The Committee also recommends $1,400,000,000 in advance funding, as requested, for the first quarter of fiscal year 2021 to ensure timely payments for Child Support Enforcement programs.

LOW INCOME HOME ENERGY ASSISTANCE

Appropriation, fiscal year 2019	$3,690,304,000
Budget request, fiscal year 2020	− − −
Committee Recommendation	3,840,304,000
Change from enacted level	+150,000,000
Change from budget request	+3,840,304,000

The Low Income Home Energy Assistance Program (LIHEAP) supports eligible families and households through programs providing assistance with energy costs.

The Committee recommends $3,840,304,000 for the Low Income Home Energy Assistance program, $150,000,000 above the fiscal year 2019 enacted level and $3,840,304,000 above the fiscal year 2020 budget request. The Committee strongly opposes the Adminis-

tration's proposal to eliminate this important program that serves almost six million low-income households each year.

Hold Harmless.—The Committee is concerned that as a result of yearly formula variances, some States received a reduction in funding in fiscal year 2019 despite a $50,000,000 increase in the overall account. To correct this and hold States, territories, and Tribes (funded through the States) harmless from reductions when overall funding in the account is increased in a given fiscal year, the bill includes language to restore funding to States and territories at fiscal year 2018 levels, and then distribute the additional $200,000,000 recommended in this bill (over the fiscal year 2018 enacted level) to States and territories in proportions similar to previous fiscal years.

Weatherization.—The Committee recognizes that some States use waivers to provide weatherization funding above LIHEAP's current cap. The Committee is interested in how many of these waivers have allowed States to implement health, safety and other innovative practices, through LIHEAP's weatherization program and the related weatherization program at the Department of Energy. The Committee directs the agency to provide a report within 120 days of enactment of this Act describing the types of allowable weatherization activities and to what extent LIHEAP grantees are using DOE rules for their LIHEAP-funded weatherization work, as reported by State LIHEAP grantees on their most current LIHEAP Plan submitted to the Administration for Children and Families (ACF).

REFUGEE AND ENTRANT ASSISTANCE

Appropriation, fiscal year 2019	$1,905,201,000
Budget request, fiscal year 2020	1,804,066,000
Committee Recommendation	2,411,701,000
Change from enacted level	+506,500,000
Change from budget request	+607,635,000

The Office of Refugee Resettlement (ORR) programs are designed to help refugees, asylees, Cuban and Haitian entrants, and trafficking victims become employed and self-sufficient. These programs also provide for care of unaccompanied alien children in Federal custody and victims of torture.

Funding for several of the programs within this account is highly dependent on estimates and as such, it is critical that ORR communicate changes to estimated numbers of arrivals and costs as they become available. The Committee directs ORR to provide monthly updates of arrivals each month by category, including refugees, asylees, Cuban and Haitian entrants, Special Immigrant Visas, and unaccompanied alien children, to include any updates in estimated funding needs as a result of changes in trends in those categories.

Within the total, the Committee includes the following:

Budget Activity	FY 2020 Committee
Transitional and Medical Services	$354,000,000
Victims of Trafficking	28,255,000
Refugee Support Services	207,201,000
Unaccompanied Children	1,803,245,000
Victims of Torture	19,000,000

Transitional and Medical Services

The Committee includes $354,000,000, which is equal to the fiscal year 2019 enacted level and $35,000,000 above the fiscal year 2020 budget request. The Transitional and Medical Services program provides grants to States and nonprofit organizations to provide refugees and other eligible populations with up to eight months of cash and medical assistance. The Committee includes sufficient funding to provide the full eight months of assistance for all qualified arrivals estimated in fiscal year 2020.

Victims of Trafficking

National Human Trafficking Hotline.—The recommendation includes an additional $1,500,000 to fund the National Human Trafficking Hotline at its authorized funding level of $3,500,000. The Committee expects ACF to include in its fiscal year 2021 Congressional Budget Justification a line item noting enacted and requested funding levels for the Hotline.

Refugee Support Services

The recommendation includes $207,201,000, which is equal to the fiscal year 2019 enacted level and $56,380,000 above the fiscal year 2020 budget request. The Refugee Support Services program provides formula and competitive grants to States and nonprofit organizations to address barriers to employment and help refugees become self-sufficient.

Unaccompanied Children

The recommendation includes $1,803,245,000 for the Unaccompanied Alien Children (UAC) Program, which is $500,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The Committee provides this additional funding with legal restrictions on the use of funds, to ensure the UAC program fulfills its statutory mission to care for children in ORR's custody and to place them with sponsors as expeditiously as possible. To address the Committee's significant concerns with how the program is currently operating, while acknowledging the tremendous needs of the children referred to ORR's care, the Committee includes increased funding contingent on the conditions included in bill language and in the directives included in this report.

The Committee directs ORR to prioritize funding for expanded use of community-based residential care placements (including long-term and transitional foster care and small group homes) and shelter care other than large-scale institutional shelter facilities. The bill includes language requiring the Secretary of HHS to submit a spend plan for all funds provided in the Refugee and Entrant Assistance account and to submit an updated plan every 60 days. The Committee expects the spend plan to reflect spending levels included in this report (including legal services, child advocates, and post-release services as directed below) and to demonstrate the steps ORR is taking to increase permanent bed capacity so that continued reliance on influx facilities will not be necessary.

The Committee includes an increase of not less than $30,000,000 above the funding available in fiscal year 2019 to provide qualified and independent legal services for unaccompanied children, including but not limited to know-your-rights orientations, legal

screenings, court preparation and assistance, representation, and pro bono referrals. The Committee notes that legal counsel for unaccompanied children increases the efficiency and effectiveness of immigration proceedings and significantly reduces the failure-to-appear rate of children who are released from HHS custody. The recommended increase would allow for the resumption of services to children released from ORR custody and the extension of released-child representation to high-release communities that are not currently being served.

The recommendation includes not less than $10,000,000 for the Child Advocate program, which provides support for particularly vulnerable children, including victims of abuse or trafficking, children 12 or younger, and those who are expected to remain in ORR custody for prolonged periods of time. The Committee notes that Independent Child Advocates provide a vital resource to the most vulnerable unaccompanied and separated children in Federal custody by identifying and advocating for their best interests with Federal agencies including HHS, Department of Homeland Security (DHS) and the Department of Justice (DOJ). The Committee directs ORR to ensure the continued independence of the Child Advocate program from other contracted service providers to avoid any conflicts of interest.

The recommendation includes not less than $60,000,000 for home studies and increased social services following release (i.e., post-release services). ORR should arrange for such services to be provided by non-governmental organizations (NGOs) with experience and expertise in working with these children.

The Committee directs ORR to comply with the March 8, 2019 ruling of the *Ms. L.; et al., v. U.S. ICE; et al.* case, and to account for any children who were separated from their parents by DHS and referred to ORR on or after July 1, 2017. The Committee provides $4,000,000 for ORR to prioritize this work. Starting no later than 30 days after enactment of this Act, HHS is directed to provide monthly reports to the Committee on the progress of this effort.

Memorandum of Agreement.—The bill includes a proviso to prohibit any funding from being used to implement or enforce the Memorandum of Agreement (MOA) between ORR and DHS that provides for information sharing and permits ICE to detain and remove sponsors and other members of a household applying to sponsor a child. The MOA deters potential sponsors from approaching ORR, extending stays in custody—further traumatizing children, and exponentially increasing costs of the program. The Committee strongly believes that sponsors will come forward faster if the MOA is formally and publicly terminated, and directs the Secretary to rescind it immediately.

Influx Shelters.—The Committee believes the need for influx shelters in fiscal years 2018 and 2019 has been due largely to the Administration's misguided and willfully harmful policies toward unaccompanied children. The Committee strongly supports the medical, psychological, and child welfare advocacy communities in their compelling arguments against, and well-founded reasons to limit, the use of influx shelters. The Committee includes funding in the bill and directives in this report to support ORR efforts to phase out the use of influx shelters by increasing permanent bed

capacity. However, until this capacity is established, the Committee supports strong oversight of influx facilities and includes bill language prohibiting the use of soft-sided dormitories and limiting the use of influx shelters under a series of conditions designed to maximize child welfare and minimize additional trauma to children.

In addition, within 30 days of enactment of this Act, and monthly thereafter, the Committee directs ORR to submit a report for each influx shelter in operation. This report must include the total number of children in care at the facility and the demographic data of those children; the average length of time children at the influx shelter have been in care, both at the influx shelter and in ORR custody; the capacity and occupancy rates of the influx shelter; the expected length of time the influx facility will remain in operation; and the steps ORR is taking to increase permanent bed capacity so that continued reliance on the influx facility will not be necessary.

Ongoing Separations.—The Committee is alarmed by the Office of Inspector General's January 17, 2019 Report "Separated Children Placed in Office of Refugee Resettlement Care" (Report OEI–BL–18–00511), that finds that ORR is still receiving children separated from their parents by immigration officials. The bill includes a requirement that the Secretary update the Committee, and make publicly available online on a weekly basis, the number of children referred to ORR's care who have been designated by DHS, or subsequently by HHS case managers, as having been separated (under any circumstances) from the parent or legal guardian with whom they were in DHS custody. The Committee considers this information to be critical to oversight efforts to make sure that family separation does not occur again.

Prohibiting HHS from Facilitating ICE.—The bill includes a provision prohibiting funds from being used to facilitate DHS removing sponsors or potential sponsors of unaccompanied children based on information provided by ORR as part of the sponsor's application to accept custody of an unaccompanied child, except when that information meets specified criteria.

Congressional Oversight.—The Committee reiterates its position on the importance of Congressional oversight of facilities that house unaccompanied children. HHS was clearly mistaken when it denied entry to three Members of Congress attempting to enter the Homestead facility on April 8, 2019, despite the fiscal year 2019 enacted law that explicitly prohibits HHS from using funds to do so. The bill includes a modification of that general provision to ensure proper Congressional oversight of conditions at these facilities during normal business hours without any requirement to provide advance notice of arrival.

In-Kind Donations.—The bill continues to include a general provision to allow for in-kind donations from the private sector, nongovernmental organizations and other groups to support children in ORR's care.

Siblings in ORR Care.—The bill includes a general provision mandating, to the extent practicable, siblings be cared for in the same facility, or be placed with the same sponsor.

Communicating with Congress.—The Committee directs the Department to notify the Committees on Appropriations prior to mak-

ing any administrative or policy changes expected to impact the number of children in ORR custody; shelter operations; the placement of children with sponsors; or any post-release services.

Data Reporting.—The Committee encourages ORR to explore whether there are commercially available software solutions capable of enhancing data reporting.

Protection of DNA.—The Committee continues to prohibit any governmental agency or private entity from accessing, using, or storing any genetic material, data, or information collected in this reunification effort, including for the purpose of criminal or immigration enforcement. Any genetic material, data, or information obtained should be fully destroyed after testing and the probability of a genetic relationship is calculated. The entities conducting the DNA testing shall obtain the consent of any individual over age 18 prior to testing, and shall make every effort to obtain the consent of a guardian prior to testing on anyone under age 18. The Committee requests ORR continue to include in its fiscal year 2021 Congressional Budget Justification the steps it is taking to protect the privacy and genetic material and data of individuals who are being tested as part of reunification efforts.

Facility Oversight.—The Committee expects ORR to maintain strict oversight of all ORR-funded care provider facilities and correct violations of Federal, State or local codes related to the standards of childcare or the well-being of children. The Committee reiterates its direction, pursuant to House Report 115–862, that ORR, within 60 days of the enactment of this Act, submit a report to the Committee detailing the number and nature of facility violations, and the steps it is taking to work with grantees to address and prevent such infractions.

Age-Outs.—The Committee is concerned about reports that approximately two-thirds of unaccompanied children turning 18 years old while in the care and custody of ORR are transferred directly to the custody of Immigration and Customs Enforcement (ICE), often because of a lack of planning for alternative placements during the child's time in ORR care. The Committee directs ORR to develop a tangible post-18 plan for every 17-year-old unaccompanied child in ORR care at least two weeks in advance of his or her 18th birthday. Each post-18 plan should at a minimum identify an appropriate non-secure placement for the child and identify any necessary social support services for the child.

Victims of Torture

The Committee includes $19,000,000 for the Victims of Torture program, which is $5,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The program funds non-profit organizations providing healing and support services to refugees, asylees and asylum seekers, who need help overcoming the effects of torture.

PAYMENTS TO STATES FOR THE CHILD CARE AND DEVELOPMENT BLOCK GRANT

Appropriation, fiscal year 2019	$5,276,000,000
Budget request, fiscal year 2020	5,276,000,000
Committee Recommendation	7,676,000,000
Change from enacted level	+2,400,000,000
Change from budget request	+2,400,000,000

The Committee recommends $7,676,000,000 for the Child Care and Development Block Grant (CCDBG) program, which is $2,400,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The CCDBG provides funds according to a formula to States, territories, and Tribes to provide financial assistance to help low-income working families and families engaged in training or education activities access child care and to improve the quality of child care for all children.

The bill includes the largest funding increase ever provided for the Child Care and Development Block Grant. CCDBG reaches only 15 percent of the nearly 14 million children who are eligible to receive child care services. The Committee believes that significant additional investment is necessary to address large gaps in the number of eligible children served by the program. The increase included in this bill will provide CCDBG-funded child care to almost 300,000 additional eligible children, enable more low-income parents to work, allow States to expand eligibility for children and families, and raise payments to providers.

Diaper Need and Child Care.—The Committee recognizes that many low-income families spend twice as much on diapers for their children compared to families who have the means to buy diapers in bulk at low price. The Committee is deeply concerned that 1 in 3 families in the U.S. struggles to afford diapers, which leads to higher poverty and increased health risks for infants and toddlers. The Committee also notes that many child care centers, including ones under the Child Care and Development Block Grant, require parents to provide diapers for their children who attend. Therefore, the Committee requests HHS to submit a report, within 180 days of enactment of this Act, estimating the amount of diapers and diapering supplies that enrolled child care providers require for the population of children under the age of three who are served under the Child Care and Development Block Grant and the estimated cost of those diapers and diaper supplies.

SOCIAL SERVICES BLOCK GRANT

Appropriation, fiscal year 2019	$1,700,000,000
Budget request, fiscal year 2020	– – –
Committee Recommendation	1,700,000,000
Change from enacted level	– – –
Change from budget request	+1,700,000,000

The Social Services Block Grants provides grants to States by formula. States have the flexibility to determine what services and activities are supported, provided they are targeted at a broad set of goals, including reducing or eliminating poverty, achieving or maintaining self-sufficiency, and preventing neglect, abuse, or exploitation of children and adults.

CHILDREN AND FAMILIES SERVICES PROGRAMS

Appropriation, fiscal year 2019	$12,239,225,000
Budget request, fiscal year 2020	11,187,485,000
Committee Recommendation	13,947,468,000
Change from enacted level	+1,708,243,000
Change from budget request	+2,759,983,000

The Children and Families Services programs fund activities serving children, youth, families, the developmentally disabled, Na-

tive Americans, victims of child abuse and neglect and domestic violence, and other vulnerable populations.

The Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Programs for Children, Youth, and Families:	
Head Start	$11,563,095,000
Early Head Start-Child Care Partnerships	*1,330,000,000*
Preschool Development Grants	350,000,000
Runaway/Homeless Youth	125,280,000
Abuse of Runaway Youth Prevention	22,141,000
State Child Abuse Prevention	90,000,000
Discretionary Child Abuse Prevention	34,000,000
Community-Based Child Abuse Prevention	55,000,000
Child Welfare Services	268,735,000
Child Welfare Training	17,984,000
Adoption Opportunities	42,100,000
Adoption Incentives	75,000,000
Social Services/Income Maintenance Research	7,012,000
Native American Programs	60,000,000
Community Services:	
Community Services Block Grant	760,000,000
Community Economic Development	25,000,000
Rural Community Facilities	11,000,000
Domestic Violence Hotline	12,000,000
Family Violence/Battered Women's Shelters	175,000,000
Independent Living Training Vouchers	43,257,000
Disaster Human Services Case Management	1,864,000
Program Direction	209,000,000

Head Start

The Committee recommends $11,563,095,000 for the Head Start program, which is $1,500,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Head Start promotes school readiness of children under 5 from low-income families through education, health, social and other services.

Early Head Start-Child Care Partnerships.—The Committee recommends $1,330,000,000 for Early Head Start-Child Care Partnership (EHS–CCPs) and EHS Expansion, which is $525,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The EHS–CCP program brings together EHS and child care through layering of funding to provide comprehensive and continuous services to low-income infants, toddlers, and their families. The program enhances developmental services and supports for low-income infants and toddlers, and their families, by providing strong relationship-based experiences and preparing them for the transition into Head Start and preschool. The Committee understands the Office of Head Start (OHS) was only able to fund approximately 18 percent of applicants for this funding in fiscal year 2019, despite many highly-qualified grant applications. The Committee provides additional funding to support expansion of the EHS and EHS–CCPs to add over 80,000 more slots for eligible children.

Quality Improvement Funding for Trauma-Informed Care.—The Committee is aware of the rise of adverse childhood experiences (ACE) attributable to increased prevalence of substance misuse, economic hardship, home and community violence, and other traumatic experiences that can negatively impact child development and lead to disruptions in classroom environments. The Committee

recommends $750,000,000 be allocated within section 640(a)(5) of the Head Start Act for grantees to engage in activities that support children and families who have experienced trauma, such as increasing services from mental health professionals to provide expert care and counseling to families and the Head Start workforce; providing staff training on trauma-informed approaches to service delivery; and adding staff to Head Start classrooms. Funding should be made available for all grantees, with awards not less than $100,000 for smaller grantees, to ensure that quality improvement funding is awarded in amounts substantial enough to have a meaningful impact for children enrolled in these programs.

Tribal Colleges and Universities-Head Start Partnership Program.—The Committee directs $8,000,000 to the Head Start program to reestablish the Tribal Colleges and Universities (TCU)–Head Start Partnership Program. Only 39 percent of Indian Head Start teachers and assistants meet the national standard for qualified teachers, compared to almost 75 percent nationwide. Reinvesting in early childhood education at TCUs will help to address these disparities in the preparation of Head Start teachers in Indian Country.

Cost of Living Adjustment.—The Committee includes $217,000,000 for a cost of living adjustment.

Service Duration.—The Committee understands that the Head Start program standard finalized in Fall 2016 that required programs to provide 1,020 annual hours of planned class operations over the course of at least eight months per year was based on research showing that at-risk children benefit from longer exposure to enriching early learning programs. The Committee directed funding in previous fiscal years to help Head Start programs meet the extended duration requirement. The Committee continues to encourage extended duration, especially in communities with demonstrated family need, and requests a briefing from OHS not later than 30 days after the comment period on the NPRM has closed. In addition, the Committee requests OHS to include in future budget justifications the number of Head Start slots that offer 1,020 hours of service per year duration programs. It is the Committee's expectation that additional flexibility for providers that are not in a position to offer extended duration services at this time will not result in reductions to services to vulnerable children who would benefit from extended duration.

Migrant and Seasonal Head Start.—The Committee is concerned with recent Migrant and Seasonal Head Start (MSHS) enrollment declines and understands that the program may fluctuate due to reasons outside of OHS's control, however, the Committee directs OHS to be responsive to the needs of communities as demands change.

Further, the Committee supports OHS's restoration of MSHS program funding to terminated localities and the maintenance of student enrollment levels through increased consideration of all impoverished student populations subject to transient living conditions or unstable educational environments. In order to avoid recent issues with grantee fiscal irresponsibility, the Committee directs OHS to assess program service capacity based on the aggregate of individual applicants' regional partnerships, as opposed to a single organization's supposed ability to conduct an equivalent

nationwide program coordination. The Committee encourages OHS to partner with local academic institutions that have established regional networks of accredited resources. OHS shall submit a report to the Committee on these efforts within 60 days of enactment of this Act.

Preschool Development Grants

The Committee recommends $350,000,000 for Preschool Development Grants, which is $100,000,000 above the fiscal year 2019 enacted level and $350,000,000 above the fiscal year 2020 budget request. This program provides grants to States to build State and local capacity to provide early childhood care and education for children birth through five from low- and moderate-income families. The Committee understands 47 States and territories received planning grants in fiscal year 2018 to conduct needs assessments and gather data about the current early learning landscape in their States. The Committee notes that fiscal year 2019 funding may only allow about half of the States that received planning grants to receive implementation grants. The Committee includes additional funding in this bill to fund applications from the fiscal year 2019 competition that may not have received funding due to budget constraints.

Runaway and Homeless Youth

The Committee recommends $147,421,000 for the Runaway and Homeless Youth (RHY) program, which is $20,000,000 above the fiscal year 2019 enacted level and $28,300,000 above the fiscal year 2020 budget request. The Committee supports the ability of grantees to provide prevention services, such as counseling and case management, regardless of enrollment in residential services.

Homeless Management Information System.—RHY program grantees are required to report data in the RHY-Homeless Management Information System (HMIS), which is maintained by the Department of Housing and Urban Development and provides an array of data on programs for the homeless. The Committee strongly encourages ACF to continue providing technical assistance to support RHY programs through this transition to ensure accurate and timely reporting of data on outcomes for homeless children and youth.

State Child Abuse Prevention

The Committee recommends $90,000,000 for Child Abuse Prevention and Treatment Act (CAPTA) State Grants, which is $4,690,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Plans of Safe Care.—The Committee continues to emphasize the importance of Safe Care Plans and addressing the health and safety of the child, and any substance use disorder treatment for their caregivers. The Committee urges the Secretary to prioritize funding for States that have high rates of neonatal abstinence syndrome or are seeing an increase in neonatal abstinence syndrome rates, and that partner with community-based organizations to deliver services that are consistent with the Safe Care Plan for these newborns and their caregivers. The Committee also directs ACF to enhance their coordination with the States and continue working with those

States with high rates of neonatal abstinence syndrome and with States that are seeing an increase in new cases of neonatal abstinence syndrome. The Committee requests an update on the work of the Secretary and ACF to implement these new policies.

Child Abuse Discretionary Activities

Child Abuse Hotline.—The Committee includes an increase of $1,000,000 to support an additional year of the innovation grant to develop and research text- and online chat-based intervention and education services through a national child abuse hotline. The Committee is pleased that the recent initiation of the text line has increased the incidence of youth seeking assistance from Hotline counselors and looks forward to data regarding best practices for delivering services through text and chat platforms.

Community-Based Child Abuse Prevention

The Committee recommends $55,000,000 for Community-Based Child Abuse Prevention, which is $15,236,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These formula grants support community-based approaches to child abuse and neglect prevention.

Adoption Opportunities

The Committee recommends $42,100,000 for Adoption Opportunities, which is $3,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Social Services Research and Demonstration

The Committee recommends $7,012,000 for Social Services and Income Maintenance Research, which is $500,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Community Resource Centers.—The Committee directs the program to research how centralized community resource centers, which allow citizens to apply for several Federal social services in a single location, can reduce the burden on constituents and ensure the cost-effective allocation of Federal resources.

Veterans' Mediation.—The Committee encourages the program to research topics related to mediation strategies that reduce homelessness, unemployment, declining physical and mental health, and substance abuse among veterans and military families.

Native American Programs

The Committee recommends $60,000,000 for Native American Programs, which is $5,450,000 above the fiscal year 2019 enacted level and $7,950,000 above the fiscal year 2020 budget request. These programs assist Tribal and village governments and Native American institutions and organizations in their efforts to support and develop stable, diversified local economies. Tribes and nonprofit organizations use funds to develop and implement sustainable community-based social and economic programs and services to improve the well-being of Native people.

Within the total, the recommendation includes $14,000,000 for Native American language preservation activities. The Committee provides not less than $5,000,000 for language immersion programs as authorized by section 803C(b)(7)(A)–(C) of the Native American

Programs Act, as amended by the Esther Martinez Native American Language Preservation Act of 2006.

Community Services Programs

Community Services Block Grant.—The Committee recommends $760,000,000 for the Community Services Block Grant, which is $35,000,000 more than the fiscal year 2019 enacted level and $760,000,000 more than the fiscal year 2020 budget request. The Community Services Block Grant provides funds to alleviate the causes and conditions of poverty in communities.

Community Economic Development.—The Committee recommends $25,000,000 for Community Economic Development Grants, which is $5,117,000 above the fiscal year 2019 enacted level and $25,000,000 more than the fiscal year 2020 budget request. Community Economic Development is a grant program which funds Community Development Corporations seeking to address the economic needs of low-income individuals and families through the creation of sustainable business development and employment opportunities.

Rural Community Facilities Development.—The Committee recommends $11,000,000 for the Rural Community Facilities Development program, which is $2,000,000 above the fiscal year 2019 enacted level, and $11,000,000 above the fiscal year 2020 budget request. Rural Community Development is a grant program that works with regional and Tribal organizations to manage safe water systems in rural communities.

Domestic Violence Hotline

The Committee recommends $12,000,000 for the Domestic Violence Hotline, which is $1,750,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The Hotline provides 24-hour, toll-free and confidential services immediately connecting callers to local service providers. Additional funding is recommended to add capacity and reduce the number of calls, chats, and texts that go unanswered due to a lack of resources.

Family Violence Prevention and Battered Women's Shelters

The Committee recommends $175,000,000 for the Family Violence Prevention and Battered Women's Shelters programs, which is $10,500,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The Family Violence Prevention and Services Act programs provide funding to support the prevention of incidents of family violence, domestic violence, and dating violence, and provide the immediate shelter and supportive services for adult and youth victims (and their dependents).

Program Direction

The Committee recommends $209,000,000 for Program Direction, which is $4,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 request.

Status of Funds.—The Committee directs ACF to provide the quarterly status of balances report, as required in Section 524 of the bill, at the account and program level of detail displayed in the table at the end of this report.

PROMOTING SAFE AND STABLE FAMILIES

Appropriation, fiscal year 2019	$444,765,000
Budget request, fiscal year 2020	404,765,000
Committee Recommendation	424,765,000
Change from enacted level	−20,000,000
Change from budget request	+20,000,000

The Committee recommends $345,000,000 in mandatory funds and $79,765,000 in discretionary funds for the Promoting Safe and Stable Families program. This program enables each State to operate a coordinated program of family preservation services, community-based family support services, time-limited reunification services, and adoption promotion and support services. States receive funds based on their share of children in all States receiving food stamp benefits. The recommendation includes $20,000,000 to support Kinship Navigator programs. The Committee understands that the Clearinghouse of evidence-based programs is not yet fully established, so discretionary appropriations are provided for transition funding while Kinship Navigator programs eligible for IV–E reimbursement are being identified.

Family First Implementation.—The Committee is aware that P.L. 115–123 authorized States to receive the same Title IV–E Federal matching funds for maintenance costs for children who are living with a parent in a licensed family-based residential Substance Use Disorder (SUD) treatment facility as if the child were placed in out-of-home foster care, away from the parent. The Committee understands the goal of this funding is to enable the parent to continue or resume parenting and reduce the burden on the foster care system; therefore, the Committee urges ACF to work with States to ensure that this authority and funding is used to broaden access to family-based SUD treatment.

PAYMENTS FOR FOSTER CARE AND PERMANENCY

Appropriation, fiscal year 2019	$6,035,000,000
Budget request, fiscal year 2020	5,744,000,000
Committee Recommendation	5,744,000,000
Change from enacted level	−291,000,000
Change from budget request	−−−

The Committee also recommends an advance appropriation of $2,800,000,000 for the first quarter of fiscal year 2021 to ensure timely completion of first quarter grant awards.

Adoption and Foster Care Analysis and Reporting System (AFCARS) Data Elements.—The Committee is very disappointed that HHS chose to delay final enactment of regulations that collect critical child welfare data elements in order to remove LGBTQ identity data. Abandoning data collection on LGBTQ foster youth, parents, and guardians, is a clear sign that HHS is abdicating its statutory responsibilities to promote the well-being, safety, and permanency of LGBTQ foster youth by limiting the ability to track and improve these outcomes for LGBTQ foster youth, as well as to track recruitment of LGBTQ foster and adoptive parents in an effort to provide diverse family placements for diverse foster youth.

ADMINISTRATION FOR COMMUNITY LIVING

AGING AND DISABILITY SERVICES PROGRAMS

Appropriation, fiscal year 2019	$2,120,200,000
Budget request, fiscal year 2020	1,996,556,000
Committee Recommendation	2,294,343,000
Change from enacted level	+174,143,000
Change from budget request	+297,787,000

Created in 2012, the Administration for Community Living (ACL) brings together the efforts and achievements of the Administration on Aging, the Administration on Intellectual and Developmental Disabilities, and the HHS Office on Disability to serve as the Federal agency responsible for increasing access to community supports, while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.

The Committee continues to fund the Senior Medicare Patrol Program through the Health Care Fraud and Abuse Control Account.

Reorganization.—The Committee is disappointed that the Secretary notified the Committee of an intent to reorganize ACL less than 30 days after the President's budget was submitted to Congress. For the purposes of transparency with the public and in accordance with the spirit of an annual budget justification and review process, the Committee directs ACL to submit future reorganization proposals through Congressional Budget Justifications so that Congress may fully consider any reorganization in the context of the annual budget process and with input from stakeholders. The Committee strongly urges ACL to engage with stakeholders before it implements its current reorganization plan, and expects ACL to engage with union representatives as early as practicable to address any employee concerns.

Home and Community-Based Supportive Services

The Committee recommends $422,000,000 for Home and Community-Based Supportive Services, which is $36,926,000 over the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides formula grants to States and territories to fund a wide range of social services that enable seniors to remain independent in their homes for as long as possible.

Preventive Health Services

The Committee recommends $24,848,000 for Preventive Health Services, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program funds activities that help seniors remain healthy and avoid chronic diseases. While States have the flexibility to use funding provided through this program to fund Chronic Disease Self-Management Education (CDSME) and Falls Prevention programs, the Committee does not accept the proposal to consolidate these programs within Preventive Health Services.

Protection of Vulnerable Older Americans

The Committee recommends $23,658,000 for activities to protect vulnerable older Americans, which is $2,000,000 above the fiscal

year 2019 enacted level and $3,030,000 above the fiscal year 2020 budget request. These programs provide grants to States for protection of vulnerable older Americans through the Long-Term Care Ombudsman and Prevention of Elder Abuse and Neglect programs. The Committee recommends additional funding to expand the reach of the ombudsman program to assisted living facilities.

Family Caregiver Support Services

The Committee recommends $200,000,000 for the National Caregiver Support program, which is $18,814,000 above the fiscal year 2019 enacted level and $49,414,000 above the fiscal year 2020 budget request. This program offers a range of support services to family caregivers, including assistance in accessing services such as respite care, counseling, support groups, and caregiver training.

Native American Caregiver Support Services

The Committee recommends $12,056,000 for the Native American Caregiver Support program, which is $2,000,000 above the fiscal year 2019 enacted level and $4,500,000 above the fiscal year 2020 budget request. This program provides grants to Tribes for the support of American Indian, Alaskan Native, and Native Hawaiian families caring for older relatives with chronic illness or disabilities.

Congregate and Home-Delivered Nutrition Services

The Committee recommends a total of $1,000,000,000 for senior nutrition. The recommendation includes: $525,000,000 for Congregate Nutrition Services, which is $29,658,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request; $305,000,000 for Home-Delivered Meal Services, which is $53,658,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request; and $170,000,000 for the Nutrition Services Incentives program, which is $9,931,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These programs help older Americans remain healthy and independent in their communities by providing meals and related services in a variety of settings (including congregate facilities such as senior centers) and via home-delivery to older adults who are homebound due to illness, disability, or geographic isolation.

Native American Nutrition and Supportive Services

The Committee recommends $37,208,000 for Native American Nutrition and Supportive Services, which is $3,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides grants to Tribes to promote the delivery of nutrition and home and community-based supportive services to Native American, Alaskan Native, and Native Hawaiian elders.

Aging Network Support Activities

The Committee recommends $12,461,000 for Aging Network Support Activities, which is $5,000,000 below the fiscal year 2019 enacted level and $958,000 above the fiscal year 2020 budget request. This program supports activities that expand public understanding of aging and the aging process.

Holocaust Survivor's Assistance.—The Committee continues to provide not less than $5,000,000 for the Holocaust Survivor's Assistance program. This program provides supportive services for aging Holocaust survivors living in the U.S.

Alzheimer's Disease Program

The Committee recommends $27,500,000 for the Alzheimer's disease program, which is $4,000,000 above the 2019 enacted program level and $8,010,000 above the fiscal year 2020 budget request. This program provides competitive matching grants to a limited number of States to encourage program innovation and coordination of public and private services for people with Alzheimer's disease and their families.

Additionally, the Committee recognizes the complexity of care required by persons with advanced dementia and the tremendous value of caregivers and of unpaid respite care. The Committee provides an increase of $4,000,000 for the Alzheimer's disease program to issue grants to demonstrate the benefits of providing direct respite care services to caregivers supporting individuals living with Alzheimer's Disease and Related Dementias (ADRD).

Respite Care

The Committee recommends $5,500,000 for Respite Care, which is $1,390,000 above the fiscal year 2019 enacted level and $2,140,000 above the fiscal year 2020 budget request. The program focuses on easing the burdens of caregiving by providing grants to eligible State organizations to improve the quality of, and access to, respite care for family caregivers. The Committee notes that funding increases included in the Family Caregivers Support Services and Alzheimer's Disease programs will provide States with additional funding available for respite care direct services.

Falls Prevention

The Committee recommends $5,000,000 to be transferred from the PPH Fund to ACL for the Falls Prevention program, which is the same as the fiscal year 2019 enacted level and $5,000,000 above the fiscal year 2020 budget request. Falls prevention grants support the promotion and dissemination of prevention tools delivered in community settings.

Chronic Disease Self-Management Program

The Committee recommends $8,000,000 to be transferred from the PPH Fund to ACL for the Chronic Disease Self-Management program, which is the same as the fiscal year 2019 enacted level and $8,000,000 above the fiscal year 2020 budget request. This program supports grants to States for low-cost, evidence-based prevention models that use state-of-the-art techniques to help those with chronic conditions address issues related to the management of their disease.

Elder Rights Support Activities

The Committee recommends $20,874,000 for Elder Rights Support Activities, which is $5,000,000 above the fiscal year 2019 enacted level and $7,000,000 above the fiscal year 2020 budget request. This program supports efforts that provide information,

training, and technical assistance to legal and aging services organizations working to prevent and detect elder abuse and neglect.

The Committee supports ACL's efforts to develop a National Adult Maltreatment Reporting System and provides an increase of $3,000,000 to enhance the data system and assist States making system modifications to access it. An additional $2,000,000 is provided for additional screening for elder abuse, neglect, and exploitation. The Committee recognizes that the opioid crisis is affecting Adult Protective Services, especially with respect to clients who have been victimized by those using opioids and believes this work can be part of the increased screening effort. This should not come at the expense of existing Elder Rights Support activities.

Aging and Disability Resource Centers

The Committee recommends $8,119,000 for Aging and Disability Resource Centers, which is the same as the fiscal year 2019 enacted level and $2,000,000 above the fiscal year 2020 budget request. These centers provide information, counseling and access for individuals to learn about the services and support options available to seniors and the disabled so they may retain their independence.

State Health Insurance Assistance Program

The Committee recommends $55,000,000 for the State Health Insurance Assistance Program, which is $5,885,000 above the fiscal year 2019 enacted level and $18,885,000 above the fiscal year 2020 budget request. The State Health Insurance Assistance Program provides Medicare beneficiaries with information, counseling, and enrollment assistance.

Paralysis Resource Center

The Committee recommends $8,700,000 for the Paralysis Resource Center, which is the same as the fiscal year 2019 enacted level and $8,700,000 above the fiscal year 2020 budget request. The Paralysis Resource Center offers activities and services aimed at increasing independent living for people with paralysis and related mobility impairments, and supporting integration into the physical and cultural communities in which they live.

Limb Loss Resource Center

The Committee recommends $4,000,000 for the Limb Loss Resource Center, which is $500,000 above the fiscal year 2019 enacted level and $4,000,000 above the fiscal year 2020 budget request. The Limb Loss Resource Center supports a variety of programs and services for those living with limb loss, including a national peer support program, educational events, training for consumers and healthcare professionals, and information and referral services.

Traumatic Brain Injury

The Committee recommends $12,321,000 for the Traumatic Brain Injury program, which is $1,000,000 above the fiscal year 2019 enacted level and $3,000,000 above the fiscal year 2020 budget request. The program provides grants to States for the development of a comprehensive, coordinated family and person-centered

service system at the State and community level for individuals who sustain a traumatic brain injury.

Developmental Disabilities State Councils

The Committee recommends $80,000,000 for State Councils on Developmental Disabilities, which is $4,000,000 above the fiscal year 2019 enacted level and $24,000,000 above the fiscal year 2020 budget request. The Developmental Disabilities State Councils work to develop, improve and expand the system of services and supports for people with developmental disabilities.

Developmental Disabilities Protection and Advocacy

The Committee recommends $43,000,000 for Developmental Disabilities Protection and Advocacy, which is $2,266,000 above the 2019 enacted level and $4,266,000 above the fiscal year 2020 budget request. This formula grant program provides funding to States to establish and maintain protection and advocacy systems to protect the legal rights of persons with developmental disabilities.

Voting Access for Individuals with Disabilities

The Committee recommends $8,963,000 for Voting Access for Individuals with Disabilities program, which is $2,000,000 above the fiscal year 2019 enacted level and $4,000,000 above the fiscal year 2020 budget request. The Voting Access for Individuals with Disabilities program authorized by the Help America Vote Act provides formula grants to ensure full participation in the electoral process for individuals with disabilities, including registering to vote, accessing polling places, and casting a vote.

Developmental Disabilities Projects of National Significance

The Committee recommends $13,000,000 for Developmental Disabilities Projects of National Significance, which is $1,000,000 above the fiscal year 2019 enacted level and $11,950,000 above the fiscal year 2020 budget request. This program funds grants and contracts that develop new technologies and demonstrate innovative methods to support the independence, productivity, and integration of those living with a disability into the community.

University Centers for Excellence in Developmental Disabilities

The Committee recommends $41,619,000 for University Centers for Excellence in Developmental Disabilities, which is $1,000,000 above the fiscal year 2019 enacted level and $9,073,000 above the fiscal year 2020 budget request. The University Centers for Excellence in Developmental Disabilities Education, Research, and Service are a nationwide network of independent but interlinked centers, representing a national resource for addressing issues, finding solutions, and advancing research related to the needs of individuals with developmental disabilities and their families.

Independent Living

The Committee recommends $116,183,000 for the Independent Living program, of which $25,378,000 is for the Independent Living State Grants program and $90,805,000 is for the Centers for Independent Living program. This funding level is equal to the fiscal year 2019 enacted level and $7,537,000 above the fiscal year 2020

budget request. Independent Living programs maximize the leadership, empowerment, independence, and productivity of individuals with disabilities.

National Institute on Disability, Independent Living, and Rehabilitation Research

The Committee recommends $108,970,000 for the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR), which is the same as the fiscal year 2019 enacted level and $18,599,000 above the fiscal year 2020 budget request. NIDILRR generates knowledge and promotes its effective use to enhance the abilities of people with disabilities to perform activities of their choice in the community and to expand society's capacity to provide full opportunities for its citizens with disabilities.

Assistive Technology

The Committee recommends $37,000,000 for Assistive Technology, which is $1,000,000 above the fiscal year 2019 enacted level and $5,061,000 above the fiscal year 2020 budget request. The Committee provides a $1,000,000 increase for Section 4 of the Assistive Technology Act. Assistive Technology (AT) supports programs providing grants to States for addressing assistive technology needs of individuals with disabilities. The goal is to increase awareness of and access to assistive technology devices and services that may help with education, employment, daily activities, and inclusion of people with disabilities in their communities.

The Committee continues to provide $2,000,000 for competitive grants to support existing and new alternative financing programs that provide for the purchase of AT devices.

Program Administration

The Committee recommends $41,063,000 for Program Administration, which is the same as the fiscal year 2019 enacted level and $2,076,000 above the fiscal year 2020 budget request. This funding supports Federal administrative costs associated with administering ACL's programs.

OFFICE OF THE SECRETARY

OFFICE OF MEDICARE HEARINGS AND APPEALS

Appropriation, fiscal year 2019	$182,381,000
Budget request, fiscal year 2020	182,381,000
Committee Recommendation	182,381,000
Change from enacted level	– – –
Change from budget request	– – –

This Office supports hearings at the administrative law judge level, the third level of Medicare claims appeals.

Medicare Appeals Backlog.—The Committee remains concerned about the size of the Medicare Appeals Backlog. The Committee continues to provide a significantly elevated funding level for the Office of Medicare Hearings and Appeals—an amount that was initially provided in fiscal year 2018.

GENERAL DEPARTMENTAL MANAGEMENT

Appropriation, fiscal year 2019	$545,457,000
Budget request, fiscal year 2020	408,749,000
Committee Recommendation	549,997,000
Change from enacted level	+4,540,000
Change from budget request	+141,248,000

Of the funds provided, $64,828,000 shall be derived from evaluation set-aside funds available under section 241 of the Public Health Service Act, which is the same as the fiscal year 2018 enacted level and $4,012,000 below the fiscal year 2020 budget request.

This appropriation supports activities that are associated with the Secretary's roles as policy officer and general manager of the Department of Health and Human Services. The Office of the Secretary also implements administration and Congressional directives, and provides assistance, direction and coordination to the headquarters, regions, and field organizations of the department. In addition, this funding supports the Office of the Surgeon General and several other health promotion and disease prevention activities that are centrally administered.

Advertising Contracts.—The Committee understands that, as the largest advertiser in the United States, the federal government should work to ensure fair access to its advertising contracts for small disadvantaged businesses and businesses owned by minorities and women. The Committee directs the Department to include the following information in its fiscal year 2021 budget justification: Expenditures for fiscal year 2019 and expected expenditures for fiscal years 2020 and 2021, respectively, for (1) all contracts for advertising services; and (2) contracts for the advertising services of (I) socially and economically disadvantaged small business concerns (as defined in section 8(a)(4) of the Small Business Act (15 U.S.C. 637(a)(4)); and (II) women- and minority-owned businesses.

Customer Service.—The Committee continues to support efforts to improve customer service in accordance with Executive Order 13571—Streamlining Service Delivery and Improving Customer Service. The Committee directs the Secretary to develop standards to improve customer service and incorporate the standards into the performance plans required under 31 U.S.C. 1115.

Departmental Appeals Board.—The Committee includes $20,000,000 for the Departmental Appeals Board, including rent and overhead costs, an increase of $6,000,000 above the fiscal year 2019 enacted level. The additional funds are provided to address the growing backlog of cases at the Medicare Operations Division, as well as the influx in workload due to increased dispositions from the Office of Medicare Hearings and Appeals.

Domestic Violence Survivors with Companion Animals.—The Committee urges the Secretary of Health and Human Services to enter into consultations with the Secretary of Agriculture as soon as possible, and enter into any memoranda of understanding as directed, in order to establish during fiscal year 2020 the requirements for grant application and execution under Section 12502 of P.L. 115–334, the Agriculture Improvement Act of 2018, to provide emergency and transitional shelter and housing options for domestic violence survivors with companion animals.

Gene and Cellular Therapies.—The Committee is encouraged by the promise of the new cancer treatment, CAR T-cell therapy that is already producing remarkable results for patients. The Committee urges the Secretary to ensure coordination between NIH, FDA, and CMS to develop policies that support the innovation of new gene and cell therapies and protect patient access by providing equitable reimbursement for these therapies and the associated services needed by patients being treated. The Committee requests an update in the fiscal year 2021 Congressional Budget Justification on activities to ensure appropriate patient access to these treatments.

HIV Initiative.—The Committee supports the Administration's HIV Initiative to decrease new HIV diagnosis by 75 percent by 2025 and 90 percent by 2030. The initiative builds on existing HIV programs and new innovations to ramp up HIV testing, care and treatment, and prevention services, including Pre-Exposure Prophylaxis.

The Committee includes the full amount of funding requested for the HIV Initiative under HRSA, CDC, and NIH. Moreover, the Committee provides additional increases—beyond the fiscal year 2020 budget request—of $46,376,000 for the Ryan White HIV/AIDS program; $5,000,000 for the Minority AIDS program in SAMHSA; and $6,100,000 for Minority HIV/AIDS prevention and treatment activities under the Office of the Secretary. The Committee also rejects the Administration's proposal to cut funding for NIH's HIV research portfolio; instead, the bill includes an increase of approximately $149,000,000 for NIH's HIV research to continue its efforts to develop an HIV vaccine or a cure.

The Committee directs the Secretary to submit to the Committees on Appropriations a comprehensive multi-year plan outlining the HIV Initiative, including metrics the Department will use to measure progress on reducing HIV transmission, as well as cost estimates for the initiative for fiscal years 2021 through 2025. The Secretary shall submit an initial plan within 90 days of enactment of this Act and then annually thereafter.

Investments in Impoverished Areas.—The Committee supports targeted investments in impoverished areas, particularly in persistent poverty counties and in other high-poverty census tracts. To understand how anti-poverty programs funded through the Department are serving these particular areas, the Committee directs the Department to submit a report to the Committees on Appropriations on the percentage of funds allocated by such programs in fiscal years 2017, 2018, and 2019 and estimates for fiscal year 2020 to areas serving individuals living in persistent poverty counties, as defined as a county that has had 20 percent or more of its population living in poverty over the past 30 years, as measured by the 1990 and 2000 decennial censuses and the most recent Small Area Income and Poverty estimates, and high-poverty areas, as defined as any census tract with a poverty rate of at least 20 percent as measured by the 2013–2017 5-year data series available from the American Community Survey of the Census Bureau. The Department shall report this information to the Committees within 90 days of such data being available and provide a briefing to the Committees within 180 days of enactment of this Act on how the Department is carrying out this directive.

KidneyX.—The Committee recognizes that more than 40 million Americans are living with kidney diseases, and for more than 700,000 of those individuals, the diseases progress to kidney failure, requiring access to dialysis or kidney transplantation to live. The Committee also notes that kidney failure accounts for approximately $35,000,000,000 in annual Medicare spending, while kidney disease accounts for a total of approximately $115,000,000,000 in annual Medicare spending. Given the high cost of kidney disease in both health consequences and federal spending, the Committee includes $10,000,000 for the Office of the Secretary for prize competitions (as described in section 24 of The Stevenson-Wydler Technology Innovation Act of 1980 (15 U.S.C. 3719)) through a public-private partnership to accelerate the development and adoption of novel therapies and technologies that improve the diagnosis and treatment of patients with kidney diseases, including prize competitions to accelerate innovation in dialysis. The Committee urges the Secretary to coordinate across operating divisions—including NIH, FDA, and CMS—to demonstrate a Department-wide commitment to supporting innovative therapies and technologies with the potential to improve quality of life for individuals with kidney diseases while reducing federal costs. The Committee requests that the Secretary include a multi-year plan in the fiscal year 2021 Congressional Budget Justification outlining possible prize competitions in future fiscal years.

Maternal Mental Health.—The Committee is concerned that up to 20 percent of new or expectant mothers will experience a maternal mental health disorder during pregnancy or within the first year after childbirth—such as depression, anxiety, or postpartum psychosis. Untreated maternal mental health disorders negatively impact the short and long-term health of affected mothers and their children, with symptoms leading to adverse birth outcomes, impaired maternal-infant bonding, poor infant growth, childhood emotional and behavioral problems, and significant medical and economic cost. The Committee directs the Secretary to submit a report, in consultation with HRSA, SAMSHA, CDC, CMS, Office of the Surgeon General, Office on Women's Health, and Office of Minority Health, to the Committees on Appropriations within 180 days of enactment of this Act on the role that each agency can take to address gaps in maternal mental health public awareness, screening, diagnosis and delivery for pregnant and postpartum women.

Nondiscrimination Report.—The Committee directs the Secretary to submit a report within 90 days of enactment of this Act on the Department's efforts to enforce nondiscrimination regulations 45 CFR 75.300 (c) and (d) in health and human service programs, specifically including efforts to ensure that foster children are not discriminated against based on their sexual orientation and gender identity, given that HHS-funded research has shown that lesbian, gay, bisexual, and transgender (LGBT) foster children suffer poorer outcomes related to safety, well-being, and permanency than their non-LGBTQ counterparts, including greater rates of poor treatment, multiple placements, longer stays in residential care rather than in family settings, and greater rates of hospitalization for emotional reasons, criminal justice involvement, and homelessness.

Nonrecurring Expenses Fund.—The Committee includes bill language in the CDC account to direct funding to the Chamblee Research Support Building 108 project and campus infrastructure improvements.

Performance Measures.—The Committee directs the Department to comply with title 31 of the United States Code, including the development of organizational priority goals and outcomes such as performance outcome measures, output measures, efficiency measures, and customer service measures.

Proposed Reductions in the Fiscal Year 2020 Budget Request.—The Committee includes no funds for Secretarial Initiatives and Innovations or Acquisition Reform. These activities were proposed for reduction or elimination in the fiscal year 2020 budget request. The Committee agrees with the Secretary's proposal to support acquisition reform through the HHS Service and Supply Fund.

Research on Poverty.—The Committee includes sufficient funding for the Office of the Assistant Secretary for Planning and Evaluation to continue the existing Poverty Research Center cooperative agreement in fiscal year 2020. The Committee includes an increase of $1,000,000 above the fiscal year 2019 enacted level for the fourth year of this five-year cooperative agreement to initiate new research projects, data analysis, and evaluation plans.

Section 520 Report.—The Committee commends HHS and the CDC for working with state and local partners to take necessary steps to reduce the number of new infections of HIV and hepatitis due to intravenous drug use. The Committee notes that studies have shown that People Who Inject Drugs (PWIDs) are twice as likely to be unaware of their HIV status as the general public. The Committee also recognizes that syringe services programs (SSPs) have been associated with reduced risk for infection of HIV, viral hepatitis and other blood-borne infections. Section 520 of division H of the fiscal year 2016 Consolidated Appropriations Act allowed for elements of SSPs to be purchased if it was determined that a state or local jurisdiction was experiencing, or was at risk for, a significant increase in hepatitis infections or an HIV outbreak due to injection drug use. Such authority was continued in fiscal years 2017, 2018, and 2019. Therefore, the Committee directs the Secretary to submit a report within 180 days of enactment of this Act on the implementation of Sec. 520 of P.L. 114–113, P.L. 115–31, and P.L. 115–141. The report should include the number of states, programs, or grantees requesting the use of funds for SSPs; the number of PWIDs served; information on services provided to the PWIDs and the programs to which such PWIDs were linked; and, where possible, the impact of such programs on HIV and hepatitis infection rates.

Staffing Reports.—The Committee continues a general provision requiring the Department to submit a staffing report to the Committees on Appropriations by the 15th day of each month. The Excel table shall include: the names, titles, grades, agencies, and divisions of all of the political appointees, special government employees, and detailees that were employed by or assigned to the Department during the previous month.

Teen Pregnancy Prevention Evidence Review.—The Committee includes $600,000 for the Assistant Secretary for Planning and Eval-

uation to maintain and continue to update the existing Teen Pregnancy Prevention Evidence Review.

Office of the Assistant Secretary for Health

African American Children and Suicide.—The Committee is concerned that the suicide rate among children ages 10 to 17 increased by 70 percent between 2006 and 2016. The Committee is also concerned that African American children ages 5 to 12 are dying by suicide at nearly twice the rate of their white counterparts. Accordingly, the Committee directs the Office of the Surgeon General to submit a report on this pressing public health issue, within 90 days of enactment of this Act, including an examination of factors that may be causing this disparity as well as evidence-based interventions. The Surgeon General should collaborate with the CDC, SAMHSA, ACF, the National Institute of Minority Health and Health Disparities, the National Institutes of Mental Health, and the National Institute of Child Health and Human Development, as appropriate.

Chronic Fatigue Syndrome Advisory Committee.—The Committee is concerned about the Secretary's decision to disband the Chronic Fatigue Syndrome Advisory Committee (CFSAC) without alternative plans to carry out its functions and current projects. There remains an urgent need for U.S. inter-agency coordination and collaboration with stakeholders to adequately address the needs of the ME/CFS health crisis. In the absence of CFSAC, the Committee requests that HHS submit a plan within 90 days of enactment of this Act outlining how the Department intends to address the crisis in ME/CFS clinical care; accelerate drug development for ME/CFS; and collaborate across HHS agencies and stakeholders.

Embryo Adoption Awareness Campaign.—The Committee includes $1,000,000 for the Embryo Adoption Awareness Campaign, the same as the fiscal year 2019 enacted level. These funds will be used to educate Americans about the existence of frozen human embryos (resulting from in-vitro fertilization), which may be available for donation or adoption to help other couples build their families. The Committee includes bill language permitting these funds also to be used to provide medical and administrative services to individuals adopting embryos, deemed necessary for such adoptions, consistent with the Code of Federal Regulations.

Immunization Objectives.—The Healthy People immunization and infectious disease objectives are a cornerstone to national efforts to protect against vaccine preventable conditions across the lifespan. As the Office of Disease Prevention and Health Promotion (ODPHP) works to finalize objectives for Healthy People 2030, the Committee notes that the proposed list of objectives includes only eight immunization objectives. This reduction is a missed opportunity to emphasize immunizations at a time when it is critically important to elevate this as a public health priority across the lifespan. The HHS Strategic Plan recognizes that infectious diseases are a major health and economic burden for the United States and makes a commitment to support access to preventive services including immunizations and screenings, especially for high-risk, high-need populations. To help fulfill this priority, the Committee strongly urges ODPHP to work with the National Vaccine Program Office to adopt an Adult Immunization Composite Status Measure

Objective, which targets multiple vaccine preventable conditions (influenza, Td/Tdap, zoster and pneumococcal) in one quality measure. Adoption of the Composite would align HP2030 objectives with external health care quality measurement tools, streamlining the patchwork of existing adult immunization measures, reducing the reporting burden to providers, and providing a meaningful national picture of access to this important preventive service.

Reorganization.—The Committee strongly opposes the Secretary's reorganization of the Office of the Assistant Secretary for Health—in particular, the Secretary's misguided decision to merge the Office of Adolescent Health into the Office of Population Affairs and the decision to dismantle HHS Regional Offices that currently administer the Title X Family Planning program. The Committee believes the reorganization will harm the Teen Pregnancy Prevention Program and its ability to provide evidence-based and medically accurate programs that reduce teen pregnancy. The Committee disagrees with the Secretary's decision to move forward with the reorganization after satisfying only the bare minimum of requirements for congressional notification. As a result, the Committee modifies reprogramming authority to remove the ability of the Secretary to reorganize offices unless the reorganization proposal is included in the President's budget request.

Sexual Risk Avoidance.—The Committee includes no funding for grants to implement education in sexual risk avoidance, also known as abstinence-only until marriage programs.

Sexually Transmitted Infections (STIs).—The Committee is aware of the recent statistics regarding the rise in STIs across the nation and is pleased that the Assistant Secretary for Health is creating a National STD Action Plan to address increasing rates in these diseases. The Committee requests a report within 90 days of enactment of this Act on the Administration's progress on such an Action Plan.

Teen Pregnancy Prevention.—The Committee strongly supports the Teen Pregnancy Prevention (TPP) Program and the first two five-year cycles of grants. The TPP Program has been widely cited as a high-quality evidence-based program, including by the bipartisan Commission on Evidence-Based Policymaking. Unfortunately, in July 2017, HHS sought to abruptly shorten existing grants after the third year of their five-year awards. This action was subsequently found to be unlawful and overturned by multiple federal courts. Although HHS was ordered to restore funding for the final two years of the grants, the attempt to de-fund awards in the middle of multi-year programs caused considerable disruption. The committee is therefore providing a sixth year of funding for grants awarded for fiscal years 2015 through 2019 to mitigate this disruption and increase the opportunity for grantees to meet the original goals for their projects.

Office of Minority Health

The Committee provides $65,000,000 for the Office of Minority Health (OMH), which is $8,330,000 above the fiscal year 2019 enacted level and $13,202,000 more than the fiscal year 2020 budget request. The OMH works with U.S. Public Health Service agencies and other agencies of the Department to address the health status and quality of life for racial and ethnic minority populations in the

United States. OMH develops and implements new policies; partners with States, Tribes, and communities through cooperative agreements; supports research, demonstration, and evaluation projects; and disseminates information.

Health Disparities.—The Committee includes an increase of $13,202,000 above the amount requested in the fiscal year 2020 budget request and directs OMH to allocate the additional funds for research or public health interventions related to Sickle Cell, Sickle Cell Trait, Lupus, Alzheimer's, Diabetes, and peripheral artery disease, as well as stomach, liver, and cervical cancer to help reduce the racial and ethnic disparities that exist in these diseases. The Committee encourages OMH to support research at Historically Black Colleges and University medical colleges and Hispanic Serving Institution medical schools to explore the disproportionate impact these diseases have on minority populations.

The Committee directs OMH to submit an update to the Committees on Appropriations no later than September 30, 2020, including the name of each organization receiving funding in fiscal year 2020; the amount of each award; a summary of each project; and a projected timeline for each project.

Hispanic Serving Institutions.—The Committee urges the Office of Minority Health to enter into cooperative agreements with Hispanic Serving Institution medical schools in addition to their work with Historically Black Colleges and Universities medical schools. The Committee requests a report on these efforts within 180 days of enactment of this Act.

Office on Women's Health

The Committee includes $36,000,000 for the Office on Women's Health, which is $3,860,000 above the fiscal year 2019 enacted level and $8,684,000 more than the fiscal year 2019 budget request.

The Committee includes $4,100,000, an increase of $1,000,000 over the fiscal year 2019 enacted level, to combat violence against women through the State partnership initiative. This program provides funding to State-level public and private health programs to partner with domestic and sexual violence organizations to improve healthcare providers' ability to help victims of violence and improve prevention programs.

Maternal Mortality.—The Committee continues to be concerned about the high rate of maternal mortality in the United States. The Committee includes additional funding for OWH's activities to reduce maternal mortality, including expansion of evidence-based interventions and dissemination of information about evidence-based interventions.

Menstrual Hygiene Products.—The Committee is concerned with the lack of data on the usage of—and preferences for—different types of menstrual hygiene products, which are basic health care necessities. The Committee directs the Office on Women's Health to commission a study on the usage of, type, preferences, and frequency in changing of different menstrual hygiene products by race and socioeconomic status. The Committee directs the Office on Women's Health to commission the study in time to be submitted to Congress no later than 180 days after enactment of this Act.

OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY

Appropriation, fiscal year 2019	$60,367,000
Budget request, fiscal year 2020	43,000,000
Committee Recommendation	60,367,000
Change from enacted level	– – –
Change from budget request	+17,367,000

The Office of the National Coordinator (ONC) is the principal Federal entity charged with coordinating efforts to implement and use health information technology and exchange electronically health information.

Patient Data Matching.—The Committee is aware that one of the most significant challenges inhibiting the safe and secure electronic exchange of health information is the lack of a consistent patient data matching strategy. With the passage of the Health Information Technology for Economic and Clinical Health (HITECH) Act, a clear mandate was placed on the Nation's healthcare community to adopt electronic health records and health exchange capability. Although the Committee continues to carry a prohibition against HHS using funds to promulgate or adopt any final standard providing for the assignment of a unique health identifier for an individual until such activity is authorized, the Committee notes that this limitation does not prohibit HHS from examining the issues around patient matching. Accordingly, the Committee continues to encourage the Secretary, acting through the ONC and CMS, to provide technical assistance to private-sector-led initiatives to develop a coordinated national strategy that will promote patient safety by accurately identifying patients to their health information.

OFFICE OF INSPECTOR GENERAL

Appropriation, fiscal year 2019	$80,000,000
Budget request, fiscal year 2020	80,000,000
Committee Recommendation	85,000,000
Change from enacted level	+$5,000,000
Change from budget request	+$5,000,000

The Committee provides $85,000,000 for the Office of Inspector General (OIG), which is $5,000,000 more than the fiscal year 2019 enacted level and $5,000,000 more than the fiscal year 2020 budget request.

In addition, within the Health Care Fraud and Abuse Control (HCFAC) program discretionary appropriations for fiscal year 2018, the Committee provides the OIG with $94,000,000. Mandatory appropriations for this office also are contained in the HCFAC program and the Health Insurance Portability and Accountability Act of 1996.

Unaccompanied Children.—The Committee appreciates the OIG's ability to respond quickly to warning signs in the Office of Refugee Resettlement's (ORR) Unaccompanied Children program and looks forward to the OIG's forthcoming series of reports on critical issues related to unaccompanied children in ORR's custody.

OFFICE FOR CIVIL RIGHTS

Appropriation, fiscal year 2019	$38,798,000
Budget request, fiscal year 2020	30,286,000
Committee Recommendation	38,798,000
Change from enacted level	– – –
Change from budget request	+8,512,000

The Office for Civil Rights (OCR) is responsible for enforcing civil rights statutes that prohibit discrimination in health and human services programs. OCR implements the civil rights laws through a compliance program designed to generate voluntary compliance among all HHS recipients.

Expulsions and Suspensions in the Head Start program.—The Committee is deeply concerned about expulsions and suspensions that occur in preschool settings and K–3 classrooms, particularly given the racial and gender disparities that exist. These outcomes are problematic given the research that indicates these practices can adversely affect development, health, and education outcomes. The Committee strongly urges the Office of Civil Rights to collect data annually from all Head Start grantees on the number and type of suspension and expulsions of children enrolled in Head Start or Early Head Start, disaggregated by race/ethnicity, sex, disability status, and English Language Learner (ELL) status. The Office of Civil Rights should also submit to the Committee on Appropriations of the House of Representatives no later than 180 days after the enactment of this act, and annually thereafter, a report detailing school discipline in all Head Start programs, including disaggregated data and any disparities by subgroup in disciplinary rates. The report should include specific recommendations given to schools on expulsions and suspensions—including evidence-based interventions, consumer education specific to each school, and opportunities to improve school climate. The Committee urges OCR to provide technical assistance to help prevent or severely limit expulsion and suspension practices in Head Start programs; eliminate disparities in the provision of discipline; and ensure the safety and well-being of all young children.

RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS

Appropriation, fiscal year 2019	$629,209,000
Budget request, fiscal year 2020	623,591,000
Committee Recommendation	623,591,000
Change from enacted level	–5,618,000
Change from budget request	– – –

The Committee provides for retirement pay and medical benefits of Public Health Service Commissioned Officers, for payments under the Retired Serviceman's Family Protection Plan, and for medical care of dependents and retired personnel.

PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

Appropriation, fiscal year 2019	$2,631,458,000
Budget request, fiscal year 2020	2,666,591,000
Committee Recommendation	2,708,458,000
Change from enacted level	+77,000,000
Change from budget request	+41,867,000

This account supports the activities of the Assistant Secretary for Preparedness and Response (ASPR) and other components within the Office of the Secretary to prevent, prepare for, and respond to the health consequences of bioterrorism and other public health emergencies, including pandemic influenza. It also includes funding for the Department's cybersecurity efforts.

Office of the Assistant Secretary for Preparedness and Response

The Committee provides $2,372,128,000 for activities administered by ASPR. ASPR is responsible for coordinating national policies and plans for medical and public health preparedness and for administering a variety of public health preparedness programs.

Research and Development.—The Committee supports the critical role of research and development (R&D) for new tools to protect Americans from the threat of biological incidents, including infectious diseases and diseases of epidemic potential, and supports the prioritization of R&D within the National Biodefense Strategy. The Committee requests that HHS include in the fiscal year 2021 Congressional Budget Justification an update on progress made in supporting U.S. leadership and investment in emerging technologies and medical countermeasures, including new drugs, diagnostics, vaccines, and devices, as well as an update on progress made towards integrating research and development into Federal Planning, including work to facilitate policies and incentives across interagency response R&D efforts.

Public Health Emergency Medical Countermeasures Enterprise Multi-Year Budget.—The Committee appreciates the release of the Public Health Emergency Medical Countermeasures Enterprise multi-year budget in February 2019. The Committee expects more timely future submissions, as the updates are due annually.

Operations

The Committee includes $30,938,000 for Operations. This account supports activities within the Assistant Secretary's Immediate Office; the Office of the Chief Operating Officer; the Office of Acquisitions Management, Contracts, and Grants; and the Office of Financial Planning and Analysis.

Preparedness and Emergency Operations

The Committee includes $24,654,000 for Preparedness and Emergency Operations. The Preparedness and Emergency Operations account funds the Office of Emergency Management, which support a full spectrum of emergency management responsibilities, including planning, coordination, logistics, training, and responding to planned events and unplanned incidents.

National Disaster Medical System

The Committee includes $57,404,000 for the National Disaster Medical System (NDMS). NDMS deploys trained medical teams to communities impacted by public health and medical emergencies due to natural and man-made incidents.

Hospital Preparedness Program

The Committee includes $316,555,000, an increase $52,000,000, for the Hospital Preparedness Program (HPP). HPP supports coop-

erative agreements with State, local, and territorial health departments to build healthcare coalitions that improve regional and local hospital preparedness and surge capacity in public health emergencies.

High Consequence, Emerging, Infectious Disease Threats.—The Committee supports the continuation of the nation's preparedness against high consequence, emerging, infectious disease threats such as Ebola, Lassa Fever, Severe Acute Respiratory Syndrome (SARS), Middle Eastern Respiratory Syndrome (MERS), and other special pathogens. The Committee includes $11,000,000 to be provided directly to the National Ebola Training and Education Center (NETEC) and the ten existing regional Ebola and other special pathogen treatment centers.

Hospital Preparedness Grants.—The Committee includes an increase of $35,000,000 for critical support to State, local and regional partners to advance health care system preparedness and response.

Regional Disaster Health Response System Demonstration Pilots.—The Committee includes $6,000,000 for the expansion of the current Regional Disaster Health Response System demonstration pilots. The Committee directs HHS to include a plan in the fiscal year 2021 Congressional Budget Justification that is based on the results of these pilots that does not duplicate current services.

Treatment Reimbursement.—During the Ebola outbreak, Americans who became infected were successfully treated at Academic Health Centers, using a reimbursement model to ensure adequate compensation for treatment provided to Ebola victims. Unfortunately, this model has not been extended to other serious communicable diseases such as Lassa fever, which represent an equal risk. Given the significant cost of preparedness and care associated with any serious communicable disease, when any Federal agency refers any highly contagious individuals to a designated treatment center, the Committee encourages the use of the previously developed reimbursement model for Ebola to be applied.

Biomedical Advanced Research and Development Authority

The Committee includes $566,700,000, an increase of $5,000,000, for the Biomedical Advanced Research and Development Authority (BARDA). BARDA supports the advanced development of vaccines, drugs, and therapeutics for potential serious public health threats, including chemical, biological, radiological, and nuclear threats, pandemic influenza, and emerging and re-emerging infectious diseases.

Tuberculosis.—The Committee previously encouraged BARDA to support the development of new tuberculosis (TB) diagnostic tests, drugs and vaccines for drug resistant TB. The Committee requests a report on this issue within 180 days of enactment of this Act.

Vaccine Production.—The Committee urges BARDA to support vaccines produced through recombinant DNA technology in addition to traditionally-produced vaccines to facilitate the competitive process for all vaccine manufacturers.

Zika Vaccine Development.—The number of new Zika virus infections has dropped dramatically because much of the population in Zika-endemic areas has developed an immunity to the virus. However, like other similar mosquito-borne flaviviruses, the virus is

likely to reemerge in these areas in several years, and could emerge unpredictably in isolated areas in the meantime, including within the U.S. Given the links between Zika virus infections and serious birth defects, and the length of time necessary to develop vaccines, the Committee believes it is prudent to continue efforts to develop a vaccine for the Zika virus. Within the total funding provided for BARDA, the Committee directs BARDA to continue to support research and development on a vaccine for the Zika virus.

Policy and Planning

The Committee includes $14,877,000 for Policy and Planning. The Office of Policy and Planning leads HHS' emergency preparedness and response strategic direction and policy coordination.

Project BioShield Special Reserve Fund

The Committee includes $735,000,000 for Project BioShield. These funds support the acquisition of promising medical countermeasures developed through BARDA contracts for the most serious public health threats.

Strategic National Stockpile

The Committee includes $620,000,000, an increase of $10,000,000, for the Strategic National Stockpile. The Committee commends the Department for its efforts to achieve efficiencies in its public health preparedness activities. The Committee continues to expect that CDC will have a significant role in providing scientific expertise in decision-making related to the procurement of countermeasures, as well as maintaining strong relationships with State and local public health departments to facilitate efficient deployment of countermeasures in public health emergencies.

Forward Deployment.—The Committee strongly urges HHS to use discretion in allowing the forward deployment of Strategic National Stockpile (SNS) medication in reasonable quantities in or near high-threat, high-density urban jurisdictions that have demonstrated an ability to stand up Points of Dispensing faster than SNS medications can be delivered to jurisdictions.

Vulnerable Populations.—The Committee is concerned about the availability of medical countermeasures for individuals who are immunocompromised with common conditions like eczema, HIV, and diabetes. Some traditional vaccines contain a live virus that can be harmful or even fatal for patients with these conditions. Therefore, the Committee encourages HHS to evaluate its stockpile of medical countermeasures to ensure appropriate supplies are available to protect these vulnerable populations.

Office of the Assistant Secretary for Administration—Cybersecurity

The Committee provides $58,860,000 for information technology cybersecurity in the Office of the Assistant Secretary for Administration. These funds provide for continuous monitoring and security incident response coordination for the Department's computer systems and networks.

Office of Security and Strategic Information

The Committee provides $7,470,000 for the Office of Security and Strategic Information to maintain the security of the Department's personnel, systems, and critical infrastructure.

Office of Public Health and Science—Medical Reserve Corps

The Committee includes $6,000,000 for the Medical Reserve Corps program, which is a network of local volunteers who work to strengthen the public health infrastructure and preparedness capabilities of their communities.

Pandemic Influenza Preparedness

The Committee includes $270,000,000, an increase of $10,000,000, for the pandemic influenza preparedness program. This funding supports research and development of vaccines and the next-generation influenza medical countermeasures, preparedness testing and evaluation, and stockpiling.

Pandemic Influenza Efficiencies.—The Committee is committed to improving and modernizing our nation's pandemic influenza preparedness and ensuring first responders are protected. To that end, HHS is urged to consider novel pandemic stockpiling concepts, such as Vendor Managed Inventory, already used successfully in the Strategic National Stockpile, which will reduce the overhead required to maintain the pandemic stockpile, and will ensure a safe, reliable supply of pandemic countermeasures are available from vaccine manufacturers as is required.

Pandemic Influenza Vaccine.—The Committee remains concerned about our nation's limited ability to rapidly respond to a pandemic influenza outbreak and meet the Federal government's goal of delivering vaccines within 12 weeks of a declared pandemic. Historically HHS has entered into agreements with multiple suppliers to ensure optimal level of preparedness against pandemic influenza outbreaks. The Committee encourages HHS to advance multiple technologies that can produce a vaccine within 12 weeks of a pandemic influenza declaration.

GENERAL PROVISIONS

Sec. 201. The Committee continues a provision to limit the amount available for official reception and representation expenses.

Sec. 202. The Committee continues a provision to limit the salary of an individual through an HHS grant or other extramural mechanism to not more than the rate of Executive Level II.

Sec. 203. The Committee continues a provision to prohibit the Secretary from using evaluation set-aside funds until the Committees on Appropriations receive a report detailing the planned use of such funds.

Sec. 204. The Committee continues a provision regarding the enacted level for the PHS evaluation set-aside.

(TRANSFER OF FUNDS)

Sec. 205. The Committee modifies a provision permitting the Secretary of HHS to transfer up to one percent of any discretionary funds between appropriations, provided that no appropriation is in-

creased by more than three percent by any such transfer to meet emergency needs.

Sec. 206. The Committee modifies the 60 day flexibility for National Health Service Corps contract terminations.

Sec. 207. The Committee continues a provision to prohibit the use of Title X funds unless the applicant for the award certifies to the Secretary that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.

Sec. 208. The Committee continues a provision stating that no provider of services under Title X shall be exempt from any law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.

Sec. 209. The Committee continues a provision related to the Medicare Advantage program.

Sec. 210. The Committee continues a provision prohibiting funds from being used to advocate or promote gun control.

Sec. 211. The Committee continues a provision to allow funding for HHS international HIV/AIDS and other infectious disease, chronic and environmental disease, and other health activities abroad to be spent under the State Department Basic Authorities Act of 1956.

Sec. 212. The Committee continues a provision authorizing certain international health activities.

(TRANSFER OF FUNDS)

Sec. 213. The Committee continues a provision to provide the Director of NIH, jointly with the Director of the Office of AIDS Research, the authority to transfer up to three percent of human immunodeficiency virus funds.

(TRANSFER OF FUNDS)

Sec. 214. The Committee continues a provision that makes NIH funds for human immunodeficiency virus research available to the Office of AIDS Research.

Sec. 215. The Committee continues a provision granting authority to the Office of the Director of the NIH to enter directly into transactions in order to implement the NIH Common Fund for medical research and permitting the Director to utilize peer review procedures, as appropriate, to obtain assessments of scientific and technical merit.

Sec. 216. The Committee continues a provision clarifying that funds appropriated to NIH institutes and centers may be used for minor repairs or improvements to their buildings, up to $3,500,000 per project with a total limit for NIH of $45,000,000.

(TRANSFER OF FUNDS)

Sec. 217. The Committee continues a provision transferring one percent of the funding made available for National Institutes of Health National Research Service Awards to the Health Resources and Services Administration.

Sec. 218. The Committee continues the Biomedical Advanced Research and Development Authority ten year contract authority.

Sec. 219. The Committee continues language requiring HHS to include certain information concerning the number of full-time Federal employees and contractors working on the Affordable Care Act in the fiscal year 2021 budget request.

Sec. 220. The Committee continues specific report requirements for CMS's Health Insurance Exchange activities in the fiscal year 2021 budget request.

Sec. 221. The Committee continues a provision prohibiting the CMS Program Management account from being used to support risk corridor payments.

(TRANSFER OF FUNDS)

Sec. 222. The Committee continues language directing the spending of the Prevention and Public Health fund.

PREVENTION AND PUBLIC HEALTH FUND

The Committee continues a provision that directs the transfer of the Prevention and Public Health Fund. In fiscal year 2020, the level appropriated for the fund is $893,950,000 after accounting for sequestration. The Committee includes bill language in section 222 of this Act that requires that funds be transferred within 45 days of enactment of this Act to the following accounts, for the following activities, and in the following amounts:

Agency	Budget Activity	FY 2020 Committee
ACL	Alzheimer's Disease Program	$14,700,000
ACL	Chronic Disease Self-Management	$8,000,000
ACL	Falls Prevention	$5,000,000
CDC	Breastfeeding Grants (Hospitals Promoting Breastfeeding)	10,000,000
CDC	Diabetes	72,275,000
CDC	Epidemiology and Laboratory Capacity Grants	40,000,000
CDC	Healthcare Associated Infections	12,000,000
CDC	Heart Disease and Stroke Prevention Program	57,075,000
CDC	Million Hearts Program	4,000,000
CDC	Preventive Health and Health Services Block Grant	160,000,000
CDC	Tobacco	129,600,000
CDC	Section 317 Immunization Grants	347,800,000
CDC	Lead Poisoning Prevention	17,000,000
CDC	Early Care Collaboratives	4,500,000
SAMHSA	Garrett Lee Smith—Youth Suicide	$12,000,000

Sec. 223. The Committee modifies a provision relating to breast cancer screening.

Sec. 224. The Committee continues a provision relating to indirect cost negotiated rates.

(TRANSFER OF FUNDS)

Sec. 225. The Committee continues a provision permitting transfer of funds within NIH, if such funds are related to opioid and pain management research.

Sec. 226. The Committee continues certain Congressional notification requirements.

Sec. 227. The Committee continues a provision related to a report on staffing.

Sec. 228. The Committee continues a provision allowing HHS to cover travel expenses when necessary for employees to obtain med-

ical care when they are assigned to duty in a location with a public health emergency.

Sec. 229. The Committee continues a provision relating to donations for unaccompanied alien children.

Sec. 230. The Committee includes a new provision rescinding unobligated funds from prior-year Children's Health Insurance Program State allotments.

Sec. 231. The Committee modifies a provision relating to Members of Congress and oversight of facilities responsible for the care of unaccompanied alien children.

Sec. 232. The Committee includes a new provision ensuring that efforts are taken to place unaccompanied alien children who are siblings together.

Sec. 233. The Committee includes a new provision prohibiting funds from being used to facilitate the Secretary of Homeland Security taking certain actions against sponsors of unaccompanied alien children, except under certain conditions.

Sec. 234. The Committee includes a new provision prohibiting funds from being used to house unaccompanied alien children in certain facilities, unless the Secretary grants limited-duration waivers.

Sec. 235. The Committee includes a new provision requiring a weekly report on unaccompanied alien children who were separated from their parents or legal guardians and transferred to the care of the Office of Refugee Resettlement.

Sec. 236. The Committee includes a new provision prohibiting funds from being awarded to an organization that does not comply with Federal nondiscrimination regulations.

Sec. 237. The Committee includes a new provision related to primary and secondary school costs for eligible dependents of HHS personnel stationed in the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, and other territories or possessions of the United States.

Sec. 238. The Committee includes a new provision prohibiting funds from being used to implement, enforce, or otherwise give effect to certain revisions of the Code of Federal Regulations.

TITLE III—DEPARTMENT OF EDUCATION

EDUCATION FOR THE DISADVANTAGED

Appropriation, fiscal year 2019	$16,543,790,000
Budget request, fiscal year 2020	16,376,790,000
Committee Recommendation	17,563,802,000
Change from enacted level	+1,020,012,000
Change from budget request	+1,187,012,000

This account provides foundational funding to help ensure all children receive a fair, equitable and high-quality education.

Of the total amount available, $6,638,625,000 is appropriated for fiscal year 2020 for obligation on or after July 1, 2021 and $10,841,177,000 is appropriated for fiscal year 2020 for obligation on or after October 1, 2021.

Grants to Local Educational Agencies

For fiscal year 2020, the Committee recommends $16,859,802,000 for Title I grants to LEAs, an increase of $1,000,000,000 over the

fiscal year 2019 enacted level and the fiscal year 2020 budget request, reflecting the largest increase to the program in more than a decade. Title I is the cornerstone of federal K–12 education programs and critical to the nation's collective efforts to ensure that every child has the opportunity to obtain a high-quality education. The program serves an estimated 25 million students in nearly 90 percent of school districts and nearly 60 percent of all public schools. Providing additional resources so that children can succeed in school and in life is one of the Committee's highest priorities in the bill.

Of the amounts provided for Title I programs, $6,459,401,000 is available for Basic Grants to Local Educational Agencies (LEAs or school districts), which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Basic grants are awarded to school districts with at least 10 low-income children who make up more than two percent of the school-age population.

Within the amount for Title I Basic Grants, up to $5,000,000 is made available to the Secretary of Education (Secretary) on October 1, 2019, to obtain annually-updated LEA-level poverty data from the Bureau of the Census.

The Committee recommends $1,362,301,000 for Title I Concentration Grants, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Concentration Grants target funds to school districts in which the number of low-income children exceeds 6,500 or 15 percent of the total school-age population.

The Committee recommends $4,519,050,000 for Title I Targeted Grants, which is $500,000,000 above the fiscal year 2019 enacted level and the 2020 budget request. Targeted Grants provide higher payments to school districts with high numbers or percentages of low-income students.

The Committee recommends $4,519,050,000 for Title I Education Finance Incentive Grants (EFIGs), which is $500,000,000 above the fiscal year 2019 enacted level and the 2020 budget request. EFIGs provide payments to States and school districts that incorporate equity and effort factors to improve the equity of State funding systems.

Our nation's public schools serve more than 50 million children, more than 50 percent of whom come from low-income families. Research shows that low-income students are more likely to struggle academically and often attend high-need schools with fewer resources, less-experienced teachers, and more limited access to advanced coursework. Unfortunately, support for federal K–12 formula programs has been relatively stagnant over the past decade, allowing inflation to erode the value of this vital assistance. The Committee is concerned by research from the Center on Budget and Policy Priorities that finds that 29 States spent less per student in 2015 than they had in the 2008 school year, before the Great Recession. The Committee intends for this historic increase for Title I, and for other K–12 programs, to help reverse a decade of disinvestment and austerity for our schools and communities.

The Committee is encouraged by recent research on community school models, including findings that well-implemented community schools lead to improved student and school outcomes while meeting the needs of low-income students. The Committee notes

that under Schoolwide Programs in the Elementary and Secondary Education Act (ESEA), schools may describe efforts, and use funds, to support strategies to address schools' needs that include a community schools approach, such as the use of a community schools coordinator, expanded and enriched learning time opportunities, active family and community engagement, collaborative leadership practices, and integrated student supports.

The Committee is concerned by the Department's proposed Supplement not Supplant Non-Regulatory Informational Document for leaving a key fiscal requirement unregulated and without a meaningful standard against which the Department can enforce compliance. The Committee is concerned the informational guidance will lead to the abuse of flexibility and an erosion of the effectiveness of the federal investment in public education. Therefore, the Committee urges the Department to abandon its proposal and engage in negotiated rulemaking and robust public comment to promulgate a meaningful standard for compliance with the requirements of ESEA.

Comprehensive Literacy Development Grants

The Committee recommends $195,000,000 for Comprehensive Literacy Development Grants, which is $5,000,000 above the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds are awarded to States to subgrant to school district and/or early education programs to improve literacy instruction for disadvantaged students.

Innovative Approaches to Literacy

The Committee recommends $29,000,000 for Innovative Approaches to Literacy, a $2,000,000 increase over the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds support competitive grants to school libraries and national not-for-profit organizations to provide books and literacy activities to children and families in high-need communities.

State Agency Programs: Migrant

The Committee recommends $380,000,000 for the State Agency Program for Migrant Education, which is $5,249,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program supports special educational and related services for children of migrant agricultural workers and fishermen, including: (1) Supplementary academic education; (2) remedial or compensatory instruction; (3) English for limited English proficient students; (4) testing; (5) guidance counseling; and (6) other activities to promote coordination of services across States for migrant children whose education is interrupted by frequent moves.

State Agency Programs: Neglected and Delinquent

For the State Agency Program for Neglected and Delinquent Children, the Committee recommends $50,000,000, which is $2,386,000 about the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This formula grant program supports educational services for children and youth under age 21 in State-run institutions, attending community day programs, and in correc-

tional facilities. A portion of these funds is provided for projects that support the successful re-entry of youth offenders into postsecondary and vocational programs.

Special Programs for Migrant Students

The Committee recommends $50,000,000 for the Special Programs for Migrant Students, which is $5,377,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These programs make grants to colleges, universities, and nonprofit organizations to support educational programs designed for students who are engaged in migrant and other seasonal farm work. The High School Equivalency Program (HEP) recruits migrant students age 16 and over and provides academic and support services to help those students obtain a high school equivalency certificate and subsequently to gain employment or admission to a postsecondary institution or training program. The College Assistance Migrant Program (CAMP) provides tutoring and counseling services to first-year, undergraduate migrant students and assists those students in obtaining student financial aid for their remaining undergraduate years.

IMPACT AID

Appropriation, fiscal year 2019	$1,446,112,000
Budget request, fiscal year 2020	1,371,799,000
Committee Recommendation	1,498,112,000
Change from enacted level	+52,000,000
Change from budget request	+126,313,000

This account supports payments to school districts affected by Federal activities, such as those that educate children whose families are connected with the military or who live on Indian land.

Basic Support Payments

The Committee recommends $1,351,242,000 for Basic Support Payments to LEAs, which is $50,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Basic Support Payments compensate school districts for lost tax revenue and are made on behalf of Federally-connected children, such as children of members of the uniformed services who live on Federal property.

Payments for Children with Disabilities

The Committee recommends $48,316,000 for Payments for Children with Disabilities, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These payments compensate school districts for the increased costs of serving Federally-connected children with disabilities.

Facilities Maintenance

The Committee recommends $4,835,000 for Facilities Maintenance, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These capital payments are authorized for maintenance of certain facilities owned by the Department.

Construction

The Committee recommends $17,406,000 for the Construction program, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Funding is allocated by formula to eligible LEAs for school construction activities under section 7007(a) of ESEA.

Payments for Federal Property

The Committee recommends $76,313,000 for Payments for Federal Property, which $2,000,000 above the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds are awarded to school districts to compensate for lost tax revenue as the result of Federal acquisition of real property since 1938.

SCHOOL IMPROVEMENT PROGRAMS

Appropriation, fiscal year 2019	$5,246,967,000
Budget request, fiscal year 2020	675,614,000
Committee Recommendation	6,016,470,000
Change from enacted level	+769,503,000
Change from budget request	+5,340,856,000

The Committee recommendation includes $6,016,470,000 for the School Improvement Programs account.

Supporting Effective Instruction State Grants

The Committee recommends $2,555,830,000 for Supporting Effective Instruction State Grants (Title II–A), which is $500,000,000 above fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate the program. Title II–A grants provide States and school districts with a flexible source of funding to strengthen the skills and knowledge of teachers, principals, and administrators to enable them to improve student achievement. Title II–A represents the only dedicated funding stream for teacher professional development for many States and districts. The Committee's recommended funding level, which provides a 24 percent increase, would be the program's first increase since fiscal year 2010. Taking into account the impact previous cuts to Title II–A have had on support for educator professional development, the Committee prioritizes additional resources to strengthen and highlight the importance of the teaching profession.

The Committee also notes the role Title II–A funds can play in helping educators incorporate vital social and emotional learning (SEL) strategies. For instance, Title II–A can be used to develop educator competencies in supporting student social, emotional, and cognitive development into licensing and accreditation requirements for teachers, school leaders, administrators, and counseling staff. In addition, LEAs can use Title II–A funds for professional development that helps educators continually build on and refine student-centered practices that support student social, emotional, and academic learning. These can include learning to use data about school climate and a wide range of student outcomes to undertake continuous improvement, problem solving around the needs of individual students and engaging in schoolwide initiatives in collegial teams and professional learning communities, and

learning from other schools through networks, site visits, and documentation of successes.

The Committee is supportive of the Department's recognition of effective teaching and SEL as a vital, evidence-based field and is interested in how its newly established Office of Effective Teaching and Social and Emotional Learning will provide technical assistance to State Educational Agencies (SEAs) and LEAs in implementing the Every Student Succeeds Act (ESSA). In addition, the Committee is interested in how the office will disseminate knowledge of evidence-based SEL strategies from the Department's newly established Center to Improve Social and Emotional Learning and School Safety to external stakeholders and to Department offices responsible for competitive grant competitions. Therefore, within 60 days of enactment of this Act, the Committee directs the Department to brief the Committees on Appropriations on the Office of Effective Teaching and Social and Emotional Learning's plans for disseminating the Center to Improve Social and Emotional Learning and School Safety's clearinghouse of evidence-based strategies to internal and external stakeholders, including SEAs and LEAs, and the office's plans for leveraging the Center's knowledge of evidence-based SEL strategies to inform fiscal year 2020 grant competitions.

Supplemental Education Grants

The Committee recommends $16,699,000 for Supplemental Education Grants to the Federated States of Micronesia and the Republic of the Marshall Islands, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The Compact of Free Association Amendments Act of 2003 (PL 108–188) authorizes these entities to receive funding for general education assistance.

21st Century Community Learning Centers

The Committee recommends $1,321,673,000 for 21st Century Community Learning Centers, $100,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds are awarded by formula to States, which in turn distribute funds on a competitive basis to local school districts, nonprofit organizations, and other public entities.

The Committee notes that only one in three 21st Century Community Learning Centers grant applications is awarded, reflecting substantial unmet demand for these opportunities. The $100,000,000 increase over fiscal year 2019 will help communities providing after-school programs serve 1.5 million students, approximately 120,000 more than in fiscal year 2019.

State Assessments

The Committee recommends $378,000,000 for State Assessments, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Funds are available to develop and implement academic standards and assessments. The program includes a set-aside for audits to identify and eliminate low-quality or duplicative assessments.

Culturally Relevant Assessments.—The Committee supports efforts by the Department to ensure tribal populations have access to quality culturally relevant assessments.

Education for Homeless Children and Youth

The Committee recommends $100,000,000 for the Education for Homeless Children and Youth program, which is $6,500,000 more than the fiscal year 2019 enacted level and the 2020 budget request. Grants are allocated to States in proportion to the total each State receives under the Title I program.

Training and Advisory Services

The Committee recommends $6,575,000 for Training and Advisory Services authorized by Title IV–A of the Civil Rights Act, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Title IV-A authorizes technical assistance and training services for school districts to address problems associated with desegregation on the basis of race, sex, or national origin. The Department awards three-year grants to regional Equity Assistance Centers (EACs) located in each of the 10 Department of Education regions. The EACs provide services to school districts upon request. Typical activities include disseminating information on successful education practices and legal requirements related to nondiscrimination on the basis of race, sex, and national origin in educational programs.

Education for Native Hawaiians

The Committee recommends $40,000,000 for the Education for Native Hawaiian program, which is $3,603,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds are used to provide competitive awards for supplemental education services to the Native Hawaiian population.

Alaska Native Education Equity

The Committee recommends $36,453,000 for the Alaska Native Education Equity program, which is $1,000,000 more than the fiscal year 2019 level. The fiscal year 2020 budget request proposes to eliminate this program. Funds are used to provide competitive awards for supplemental education services to the Alaska Native population.

Rural Education

The Committee recommends $180,840,000 for Rural Education programs, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. There are two programs to assist rural school districts with improving teaching and learning in their schools: the Small, Rural Schools Achievement program, which provides funds to rural districts that serve a small number of students; and the Rural and Low-Income Schools program, which provides funds to rural districts that serve concentrations of poor students, regardless of the number of students served by the district. Funds appropriated for Rural Education shall be divided equally between these two programs.

Comprehensive Centers

The Committee recommends $60,400,000 for Comprehensive Centers, which is $8,400,000 above the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. The Comprehensive Centers program includes support for regional centers that provide training, technical assistance, and professional development to build State capacity to provide high-quality education to all students. The Committee notes the critical role Comprehensive Centers play in helping States vet evidence and strategies to implement ESSA and provide children with a high-quality education.

Student Support and Academic Enrichment State Grants

The Committee recommends $1,320,000,000 for Student Support and Academic Enrichment (SSAE) State Grants, which is $150,000,000 above the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. SSAE grants provide SEAs and LEAs with flexible resources that provide students with access to a well-rounded education, including rigorous coursework, and improve school conditions and the use of technology.

The Committee notes that SEAs and LEAs can use SSAE funds for activities that contribute to a well-rounded education, including supports for safe, culturally responsive classroom communities. The Committee also notes that SEAs and LEAs can use SSAE funds to support and expand school-based mental health services.

Arming Teachers.—The Committee notes there is no evidence to suggest that arming teachers would make schools safer. Instead, there are serious concerns about the unintended consequences and negative impacts such a policy could have on the well-being and safety of students. The Committee is deeply concerned by the Department's internal July 2018 memo that indicated its Office of the General Counsel believes the Secretary has discretion to interpret the ESEA "as to its permissiveness regarding the purchase of firearms and training on the use of firearms." However, the memo also indicates that "it is reasonable for the Secretary not to allow this use of funds absent specific Congressional authorization, and it is unlikely that this interpretation would be subject to a successful legal challenge." Seeing as Congress never intended for SSAE funds to be used to purchase firearms or for firearms training in schools, and given the Department's Office of the General Counsel view that it would be reasonable, and legally sound, for the Secretary to disallow such expenditures, the Committee directs the Secretary, within 30 days of enactment of this Act, to issue guidance clarifying that SSAE funds are not allowed to be used for the purchase of firearms or for firearms training.

Digital Divide.—The Committee is concerned by the impact of the digital divide on low-income, minority, and historically underrepresented students. For instance, a recent analysis found that 54 percent of households in Detroit, Michigan lacked fixed broadband connections. Lack of access to broadband for children and families places significant burdens on schools and libraries to help students connect in order to complete coursework. To address this challenge, the Committee notes that LEAs may use SSAE grants to help ex-

pand broadband technology in schools as a use of funds to build technological capacity and infrastructure.

Engineering Education.—The Committee is aware that among science, technology, engineering and mathematics (STEM) topics, there is a relatively limited focus on engineering education; however, engineering is important in its application of scientific and mathematical principles to innovation, analysis, design, evaluation, and manufacturing processes and systems. Therefore, the Committee is supportive of efforts by LEAs to use SSAE funds to support rigorous academic coursework or educator professional learning in engineering education programs and encourages the expansion of engineering initiatives in elementary and secondary schools through public-private partnerships.

Computer Science.—The Committee notes that States and school districts may use funds available under the SSAE Grant Program to strengthen instruction in science, technology, engineering, arts, and mathematics (STEAM) fields, including computer science, and improve access to Pre-K–12 computer science and STEAM programming for underserved students, such as minorities, girls, and youth from families living at or below the poverty line. The Committee recognizes that supporting education in the STEAM fields, particularly computer science, is critical to ensuring that our nation continues to lead in innovation. As computer science is a basic skill in the 21st century global economy, the Committee intends for investments in Title IV–A to reduce the computer science enrollment and achievement gaps.

INDIAN EDUCATION

Appropriation, fiscal year 2019	$180,239,000
Budget request, fiscal year 2020	176,239,000
Committee Recommendation	186,374,000
Change from enacted level	+6,135,000
Change from budget request	+10,135,000

This account supports programs authorized by part A of title VI of the ESEA.

Grants to Local Educational Agencies

The Committee recommends $105,381,000 for Grants to Local Educational Agencies, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides assistance through formula grants to school districts and schools supported or operated by the Bureau of Indian Education. The purpose of this program is to improve elementary and secondary school programs that serve American Indian students, including preschool children. Grantees must develop a comprehensive plan and ensure that the programs they carry out will help Indian students reach the same challenging standards that apply to all students. This program supplements the regular school program to help American Indian children sharpen their academic skills, bolster their self-confidence, and participate in enrichment activities that would otherwise be unavailable.

Special Programs for Indian Children

The Committee recommends $67,993,000 for Special Programs for Indian Children, which the same as the fiscal year 2019 enacted

level and $4,000,000 more than the fiscal year 2020 budget request. These programs make competitive awards to improve the quality of education for American Indian students. The program also funds the American Indian Teacher Corps and the American Indian Administrator Corps to recruit and support American Indians as teachers and school administrators.

National Activities

The Committee recommends $13,000,000 for National Activities, which is $6,135,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Within this account, no less than $4,340,000 is provided for grants to Tribes for education administrative planning, development, and coordination, and no less than $4,340,000 is provided for grants to support Native language immersion schools and programs. Funds under this authority also support research, evaluation and data collection to provide information about the educational status of Indian students and the effectiveness of Indian education programs.

INNOVATION AND IMPROVEMENT

Appropriation, fiscal year 2019	$1,035,556,000
Budget request, fiscal year 2020	1,107,000,000
Committee Recommendation	1,218,815,000
Change from enacted level	+183,259,000
Change from budget request	+111,815,000

The Committee recommends $1,218,815,000 for programs within the Innovation and Improvement account.

Education Innovation and Research

The Committee recommends $300,000,000 for the Education Innovation and Research program. This amount is $170,000,000 above the fiscal year 2019 enacted level and the same as the fiscal year 2020 budget request. This program makes competitive grants to support the replication and scaling-up of evidence-based education innovations.

Within the total for EIR, the Committee recommendation includes $170,000,000 to provide grants for evidence-based, field-initiated innovations that address student social, emotional, and cognitive needs.

The competition is part of the Committee's new initiative on SEL interventions and "whole child" approaches to education. The recently released National Commission on Social, Emotional and Academic Development chronicles decades of research showing "that the social, emotional, and cognitive dimensions of learning are deeply linked" and that educating the whole student involves integrating and sustaining these dimensions throughout the day. In addition, a recent study by the Collaborative for Academic, Social, and Emotional Learning found that students who received SEL interventions showed lasting positive impacts on variables such as high school graduation rates and college attendance and lower likelihoods of being arrested or being diagnosed with a clinical mental health disorder. Further, RAND Corporation finds that there are at least 60 SEL interventions that have been evaluated and meet ESSA evidence requirements. The Committee is encouraged by the robust, growing evidence base behind SEL strategies,

trauma-informed services, and whole child approaches to learning, and makes funding for these interventions a top priority. Within 90 days of enactment of this Act, the Department is directed to brief the Committees on Appropriations on plans for carrying out the SEL competition. In addition, the Department shall provide notice to the Committees at least seven days before grantees are announced.

In addition, within the total for EIR, the Committee recommendation includes $125,000,000 for States, school districts, and school-based afterschool programs to provide or strengthen instruction in science, technology, engineering, arts, and mathematics (STEAM) fields, including computer science. In particular, these funds must be used by the Secretary to direct additional Pre-K–12 computer science and STEAM grants to underrepresented students such as minorities, girls, and youth from families living at or below the poverty line to help reduce the enrollment and achievement gap. Supporting education in STEAM fields, particularly computer science, is critical to ensuring that our nation continues to lead in innovation. As computer science is a basic skill in the 21st century global economy, the Committee encourages the Department to support Pre-K–12 computer science education to schools across the country.

Finally, within the total for EIR, the Committee includes $5,000,000 for the Department to fulfill dissemination and evaluation technical assistance contracts.

The Committee rejects the Administration's proposal to fund professional development vouchers for teachers and directs that no funds are to be used for that purpose.

Teacher and School Leader Incentive Grants

The Committee recommends $200,000,000 for the Teacher and School Leader Incentive Grants program, which is the same as the fiscal year 2019 enacted level and the 2020 budget request. This program provides grants to States, school districts, and partnerships to develop, implement, improve, or expand human capital management systems or performance-based compensation systems in schools.

American History and Civics Academies

The Committee recommends $1,815,000 for American History and Civics Academies, which the same as the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program.

American History and Civics National Activities

The Committee recommends $3,000,000 for American History and Civics National Activities, the same as the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program.

Competitive grants under Sections 2232 and 2233 of ESEA are the only dedicated Federal funding for civics and American history, helping to spur innovation and assist underserved students. The Committee urges the Secretary to conduct a competition and make awards in a timely manner.

Supporting Effective Educator Development

The Committee recommends $100,000,000 for the Supporting Effective Educator Development (SEED) grant program, which is $25,000,000 above the fiscal year 2019 level. The fiscal year 2020 budget request proposes to eliminate this program. SEED provides competitive grants to support alternative certification and other professional development and enrichment activities for teachers, principals, and other school leaders. Funds are included to fully support continuation costs for grants made in prior years.

Within SEED, $25,000,000 is provided for a new initiative to support professional development that helps educators incorporate SEL practices into teaching, and for pathways into teaching that provide a strong foundation in child development and learning, including skills for implementing SEL strategies in the classroom. The Committee recognizes the importance of integrating SEL into educator professional preparation and ongoing professional support and provides resources to expand access to these competencies. Within 90 days of enactment of this Act, the Department is directed to brief the Committees on Appropriations on plans for carrying out the SEL SEED competition. In addition, the Department shall provide notice to the Committees at least seven days before grantees are announced.

Further, the Committee directs the Department to ensure that SEED grants are awarded to a diverse set of eligible entities, including national non-profit organizations implementing evidence-based activities (as defined in section 8101(21)(A)(i) of ESEA) across a number of sites which can help bring to scale evidence-based programs of national significance across the country.

In addition, the Committee encourages the Department of Education, through the SEED program, to fund projects that increase the number of teachers with computer science certifications with a priority to increase the number of such teachers in rural public schools and public schools serving high percentages of Native students.

Charter Schools Grants

The Committee recommends $400,000,000 for Charter School Program (CSP) Grants, which is $40,000,000 below the fiscal year 2019 enacted level and $100,000,000 below the fiscal year 2020 budget request. The Committee recommends an allocation of funds within this program that aligns with ESSA.

CSP awards grants to SEAs or, if a State's SEA chooses not to participate, to charter school developers to support the development and initial implementation of public charter schools. State Facilities Incentive Grants and Credit Enhancement for Charter School Facilities awards help charter schools obtain adequate school facilities. These programs work in tandem to support the development and operation of charter schools.

The Committee is concerned by a recent report that between 2009 and 2016 as much as $1,000,000,000 of CSP funds have been wasted on schools that never opened or precipitously closed due to mismanagement. In particular, the Committee is concerned by the ED–OIG September 2018 report, "Nationwide Audit of Oversight of Closed Charter Schools," which found that the Department did not provide effective oversight of processes performed by the States

that receive CSP funding when their charter schools close. The Committee is deeply concerned that the Department does not intend to be a responsible steward of taxpayer dollars when it comes to CSP funding, as it has rejected the multiple ED–OIG audit recommendations. Therefore, the Committee directs the Department, within 180 days of the enactment of this Act, to implement all of the recommendations included in the September 2018 ED–OIG report and brief the Committees on Appropriations on plans for implementation within 30 days of enactment of this Act.

The Committee notes that ESSA requires the Department to conduct regular evaluations of State entity CSP grants. ESSA took critical steps toward strengthening oversight of charter schools by requiring State entities receiving grant funds to allocate not less than seven percent of funding received under the program to provide technical assistance to grantees to expand, open, and prepare for the operation of high-quality charter schools, including by increasing charter school and authorizer quality initiatives. ESSA reinforced that a vital part of being a high-quality charter school is "demonstrated success in increasing student academic achievement . . . for each of the subgroups of students, as defined in section 1111(c)(2) (20 U.S.C. 7221i)." ESSA also places responsibility on the State entity for ensuring that all charter schools receiving grants "meet the educational needs of their students, including children with disabilities." The Committee directs the Department to include in their evaluation of State entity Charter School grant programs the extent to which State entities are utilizing this seven percent to ensure that charter schools receiving CSP grants are equipped to appropriately serve students with disabilities and, by extension, prepared to become high-quality charter schools. Further, the Committee directs the Department to include a summary of its findings in its fiscal year 2021 Congressional Budget Justification.

In addition, the Committee notes widespread findings of waste and abuse in the for-profit virtual charter school sector and directs the Department to provide the Committees on Appropriations, within 180 days of enactment of this Act, the amount of CSP funding this sector received between fiscal years 2014 through fiscal year 2019. In addition, the Department shall provide the total funding for all of the agency's programs that goes to for-profit, virtual charter schools.

Magnet Schools Assistance

The Committee recommends $120,000,000 for the Magnet Schools Assistance program, which is $13,000,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program makes competitive grants to support the establishment and operation of magnet schools that are a part of a court-ordered or Federally-approved voluntary desegregation plan.

This year marks the 65th anniversary of the Supreme Court's landmark ruling in *Brown v. Board* that declared separate but equal public schools to be unconstitutional. Yet according to a 2016 GAO audit, public education is more segregated by race and class than at any time since 1960. The Committee is concerned by the resegregation of public schools and believes that the 2015 enactment of ESSA presents a valuable opportunity to support State and

school district efforts to improve student diversity as a means of achieving equity of educational opportunity. Further, the evidence base in support of increasing student diversity as a means of school improvement is extensive, which is why the Committee supports the Magnet School Assistance program.

The Committee recognized a longstanding barrier to the implementation of this work in the *Department of Education Appropriations Act, 2019* when it removed two decades-old prohibitions on the use of federal funds for transportation costs to carry out school desegregation efforts. However, the Committee recognizes that barriers to this work persist due to Section 426 of the General Education Provisions Act. Therefore, the Committee urges the Secretary to work with Congress to rid the federal code of this outdated prohibition.

Ready to Learn Programming

The Committee recommends $30,000,000 for Ready to Learn Programming, which is $2,259,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. This program supports the development and distribution of educational video programming for preschool and elementary school children and their parents, caregivers, and teachers.

The Ready to Learn program's broadcast mission remains vital, particularly for children in rural and low-income communities where access to broadband internet is often sparse or non-existent. For the program's fiscal year 2020 grant competition, the Committee expects the Department to issue a Notice Inviting Applications as early in fiscal year 2020 as possible. The Committee is strongly supportive of programming specially designed for nationwide distribution over public television stations' digital broadcasting channels.

Arts in Education

The Committee recommends $35,000,000 for Arts in Education, which is $6,000,000 more than the fiscal year 2019 level. The fiscal year 2020 budget request proposes to eliminate this program. This program provides competitive grants to support professional development and the development of instructional materials and programming that integrate the arts into the curricula.

Javits Gifted and Talented Education

The Committee recommends $14,000,000 for the Javits Gifted and Talented Education Program, which is $2,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funds are awarded through grants and contracts to States, schools districts, and other organizations to support a coordinated program of research, demonstration projects, innovative strategies, and other activities to help schools identify gifted and talented students and address their unique educational needs.

The Committee encourages the Department to use funds to increase the number of grants that assist schools in the identification of, and provision of services to, gifted and talented students who may not be identified and served through traditional assessment

methods, such as children with disabilities, English learners, children of color, and economically disadvantaged students.

Statewide Family Engagement Centers

The Committee recommends $15,000,000 for Statewide Family Engagement Center grants, which is $5,000,000 above fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate the program. Funds are awarded through grants to organizations to provide technical assistance and training to State and local educational agencies in the implementation and enhancement of systemic and effective family engagement policies, programs, and activities that lead to improvements in student development and academic achievement.

SAFE SCHOOLS AND CITIZENSHIP EDUCATION

Appropriation, fiscal year 2019	$190,754,000
Budget request, fiscal year 2020	200,000,000
Committee Recommendation	240,000,000
Change from enacted level	+49,246,000
Change from budget request	+40,000,000

The Committee recommends a total of $240,000,000 for activities to promote safe schools, healthy students, and citizenship education, which is $49,246,000 over the fiscal year 2019 enacted level and $40,000,000 over the fiscal year 2020 budget request.

Promise Neighborhoods

The Committee recommends $80,000,000 for Promise Neighborhoods, which is $1,746,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Promise Neighborhoods supports grants to nonprofit, community-based organizations for the development of comprehensive neighborhood programs designed to combat the effects of poverty and improve educational outcomes for children and youth, from birth through college.

School Safety National Activities

The Committee recommends $120,000,000 for School Safety National Activities, $25,000,000 above the fiscal year 2019 enacted level, and $80,000,000 less than the fiscal year 2020 budget request. The Committee's recommendation provides up to $10,000,000 for the Project School Emergency Response to Violence (Project SERV) program.

Within School Safety National Activities, the Committee includes sufficient funding to continue a demonstration program initiated in fiscal year 2019 to test and evaluate innovative partnerships between institutions of higher education and States or high-need local educational agencies to train school counselors, social workers, psychologists, or other mental health professionals qualified to provide school-based mental health services, with the goal of expanding the pipeline of these workers into low-income public elementary schools and secondary schools in order to address the shortages of mental health service professionals in such schools.

The Committee supports efforts to train school-based mental health professionals; however, more must be done to directly increase the number of well-trained mental health professionals in

school districts across the country. Research shows that building the capacity of students to develop social and emotional skills, and take responsibility for their community, can reduce bullying, violence, and aggressive behaviors, making schools safer. Increasing the number of qualified mental health professionals in schools is central to this work. With the goal of immediately addressing this urgent national need, the Committee directs the Secretary to provide no less than $25,000,000 in awards to SEAs, LEAs, or consortia of LEAs to increase the number of well-trained school counselors, social workers, psychologists, or other mental health professionals qualified to provide school-based mental health services. This competition, which would expand the number of mental health and child development experts in schools, is part of the Committee's new initiative to provide resources for SEL. To promote the sustainability of these services, the Secretary shall require that awards include a 25 percent match from grantees and require that the awards do not supplant existing mental health funding. Within 90 days of enactment of this Act, the Department is directed to brief the Committees on Appropriations on plans for carrying out the competition. In addition, the Department shall provide notice to the Committees at least seven days before grantees are announced.

The Project SERV program provides counseling and referral to mental health services as well as other education-related services to LEAs and IHEs in which the learning environment has been disrupted by a violent or traumatic crisis. The Committee directs the Department to report to the Committees on Appropriations within 180 days of enactment of this Act on how fiscal years 2017, 2018, and 2019 grant recipients used Project SERV funds; recommendations from grant recipients on how the program could be improved; and, information on how these funds helped them recover from a violent or traumatic crisis. The Department shall brief the Committees within 30 days of enactment of this Act on how it plans to carry out this directive.

The Committee is disappointed that the Department issued a Federal School Safety Commission Report about how to prevent school shootings that failed to look at the role of our nation's permissive gun laws. Further, the Committee is dismayed that the Department relied on racially-biased conclusions to justify the rescission of the 2014 "Rethink School Discipline" guidance. The Committee directs the Department, within 30 days of enactment of this Act, to remove references to the report entitled: "Prior problem behavior accounts for the racial gap in school suspensions" from all materials on the Department's website, guidance, or reports. Furthermore, the Committee directs the Department to reconsider the rescission of this guidance.

Full-Service Community Schools

The Committee recommends $40,000,000 for Full-Service Community Schools, which is $22,500,000 more than the fiscal year 2019 level. The fiscal year 2020 budget request proposes to eliminate this program. This program makes competitive grants to support school-based comprehensive services for students, families, and communities. The Full-Service Community Schools program, which supports evidence-based models to meet the holistic needs of

children and families, is part of the Committee's new initiative to provide resources for SEL. The Committee is also encouraged by research that shows comprehensive community schools as a strategy that can improve educational quality and equity for students from diverse backgrounds. Therefore, the Committee urges the Department to provide technical assistance to SEAs and LEAs that are interested in leveraging Full-Service Community Schools grants to meet local school improvement needs.

ENGLISH LANGUAGE ACQUISITION

Appropriation, fiscal year 2019	$737,400,000
Budget request, fiscal year 2020	737,400,000
Committee Recommendation	980,400,000
Change from enacted level	+242,600,000
Change from budget request	+242,600,000

This program provides formula grants to States to serve Limited English Proficient (LEP) students. Grants are based on each State's share of the National LEP students and recent immigrant student population. Funds under this account also support professional development to increase the pool of teachers prepared to serve LEP students as well as evaluation activities.

The Committee recommends $980,000,000 for English Language Acquisition in fiscal year 2020, a historic increase of $242,600,000 over both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Federal data shows that significant achievement gaps exist between English learners (ELs) and their peers; however, the funding to support these students has been flat for many years. This comes at a time when many States and school districts have experienced rapid growth in their EL populations. Providing increased resources to improve educational quality for EL students is a top priority for the Committee.

The Committee is aware that the statutory formula used to make English Language Acquisition allotments to States, set forth in Section 3111(c) of ESEA, does not fully capture children and youth who relocate from the U.S. territory of Puerto Rico, where Spanish is the primary language of instruction, to one of the 50 States or the District of Columbia. The Committee recommended funding is intended to help in addressing this need.

SPECIAL EDUCATION

Appropriation, fiscal year 2019	$13,468,728,000
Budget request, fiscal year 2020	13,451,145,000
Committee Recommendation	14,518,544,000
Change from enacted level	+1,049,816,000
Change from budget request	+1,067,399,000

Of the total amount available, $4,970,709,000 is available for obligation on July 1, 2020, and $9,283,383,000 is available for obligation on October 1, 2020. These grants help States and localities pay for a free appropriate education for students with disabilities aged 3 through 21.

Grants to States

This program provides formula grants to assist States in meeting the costs of providing special education and related services to children with disabilities. States generally transfer most of the funds to LEAs; however, they can reserve some funds for program moni-

toring, technical assistance, and other related activities. In order to be eligible for funds, States must make free appropriate public education available to all children with disabilities.

The Committee recommends $13,364,392,000 for Part B Grants to States, which is $1,000,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request, reflecting the largest increase to the program in more than a decade. The Committee is concerned that the federal share of the excess cost of educating students with disabilities has declined and notes the critical role this increase will play in helping to reverse this trend.

In March 2019, the courts ruled that the Department's delay of the 2016 Significant Disproportionality rule, which requires States to address racial disparities and discrimination in special education programs, was arbitrary and capricious, and thus illegal. The Committee is deeply concerned that the Department has not communicated to stakeholders or Congress how it is enforcing the rule, per the recent court decision. Therefore, within 30 days of enactment of this Act, the Committee directs the Department to submit a report to the Committees on Appropriations, the House Committee on Education and Labor, and the Senate Committee on Health, Education, Labor, and Pensions on how it is implementing the 2016 Significant Disproportionality rule. The report shall include which data the Department is collecting to ensure compliance and all detailed guidance provided by the Department to help States comply with provisions of the regulation. The Committee notes that its SEL initiative, as described in the School Improvement Programs, Innovation and Research, and Safe Schools and Citizenship Education accounts, aims to provide schools, school districts, and States with critical tools so that they can support all students and prevent misidentification.

The Committee includes new bill language, as requested in the fiscal year 2020 budget request, that permits States to subgrant funds that they reserve under section 611(e)(2) of the IDEA to more efficiently carry out authorized State-level activities. The Committee continues to include bill language excluding any amount by which a State's allocation is reduced for failure to meet the maintenance of effort threshold from being used to calculate the State's allocation under section 611(d) of the (IDEA) in subsequent years. The Committee also continues to include bill language directing the Secretary to distribute any reduction in a State's allocation under said section to all other States based on the formula established under section 611(d), excluding those States that are penalized.

Preschool Grants

The Committee recommends $398,400,000 for Preschool Grants, which is $7,280,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These funds provide additional assistance to States to help them make free, appropriate public education available to children with disabilities ages 3 through 5.

Grants for Infants and Families

The Committee recommends $491,300,000 for Grants for Infants and Families, which is $21,300,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These funds provide additional assistance to States to help them make free, ap-

propriate public education available to children with disabilities from birth through age 2. The Committee includes new bill language, as requested in the fiscal year 2020 budget request, to resolve implementation challenges related to funding for State Incentive Grants, a program that offers States the flexibility to expand services for children with disabilities beyond age 3.

IDEA National Activities

The Committee recommends $264,452,000 for the IDEA National Activities program, which is $21,236,000 above the fiscal year 2019 enacted level and $38,819,000 above the fiscal year 2020 budget request. The IDEA National Activities programs support State efforts to improve early intervention and education results for children with disabilities.

Educational Technology, Media, and Materials.—The Committee recommends $30,047,000 for Educational Technology, Media, and Materials, which is $2,000,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program makes competitive awards to support the development, demonstration, and use of technology and educational media activities of educational value to children with disabilities.

Parent Information Centers.—The Committee recommends $30,000,000 for Parent Information Centers, which is $2,589,000 more than fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program makes awards to parent organizations to support Parent Training and Information Centers, including community parent resource centers. These centers provide training and information to meet the needs of parents of children with disabilities living in the areas served by the centers, particularly underserved parents and parents of children who may be inappropriately identified. Technical assistance is also provided under this program for developing, assisting, and coordinating centers receiving assistance under this program. The Committee acknowledges States with significant rural areas can be harder to engage due to distance barriers and encourages the Department to assist with their efforts to support parents of children with disabilities.

Personnel Preparation.—The Committee recommends $98,310,000 for Personnel Preparation, which is $11,110,000 above both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program supports competitive awards to help address State-identified needs for qualified personnel to work with children with disabilities, and to ensure that those personnel have the necessary skills and knowledge to serve children with special needs. Awards focus on addressing the need for leadership and personnel to serve low-incidence populations. Funds are included to fully support continuation costs for grants made in prior years. The Committee notes the critical role the Personnel Preparation program plays in helping to address the nation's shortage of teachers for students with disabilities.

State Personnel Development.—The Committee recommends $40,630,000 for State Personnel Development, which is $2,000,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program supports grants to States to assist with improving personnel preparation and professional devel-

opment related to early intervention and educational and transition services that improve outcomes for students with disabilities. Funds are included to fully support continuation costs for grants made in prior years.

Technical Assistance and Dissemination.—The Committee recommends $65,465,000 for Technical Assistance and Dissemination, which is $3,537,000 above the fiscal year 2019 enacted level and $21,120,000 above the 2020 budget request. The increase over fiscal year 2019 is provided for the Special Olympics education programs, as authorized by the Special Olympics Sport and Empowerment Act of 2004, for which the Committee recommends a funding level of $21,120,000. The fiscal year 2020 budget request proposes to eliminate Special Olympics. The other programs within Technical Assistance and Dissemination provide funding for technical assistance, demonstration projects, and information dissemination. These funds support efforts by State and local educational agencies, IHEs, and other entities to build State and local capacity to make systemic changes and improve results for children with disabilities. Funds are included to fully support continuation costs for grants made in prior years.

Outlying Areas and Freely Associated States.—The Committee is aware that the Outlying Areas (OA) and Freely Associated States (FAS) may experience significant challenges in funding the excess cost of educating students with disabilities. Therefore, the Committee directs the Department to explore how it could better support OA and FAS students with disabilities, including a consideration of how secretarial discretion is used to determine OA and FAS allocations. The Department shall update the Committee on its findings, along with data on OA and FAS allocations in the fiscal year 2021 Congressional Justification.

REHABILITATION SERVICES

Appropriation, fiscal year 2019	$3,657,189,000
Budget request, fiscal year 2020	3,719,527,000
Committee Recommendation	3,752,076,000
Change from enacted level	+94,887,000
Change from budget request	+32,549,000

The programs in this account are authorized by the Rehabilitation Act of 1973 and the Helen Keller National Center Act.

Vocational Rehabilitation State Grants

The Committee recommends $3,610,040,000 in mandatory funding for Vocational Rehabilitation (VR) State Grants, which is $88,050,000 above the fiscal year 2019 enacted level and the same as the fiscal year 2020 budget request.

This program supports basic vocational rehabilitation services through formula grants to States. These grants support a wide range of services designed to help persons with physical and mental disabilities prepare for and engage in gainful employment to the extent of their capabilities. Emphasis is placed on providing vocational rehabilitation services to persons with the most significant disabilities. The Committee's recommendation provides the cost-of-living adjustment for Vocational Rehabilitation Grants to States, as authorized.

Client Assistance State Grants

The Committee recommends $15,000,000 for Client Assistance State Grants, which is $2,000,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Client Assistance State Grants support services for eligible individuals and applicants of the VR State Grants program, and other programs, projects, and services funded under the Rehabilitation Act. These formula grants are used to help persons with disabilities overcome problems with the service delivery system and improve their understanding of services available to them under the Rehabilitation Act.

Training

The Committee recommends $30,188,000 for the Training program, which is $800,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The program supports long-term and short-term training, in-service personnel training, and training of interpreters for deaf persons. Projects in a broad array of disciplines are funded to ensure that skilled personnel are available to serve the vocational needs of persons with disabilities. Funds are included to fully support continuation costs for grants made in prior years.

Demonstration and Training Programs

The Committee recommends $7,333,000 for Demonstration and Training Programs, which is $1,537,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These programs support activities designed to increase employment opportunities for individuals with disabilities by expanding and improving the availability and provision of rehabilitation and other services. The Committee recommendation includes no less than the fiscal year 2019 enacted level for parent information and training programs.

Protection and Advocacy of Individual Rights

The Committee recommends $17,650,000 for Protection and Advocacy of Individual Rights, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Grants are awarded to entities that have the authority to pursue legal, administrative, and other appropriate remedies to protect and advocate for the rights of persons with disabilities.

Supported Employment State Grants

The Committee recommends $22,548,000 for Supported Employment State Grants, which is the same as the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. These formula grants assist States in developing collaborative programs with public agencies and nonprofit agencies for training and post-employment services leading to supported employment. In supported employment programs, persons with the most significant disabilities are given special supervision and assistance to enable them to work in an integrated settings.

Independent Living Services for Older Individuals Who Are Blind

The Committee recommends $33,317,000 for Independent Living Services for Older Individuals Who Are Blind, which is the same

as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Funds are distributed to States according to a formula based on the population of individuals who are 55 or older and provide support for services to persons 55 years old or over, whose severe visual impairment makes gainful employment extremely difficult to obtain, but for whom independent living goals are feasible.

Helen Keller National Center

The Committee recommends $16,000,000 for the Helen Keller National Center for Deaf-Blind Youth and Adults, which is $2,500,000 above the fiscal year 2019 enacted level and $5,664,000 above the fiscal year 2020 budget request. These funds are used for the operation of a national center that provides intensive services for deaf-blind individuals and their families at Sands Point, New York, and a network of ten regional offices that provide referral, counseling, transition services, and technical assistance to service providers.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

Appropriation, fiscal year 2019	$242,292,000
Budget request, fiscal year 2020	216,722,000
Committee Recommendation	257,361,000
Change from enacted level	+15,069,000
Change from budget request	+40,639,000

The Committee recommends $257,361,000 for Special Institutions for Persons with Disabilities, which is $15,069,000 above the fiscal year 2019 enacted level and $40,639,000 above the fiscal year 2020 budget request.

AMERICAN PRINTING HOUSE FOR THE BLIND

Appropriation, fiscal year 2019	$30,431,000
Budget request, fiscal year 2020	25,431,000
Committee Recommendation	39,000,000
Change from enacted level	+8,569,000
Change from budget request	+13,569,000

This funding subsidizes the production of educational materials for legally blind persons enrolled in pre-college programs. The American Printing House for the Blind (Printing House), which is chartered by the Commonwealth of Kentucky, manufactures and maintains an inventory of educational materials in accessible formats that are distributed free of charge to schools and States based on the number of blind students in each State. The Printing House also conducts research and field activities to inform educators about the availability of materials and how to use them.

The Committee commends the Printing House for ensuring that students who are blind and visually impaired are able to benefit from the latest educational technologies. The Committee intends the recommended increase to assist in increasing the per-pupil expenditure.

NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

Appropriation, fiscal year 2019	$77,500,000
Budget request, fiscal year 2020	70,016,000
Committee Recommendation	80,000,000
Change from enacted level	+2,500,000
Change from budget request	+9,984,000

Congress established the National Technical Institute for the Deaf (Institute) in 1965 to provide a residential facility for postsecondary technical training and education for deaf persons with the purpose of promoting the employment of these individuals. The Institute also conducts applied research and provides training related to various aspects of deafness. The Secretary of Education administers these activities through a contract with the Rochester Institute of Technology in Rochester, New York.

GALLAUDET UNIVERSITY

Appropriation, fiscal year 2019	$134,361,000
Budget request, fiscal year 2020	121,275,000
Committee Recommendation	138,361,000
Change from enacted level	+4,000,000
Change from budget request	+17,086,000

Gallaudet is a private, non-profit educational institution Federally chartered in 1864 providing elementary, secondary, undergraduate, and continuing education for deaf persons. In addition, the University offers graduate programs in fields related to deafness for deaf and hearing students, conducts research on deafness, and provides public service programs for deaf persons.

CAREER, TECHNICAL, AND ADULT EDUCATION

Appropriation, fiscal year 2019	$1,925,686,000
Budget request, fiscal year 2020	1,842,159,000
Committee Recommendation	1,986,133,000
Change from enacted level	+60,447,000
Change from budget request	+143,974,000

This account includes vocational education programs authorized by the Carl D. Perkins Career and Technical Education Act of 2006, as recently reauthorized by the Strengthening Career and Technical Education for the 21st Century Act, and the Adult Education and Family Literacy Act (AEFLA).

Career and Technical Education: State Grants

The Committee recommends $1,300,000,000 for Career and Technical Education (CTE) State Grants, which is $37,402,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. Of these funds, $509,000,000 will become available on July 1, 2020, and $791,000,000 will become available for obligation on October 1, 2020.

State Grants support a variety of career and technical education programs developed in accordance with the State plan. This program focuses Federal resources on institutions with high concentrations of low-income students. The populations assisted by State Grants range from secondary students in prevocational courses to adults who need retraining to adapt to changing technological and labor markets. Funding for State Grants will continue support for

state-of-the-art career and technical training to students in secondary schools and community and technical colleges.

National Programs

The Committee recommends $7,421,000 for National Programs, which is the same as the fiscal year 2019 enacted level and $12,579,000 less than the fiscal year 2020 budget request. In keeping with the purpose of the National Programs, the Committee recommendation includes sufficient funding to support the conduct and dissemination of research in career and technical education.

Cybersecurity

The Committee recognizes the cybersecurity threats facing our nation's critical infrastructure sectors and the need for workers in these industries, including those who operate cyber physical systems, to be equipped with skills to keep systems secure. The Committee acknowledges that many of these operators are educated through CTE programs that prominently feature a culture of physical safety but do not incorporate cybersecurity skills. Therefore, the Committee encourages the Secretary to explore opportunities to support CTE programs that integrate cybersecurity into curricula used by students preparing for careers in critical infrastructure sectors.

Adult Basic and Literacy Education State Grants

The Committee recommends $665,000,000 for Adult Basic and Literacy Education State Grants, which is $23,045,000 more than the fiscal year 2019 enacted level and $179,151,000 above the fiscal year 2020 budget request. State formula-grants, authorized under the AEFLA, support programs to enable all adults to acquire basic literacy skills, to enable those who so desire to complete secondary education, and to make available to adults the means to become more employable, productive, and responsible citizens.

Adult Education National Leadership Activities

The Committee recommends $13,712,000 for National Leadership Activities, which is the same as the fiscal year 2019 enacted level and $60,000,000 below the fiscal year 2020 budget request. This program supports applied research, development, dissemination, evaluation, and program improvement efforts to strengthen the quality of adult education services. The Committee recommendation does not include language or funding, as requested in the budget request, to support a new pre-apprenticeship grants initiative. It is unclear whether these programs would articulate to registered apprenticeship programs or another untested, low-quality apprenticeship model.

STUDENT FINANCIAL ASSISTANCE

Appropriation, fiscal year 2019	$24,445,352,000
Budget request, fiscal year 2020	22,975,352,000
Committee Recommendation	24,937,352,000
Change from enacted level	+492,000,000
Change from budget request	+1,962,000,000

Pell Grants

The Committee recommends $22,475,352,000 in discretionary funding for the Pell Grant program, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. These funds will support Pell grants to students for the 2020–2021 academic year.

Combined with mandatory funding streams, the Committee recommendation supports a maximum Pell Grant in academic year 2020–2021 of $6,345, a $150 increase over fiscal year 2019 and the fiscal year 2020 budget request to help the award keep up with inflation.

Pell Grants help to ensure access to educational and economic opportunities for low- and middle-income students by providing need-based financial assistance. Grants are determined according to a statutory formula, which considers income, assets, household size, and the number of family members in college, among other factors. Pell Grants are the foundation of Federal postsecondary student aid programs.

The Committee recognizes the importance of programs that support Pell-eligible community college students and offer non-academic support services, including comprehensive case management and strategic emergency financial assistance, to help them complete their education. The Committee encourages the Department to look for opportunities to support these types of programs and requests an update in the fiscal year 2021 Congressional Budget Justification on options available to provide support services for these students.

The Committee is deeply concerned about high recidivism rates and a shortage of postsecondary education opportunities for low-income, incarcerated individuals in the U.S. Since 1994, States have been forced to reduce or permanently remove postsecondary correctional education programs. According to the American Correctional Association, States offering such postsecondary correctional education programs dropped from 37 in 1994 to only 12 in 2015. This is particularly troubling as our nation's federal prison population has increased by nearly 50 percent over the same period.

The Committee recognizes that access to postsecondary correctional education programs significantly reduces recidivism, helps break down racial barriers that are a common cause of disciplinary problems in the prison system, and increases access to employment for individuals who have been incarcerated. The Committee supports the work of the Department's Second Chance Pell Experiment, which is testing how expanding access to financial aid improves outcomes for individuals who are incarcerated. The Committee encourages the Department to continue the experiment and directs the Department to conduct a rigorous evaluation of the Second Chance Pell Experiment, so that Congress and stakeholders may examine the benefits of providing members of society a second chance through the Pell Grant program. To that end, the Committee recommendation includes up to $2,000,000 within the Research, Development and Dissemination program at the Institute of Education Sciences (IES) solely for the rigorous evaluation of the Second Chance Pell Experiment as announced in the Federal Register (Volume 80, Number 148 on Monday, August 3, 2015). The

Committee directs the Department's Policy and Program Studies Service to work with IES on this effort.

Federal Supplemental Educational Opportunity Grants

The Committee recommends $1,028,000,000 for this program, which is $188,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program.

Supplemental Educational Opportunity Grants (SEOG) provide funds to postsecondary institutions for need-based grants of up to $4,000 to undergraduate students, with priority given to students who are Pell-eligible. Approximately 68 percent of dependent recipients have annual family incomes under $30,000 and nearly 71 percent of independent SEOG recipients have annual family incomes under $20,000. Institutions must contribute a 25 percent match toward their SEOG allocation.

Federal Work-Study

The Committee recommends $1,434,000,000 for the Federal Work-Study program, which is $304,000,000 more than the fiscal year 2019 enacted level and $934,000,000 above the fiscal year 2020 budget request.

Federal Work-Study funds are provided through institutions to students who work part-time. The funds assist with paying for the cost of education. Approximately 3,200 colleges and universities receive funding, according to a statutory formula, and may allocate it for job location and job development centers. Work-study jobs must pay at least the Federal minimum wage and institutions must provide 25 percent of student earnings.

The Committee recommendation continues funding for the Work Colleges program, which supports institutions that require all resident students to participate in a work-learning program.

While the Federal Work-Study program currently requires participating institutions to set aside seven percent of funding for community service-based employment opportunities, the Committee is aware that some institutions of higher education are not adequately informing their students about community service-based opportunities, nor making use of employment opportunities in this sector. The Committee encourages the Department to work with institutions of higher education to ensure that schools are providing this information to students and that community service jobs provide experiential education and college-credit for students preparing for careers working with community-based organizations in low- and middle-income communities. The Committee also encourages the Department to increase the number and scope of learning partnerships between community-based nonprofits, community and/or four-year colleges and other programs that offer educational pathways to careers in community organizing and community change, especially for first generation college students.

Resources for First Generation College Students.—First generation students comprise nearly a third of all college students, yet there is a lack of dedicated support services to ensure successful outcomes for such students. Given the Department's vested interest in ensuring successful outcomes for first generation students, the Committee directs the Department to provide a report to the Com-

mittees on Appropriations, within 180 days of enactment of this Act, on improving the effectiveness of current federal policy in supporting first generation students.

For-Profit Colleges.—On March 12, 2019, the Subcommittee on Labor-HHS-Education-Related Agencies held an oversight hearing on predatory for-profit colleges. For-profit colleges receive nearly 14 percent of all Pell Grant funding, and while accounting for only 9 percent of all students enrolled in postsecondary education, they account for more than a third of all defaults. A 2012 Senate Committee on Health, Education, Labor and Pensions for-profit college investigation uncovered internal recruiting documents from institutions, including lists of who they targeted, such as "welfare moms with kids," "pregnant ladies," "military-active and retired," those who "experienced a recent death" and those who were "physically/mentally abused," among other groups. Another document the investigation uncovered was a "pain funnel" that was used to train employees on techniques to wear down prospective students and coerce them into enrolling into their institutions.

During the Subcommittee's oversight hearing, a disabled veteran testified that a for-profit college assured him that he would not take out any student loans to enroll and would only use grant aid and GI Bill benefits to attend; however, he came to find out that he now owes approximately $100,000 in student loan debt and was unable to find employment in his field of study after graduating the for-profit institution.

For-profit colleges prey on servicemembers and veterans with aggressive marketing and recruiting because of a loophole that allows for-profit colleges to exclude from the cap on federally derived institutional revenue any federal aid and educational benefits from sources other than the Department of Education. In addition, a recent study of for-profit institutions receiving GI Bill benefits found that these institutions spend little of their revenue on academic instruction, with the leading recipients spending fifteen percent or less of their revenue on instruction. The Committee directs the Secretary to submit a report to the Committees on Appropriations, within 90 days of enactment of this Act, providing an analysis of all for-profit institutions who would exceed the 90/10 federal funding limits if revenue from the VA and DoD were included in the 90/10 calculation, the same way that Title IV funds are included for the most recent academic year. In addition, the report should also include all schools that receive between 85 percent or more of their revenue from Title IV, VA and DoD sources in the most recent academic year.

In addition, the Committee is deeply concerned with the Secretary's efforts to undermine regulations designed to protect students and taxpayers, such as the Gainful Employment and Borrower Defense to Repayment regulations. While a Federal court determined that the Department illegally delayed implementation of the Borrower Defense to Repayment rule, the Committee is troubled by the Department's failure to provide relief to students who were misled and defrauded by their respective institutions.

To ensure implementation of the regulation and to provide sufficient oversight, the Committee directs the Secretary to update the Borrower Defense to Repayment Report on FSA's Data Center on a monthly basis, beginning no later than 30 days after enactment

of this Act. The Committee also directs the Secretary to submit a report to the Committees on Appropriations, within 60 days of enactment of this Act, providing the number of claims and the total amount of the loans covered by those claims by school and institutional type.

Furthermore, the Committee is concerned with the Department's failure to act in the face of precipitous school closures or to mitigate the resulting harm to students. While the Department has many tools at its disposal to prevent such closures (e.g., Heightened Cash Monitoring, letters of credit, pre-acquisition reviews, the denial of tax status conversions), it has made inadequate use of these tools. The Department failed to prevent the Dream Center Education Holdings' (DCEH) acquisition of Argosy University and the Art Institutes, resulting in the loss of approximately $16,000,000 in federal student aid, shuttered campuses, and harm to students. It failed to protect taxpayers by returning a portion of a letter of credit for the continued operation of an institution that still shut its doors on students and their educational pursuits, and it failed to protect students when it did not require a teach-out agreement for every school covered by the DCEH acquisition but still permitted continued access to taxpayer funding for these schools.

To correct these errors, the Committee directs the Department to submit a report to the Committees on Appropriations, within 90 days of enactment of this Act, outlining its plan to prevent precipitous closures in the for-profit sector. In addition, the Committee directs the Department to publish, on FSA's Data Center, the list of schools with a letter of credit in fiscal years 2017 through 2019. The Committee also directs the Department to issue a report to the Committees on Appropriations, within 90 days of enactment of this Act, outlining the process through which it approves or disapproves of a for-profit institution's conversion to not-for-profit status and a list of any staff involved in such decisions. The report must also include all institutions of higher education that have changed their for-profit status in the past three fiscal years and any action the Department has made with respect to those institutions. The Committee directs the Department to begin, within 90 days of enactment of this Act, maintaining a list of for-profit institution conversions on FSA's Data Center and to update that list on a quarterly basis.

FEDERAL DIRECT STUDENT LOAN PROGRAM ACCOUNT

The Committee recommendation includes $350,000,000 for the Federal Direct Student Loan Program Account program (also known as Temporary Extended Public Service Loan Forgiveness or TEPSLF). Congress created the Public Service Loan Forgiveness (PSLF) program in 2007 to provide relief to borrowers pursuing careers in public service. After making 120 qualifying payments, the equivalent of ten years, borrowers first became eligible for forgiveness under the program in 2017. While 53,749 borrowers believed they qualified for forgiveness and submitted applications, as of December 2018, only 338 borrowers have had their discharges processed by the Department.

TEPSLF was established to address the administrative failures of the Department and student loan servicers, who did not provide

accurate information to borrowers seeking to qualify under the PSLF program. This account provides funding for loan forgiveness for borrowers who were led to believe they qualified for PSLF by their loan servicers but were denied forgiveness. Unfortunately, the Department has failed to effectively administer this program as well. According to recent data from the Department, over 38,000 borrowers applied for relief under TEPSLF, but only 262 applications were approved.

The Committee is also concerned with the Department's reversal of employment certifications under the program. The Committee directs the Department to develop comprehensive guidance and instructions regarding PSLF and require loan servicers in the current servicing environment to provide consistent and accurate information to borrowers. Furthermore, the Committee directs the Department to refrain from reversing qualifying employment determinations, except for administrative error, and further directs the Department to calculate multiple payments made to a loan servicer, within 15 days of the scheduled payment due date, that combine to result in the payment amount total required for the payment period, to be counted as a qualifying payment toward the 120 payments required by the program.

The Committee directs the Secretary to update the PSLF Report on FSA's Data Center on a monthly basis within 30 days after enactment of this Act. The Committee also directs the Secretary to include updates for TEPSLF within the updated reports.

To help improve implementation of the program, the Committee recommendation includes new bill language to ease a bureaucratic hurdle that requires borrower's most recent monthly payments and the monthly payments made a year before they applied be greater than what their monthly payment would have been under an income-driven repayment plan. The bill also requires the Secretary to increase awareness of the program and inform all borrowers repaying their loans under PSLF and in the incorrect repayment program about TEPSLF requirements.

STUDENT AID ADMINISTRATION

Appropriation, fiscal year 2019	$1,678,943,000
Budget request, fiscal year 2020	1,812,000,000
Committee Recommendation	1,678,943,000
Change from enacted level	– – –
Change from budget request	– 133,057,000

Programs administered under the Student Aid Administration (SAA) include Pell Grants, campus-based programs, Teacher Education Assistance for College and Higher Education grants, and Federal student loan programs.

Salaries and Expenses.—Within the total provided for SAA, the Committee recommends $698,943,000 for salaries and expenses, which is the same as the fiscal year 2019 enacted level and $582,338,000 below the fiscal year 2020 request.

Loan Servicing Activities.—Within the total provided for SAA, the Committee recommends $980,000,000 for Loan Servicing Activities, which is the same as the fiscal year 2019 enacted level and $449,281,000 above the fiscal year 2020 request.

On March 6, 2019, the Subcommittee on Labor-HHS-Related Agencies held an oversight hearing on loan servicing, during which

the Subcommittee heard from a panel of experts, including the Assistant Inspector General for Audit in the Office of the Inspector General at the Department. The Assistant Inspector General testified regarding its February 2019 audit report on Federal Student Aid (FSA) that between 2015 and 2017, loan servicers were out of compliance in 61 percent of the monitoring reports analyzed. According to the OIG report, "FSA management rarely used available contract accountability provisions to hold servicers accountable for instances of noncompliance," and "by not holding servicers accountable for instances of noncompliance with Federal loan servicing requirements, FSA did not provide servicers with an incentive to take actions to mitigate the risk of continued servicer noncompliance that could harm students."

Noncompliance has serious consequences for borrowers. Such noncompliance includes loan servicers failing to provide borrowers with accurate information about their repayment options, miscalculating how much students should be paying through income-driven repayment, and putting borrowers into forbearance without first informing them of other, less costly options.

The Committee is concerned regarding FSA's lack of rigorous oversight of student loan servicers and that FSA does not utilize all tools at its disposal to safeguard taxpayer dollars nor prioritize the best interests of student loan borrowers. Therefore, the Committee recommendation includes new bill language requiring the Department to award student loan servicer contracts on the basis of their past performance and compliance with Federal and state law. It also requires the Department to prioritize services to help borrowers avoid delinquency or default in the FSA Next Generation Processing and Servicing Environment. New bill language is also included to require the Department to include accountability measures that account for the performance of the portfolio and contractor compliance with FSA guidelines.

As outlined in the Department's July 2016 memorandum on Federal student loan servicing policy direction (also known as the Mitchell memo), the Committee directs the Department to require that servicers "take the necessary steps to ensure internal processes support robust oversight and accountability," "that borrowers can expect their servicers to support external compliant handling functions administered by other federal and state agencies," and to strengthen "transparency through expanded publication of aggregate data on student loan and servicer performance." As part of the Department's efforts to strengthen transparency, the Committee directs the Department to work with the National Center for Education Statistics (NCES) to create a public-facing website—similar to the NCES DataLab—that allows for the automatic crosstabulation of data and the calculation of other statistics, including aggregate student loan outcomes, portfolio composition, repayment rates, and the disposition of complaints.

As the Department continues to implement its new servicing environment, the Committee also directs FSA to develop new oversight procedures for loan servicers' communications with borrowers, including e-mail and text message interactions, and online chat functions.

In addition, the Committee directs the Secretary, within 90 days of enactment of this Act, to make publicly available on its website

a detailed list of all individual requests made to the Department under the "Enforcement Disclosure" provision of the Statement of Records Notice for the Direct Loan Program (Common Services For Borrowers, 18–11–16), the Department's policy that governs this disclosure, and a description of the Department's response to those requests, including the number of days it took the Department to acknowledge such a request and the number of days it took the Department to respond to such a request in full.

Federal Student Loan Consolidation to Private Loans.—The Committee is concerned by the aggressive marketing materials private lenders send to Federal student loan borrowers that advertise loan consolidation services without also mentioning the repayment and forgiveness benefits that may be lost by consolidating a Federal student loan into a private loan. The Committee encourages the Department to examine this issue and submit a report to the Committees on Appropriations within 90 days of enactment of this Act, containing language for possible disclaimers that the Department may include in its materials, alerting Federal student loan borrowers to the potential loss of benefits should they consolidate Federal loans with a private lender.

Federal Perkins Loan Cancellations.—The Committee is concerned with the Department's implementation of the wind-down of the Federal Perkins Loan program and directs the Department to issue guidance to institutions of higher education regarding loan cancellations and reimbursements no later than January 1, 2020.

HIGHER EDUCATION

Appropriation, fiscal year 2019	$2,312,356,000
Budget request, fiscal year 2020	1,534,487,000
Committee Recommendation	2,743,533,000
Change from enacted level	+431,177,000
Change from budget request	+1,209,046,000

Strengthening Institutions

The Committee recommends $110,000,000 for the Part A, Strengthening Institutions program, which is $10,125,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funding supports competitive grants for general operating subsidies to institutions with below average educational and general expenditures per student and significant percentages of low-income students. Funds may be used for faculty and academic program development, management, joint use of libraries and laboratories, acquisition of equipment, and student services.

Developing Hispanic-Serving Institutions

The Committee recommends $150,000,000 for the Hispanic-Serving Institutions program, which is $25,585,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this program and proposes to consolidate it and the following programs into a single grant program for Minority Serving Institutions (MSI): (1) Strengthening Alaska Native and Native Hawaiian Serving Institutions, (2) Strengthening Predominantly Black Institutions, (3) Strengthening Asian American and Native American Pacific Islander Serving Institutions, (4) Strengthening Native American Serving Nontribal Institutions,

and (6) Promoting Postbaccalaureate Opportunities for Hispanic Americans. The Committee rejects this budget proposal and does not include funds for such purpose.

The Hispanic-Serving Institutions program provides operating subsidies to schools that serve at least 25 percent Hispanic students. Funds may be used for faculty and academic program development, management, joint use of libraries and laboratories, acquisition of equipment, and student services.

Promoting Postbaccalaureate Opportunities for Hispanic Americans

The Committee recommends $30,000,000 for the Promoting Postbaccalaureate Opportunities for Hispanic Americans program, which is $18,837,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this program and proposes to consolidate it into a single MSI grant program, which the Committee does not support. This program provides expanded postbaccalaureate educational opportunities for the academic attainment of Hispanic and low-income students. In addition, it expands academic offerings and enhances program quality at IHEs educating the majority of Hispanic college students.

Strengthening Historically Black Colleges and Universities

The Committee recommends $375,000,000 for Strengthening Historically Black Colleges and Universities (HBCUs), which is $92,580,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides operating subsidies to accredited HBCUs that were established prior to 1964, with the principal mission of educating black Americans. Funds are distributed through a formula grant based on the enrollment of Pell Grant recipients, number of graduates, and the number of graduates entering graduate or professional schools in which blacks are underrepresented.

Physician Assistant Education.—The Committee encourages the Secretary to explore strategies for expanding Physician Assistant (PA) programs at HBCUs, Predominantly Black Institutions (PBIs) and HSIs. Developing PA programs at these higher education institutions will ensure a more diverse PA workforce to promote health equity and more effectively provide care in recognition of the changing demographics of the nation's patient populations. The Committee directs the Secretary to provide a report to Committees on Appropriations, no later than 180 days after enactment of this Act, detailing recommendations for promoting PA programs at HBCUs, PBIs, and HSIs through the Department's grant initiatives.

Strengthening Historically Black Graduate Institutions

The Committee recommends $125,000,000 for the Strengthening Historically Black Graduate Institutions (HBGIs) program, which is $51,963,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The program provides five-year grants to 18 postsecondary institutions that are specified in section 326(e)(1) of the Higher Education Act. Institutions may use funds to build endowments, provide scholarships and fellowships, and to assist students with the enrollment and completion of postbaccalaureate and professional degrees.

The Committee is concerned with the historic decline of African-Americans pursuing doctorate degrees in the health professions. HBGIs have awarded the vast majority of all doctoral degrees in medicine, dentistry, pharmacy, veterinary medicine, and engineering to African Americans and are well poised to mitigate the adverse effects stemming from the lack of African American doctors. The Committee urges the Department, through the White House Initiative on HBCUs, to convene a summit of HBGI grantees to assess how to increase the number of African Americans receiving doctoral level degrees in the health sciences. The Committee urges the Secretary to develop a plan for increasing such representation, including how it will assist HBGI stakeholders in carrying out this work, and to submit this plan to the Committees on Appropriations within 180 days after enactment of this Act.

Strengthening Predominantly Black Institutions

The Committee recommends $22,000,000 for the Strengthening Predominantly Black Institutions (PBIs) program, which is $10,525,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this program and proposes to consolidate it into a single MSI grant program, which the Committee does not support. This program provides grants to PBIs to increase their capacity to serve the academic needs of students.

Strengthening Asian American and Native American Pacific-Islander-Serving Institutions

The Committee recommends $17,864,000 for the Asian American Pacific-Islander program, which is $14,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this program and proposes to consolidate it into a single MSI grant program, which the Committee does not support. This program provides grants to undergraduate institutions that have an undergraduate student enrollment of at least 10 percent Asian American or Native American Pacific-Islander.

Strengthening Alaska Native and Native Hawaiian-Serving Institutions

The Committee recommends $18,100,000 for the Strengthening Alaska Native and Native Hawaiian-Serving Institutions program, which is $2,170,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this program and proposes to consolidate it into a single MSI grant program, which the Committee does not support. Through the Strengthening Alaska Native and Native Hawaiian-Serving Institutions program, the Department provides grants to assist institutions of higher education in serving Alaska Native and Native Hawaiian students.

Native American Serving Non-Tribal Institutions

The Committee recommends $5,000,000 for the Native American Serving Non-Tribal Institutions program, which is $1,136,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this program and proposes to consolidate it into a single MSI grant program, which the Com-

mittee does not support. This program makes grants to IHEs at which enrollment is at least 10 percent Native American students and that are not Tribally Controlled Colleges or Universities.

Strengthening Tribally Controlled Colleges and Universities

The Committee recommends $51,000,000 for the Strengthening Tribally Controlled Colleges and Universities (TCCUs) program, which is $19,146,000 more than the fiscal year 2019 enacted level and $23,401,000 above the fiscal year 2020 budget request. This program makes grants to TCCUs to increase their capacity to serve the academic needs of students.

Strengthening HBCU Masters Programs

The Committee recommends $13,500,000 for the Strengthening HBCU Masters Programs, which is $4,843,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program provides grants to specified colleges and universities making a substantial contribution to graduate education opportunities at the Masters level in mathematics, engineering, the physical or natural sciences, computer science, information technology, nursing, allied health, or other scientific disciplines.

International Education and Foreign Language Studies

Domestic Programs.—The Committee recommends $80,400,000 for the Domestic Programs of the International Education and Foreign Languages Studies program, which is $15,297,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Authorized by title VI of the Higher Education Act, these programs include National resource centers, foreign language and area studies fellowships, undergraduate international studies and foreign language programs, international research and studies projects, business and international education projects, international business education centers, language resource centers, American overseas research centers, and technological innovation and cooperation for foreign information access.

Overseas Programs.—The Committee recommends $8,730,000 for the Overseas Programs, which is $1,669,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. Funding for these programs support group projects, faculty research, special bilateral research, and doctoral dissertation research conducted abroad.

The Committee recognizes the importance of study abroad programs for the necessary preparation and development of American students enrolled in institutions of higher education to be effective members of a globally competitive 21st century workforce. Study abroad programs provide these students with critical knowledge, skills, and experiences in leadership, intercultural understanding, global learning, and foreign languages.

Postsecondary Programs for Students with Intellectual Disabilities

The Committee recommends $11,800,000 for Postsecondary Programs for Students with Intellectual Disabilities, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program supports grants to create model tran-

sition programs into higher education for students with intellectual disabilities.

Minority Science and Engineering Improvement

The Committee recommends $13,000,000 for the Minority Science and Engineering Improvement Program, which is $1,865,000 more than the fiscal year 2019 enacted level and $3,352,000 above the fiscal year 2020 budget request. This program awards grants to improve mathematics, science, and engineering programs at institutions serving primarily minority students and to increase the number of minority students who pursue advanced degrees and careers in those fields.

Tribally Controlled Postsecondary Career and Technical Institutions

The Committee recommends $10,000,000 for this program, which is $436,000 more than the fiscal year 2019 enacted level and $1,714,000 above the fiscal year 2020 budget request. This program provides competitive grants to Tribally controlled postsecondary career and technical institutions to provide career and technical education to Native American students.

Federal TRIO Programs

The Committee recommends $1,160,000,000 for TRIO programs, which is $100,000,000 above the fiscal year 2019 enacted level and $210,000,000 above the fiscal year 2020 budget request. The TRIO programs provide a variety of outreach and support services to encourage low-income, often first-generation college students to enter and complete college. Discretionary grants of up to four or five years are awarded competitively to IHEs and other nonprofit organizations. At least two thirds of the eligible participants in TRIO must be low-income, first-generation college students.

The Committee rejects the fiscal year 2020 budget proposal to move the TRIO programs from competitive grant programs to a single State formula program. Further, the Committee directs the Department to allocate funds such that all current grantees receive an increase in their grant award and to avoid imposing additional requirements as a condition for grantees to receive such increases. Additionally, the Department is directed to allocate a substantial portion of the funding to increase the number and size of the new grants awarded in the Student Services Support competition that will occur in fiscal year 2020.

Gaining Early Awareness and Readiness for Undergraduate Programs

The Committee recommends $395,000,000 for Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP), which is $35,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes no funds for this program and to consolidate it into a new State formula-based TRIO program. The Committee rejects this proposal. GEAR UP provides grants to States and partnerships of low-income middle and high schools, IHEs, and community organizations to target entire grades of students and give them the skills, encouragement, and scholarships to pursue successfully postsecondary education.

The Committee continues bill language allowing the Department to maintain the GEAR UP evaluation set-aside at 1.5 percent to work with the GEAR UP community and grantees to standardize data collection, including through the use of third-party data systems.

Graduate Assistance in Areas of National Need

The Committee recommends $24,047,000 for the Graduate Assistance in Areas of National Need (GAANN) program, which is $1,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. GAANN provides fellowships through grants to degree granting postsecondary institutions, for students of high financial need studying in areas of national need. The Department consults with appropriate other agencies and organizations to designate the fields of study "in areas of national need." Recent examples include computer and informational sciences, engineering, nursing, and physics.

Teacher Quality Partnership Grants

The Committee recommends $53,092,000 for the Teacher Quality Partnerships (TQP) program, which is $10,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget proposes to eliminate this program. The TQP program helps improve the quality of teachers working in high-need schools and early childhood education programs by creating model teacher preparation and residency programs.

The Committee recognizes the importance of state teaching fellowship programs and encourages the Department to continue to work with eligible state teaching fellowship programs that wish to apply for Teacher Quality Partnership program.

The Committee recognizes the needs of the nation's growing English learner (EL) student population, including a robust teacher workforce equipped to teach them. The Committee is concerned by the shortage of EL teachers in the majority of States, as well the academic achievement gap between ELs and their native English-speaking peers and the Committee encourages the Secretary to work with grantees in strengthening and developing high-quality teacher preparation programs that enable graduates to meet the needs of EL students.

Child Care Access Means Parents in School

The Committee recommends $60,000,000 for the Child Care Access Means Parents in School program, which is $10,000,000 more than the fiscal year 2019 enacted level and $44,866,000 above the fiscal year 2020 budget request. This program makes competitive grants to colleges and universities to support or establish a campus-based childcare program, primarily serving the needs of low-income students enrolled at these institutions.

Fund for the Improvement of Postsecondary Education

The Committee recommendation includes $10,000,000 for the Centers of Excellence for Veterans Student Success Program, as authorized by section 873 of the Higher Education Act. Funding will support the first competition for this program since fiscal year

2015. The fiscal year 2020 budget request does not include funding for this program. Over one million veterans attend college every year and often need assistance receiving their benefits or transitioning to student life. Veteran Student Centers provide a one-stop-shop for academic support, networking opportunities, peer mentorship, financial assistance, counseling, and career services.

Of these funds, the Committee directs the Secretary to issue grants to institutions of higher education or consortia of institutions of higher education seeking to establish, maintain, or improve Veteran Student Centers—a dedicated physical meeting space on the campus of an institution of higher education that provides student veterans, members of the Armed Forces serving on active duty, or members of a reserve component of the Armed Forces with a centralized office for veteran student support services, including comprehensive academic and tutoring services, peer-to-peer tutoring and academic mentorship, and is staffed by at-least one trained veteran employee.

Such centers must also provide student-veterans with assistance relating to transitioning from the military to student life or civilian workforce, networking opportunities with other veterans in the community, understanding and obtaining benefits provided by the institution of higher education, federal government, and State for which such students may be eligible, understanding how to succeed in the institution of higher education, including by understanding academic policies, the course selection process, and institutional policies and practices related to the transfer of academic credits, and provide an understanding of disability-related rights and protections under the Americans with Disabilities Act of 1990 and section 504 of the Rehabilitation Act of 1973. The Committee directs the Department to brief the Committees on Appropriations no later than 60 days after enactment of this Act on its plan to carry out this competition and to notify the Committees no later than 15 days in advance of making awards to grantees.

HOWARD UNIVERSITY

Appropriation, fiscal year 2019	$236,518,000
Budget request, fiscal year 2020	221,821,000
Committee Recommendation	250,000,000
Change from enacted level	+13,482,000
Change from budget request	+28,179,000

Howard University is a "Research I" university located in the District of Columbia and provides undergraduate liberal arts, graduate and professional instruction to students.

Within the amount provided, the Committee recommends $27,325,000 for the Howard University Hospital, which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request. The hospital serves as a major acute and ambulatory care center for the District of Columbia, and functions as a teaching facility.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS PROGRAM

Appropriation, fiscal year 2019	$435,000
Budget request, fiscal year 2020	435,000
Committee Recommendation	435,000
Change from enacted level	– – –
Change from budget request	– – –

Previously, these programs helped to ensure that postsecondary institutions were able to make necessary capital improvements to maintain and increase their ability to provide a high-quality education. Since 1994, no new loans have been made, and the Department's role has been to manage the outstanding loans.

HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL FINANCING PROGRAM ACCOUNT

Appropriation, fiscal year 2019	$40,484,000
Budget request, fiscal year 2020	40,484,000
Committee Recommendation	50,484,000
Change from enacted level	+10,000,000
Change from budget request	+10,000,000

The Committee recommends $50,484,000 for the HBCU Capital Financing program, which is $10,000,000 above the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program is authorized under part D of Title III of the HEA and makes capital available for the repair and renovation of facilities at historically black colleges and universities. In exceptional circumstances, capital provided under the program can be used for construction or acquisition of facilities.

Within the total provided for this program, the Committee recommendation includes $334,000 for the administrative expenses to carry out the program and $20,150,000 for loan subsidy costs that will be sufficient to guarantee up to $212,100,000 in new loans in fiscal year 2020.

The Committee recommendation also includes $20,000,000 to continue loan deferments requested in fiscal year 2018 for private HBCUs and includes new bill language and an increase of $10,000,000 over fiscal year 2019 enacted level and the fiscal year 2020 budget request to provide loan deferments for public HBCUs.

INSTITUTE OF EDUCATION SCIENCES

Appropriation, fiscal year 2019	$615,462,000
Budget request, fiscal year 2020	521,563,000
Committee Recommendation	650,000,000
Change from enacted level	+34,538,000
Change from budget request	+128,437,000

The Committee recommends $650,000,000 for the Institute of Education Sciences (IES), an increase of $34,538,000 over the fiscal year 2019 enacted level and $128,437,000 more than the fiscal year 2020 budget request.

Research, Development, and Dissemination

The Committee recommends $205,400,000 for Research, Development, and Dissemination, which is $12,705,000 more than the fiscal year 2019 enacted level and $17,900,000 above the fiscal year 2020 budget request. Of the increase, the Committee recommendation includes up to $2,000,000 solely for the rigorous evaluation of the Second Chance Pell Experiment as announced in the Federal Register (Volume 80, Number 148 on Monday, August 3, 2015). The Committee also directs IES to work with the Department's Policy and Program Studies on this effort. The Committee also directs IES to submit the evaluation to the Committees on Appropriations, within 30 days of completing the evaluation. This account supports research, development, and national dissemination activities that

are aimed at expanding fundamental knowledge of education and promoting the use of research and development findings in the design of efforts to improve education.

Statistics

The Committee recommends $117,500,000 for the activities of the National Center for Education Statistics (NCES), which is $8,000,000 more than the fiscal year 2019 enacted level and $5,000,000 more than the fiscal year 2020 budget request. Statistics activities are authorized under title I of the Education Sciences Reform Act of 2002. The Center collects, analyzes, and reports statistics on all levels of education in the United States. Activities are carried out directly and through grants and contracts and include projections of enrollments, teacher supply and demand, and educational expenditures. NCES also provides technical assistance to State and local educational agencies and postsecondary institutions.

Data for Puerto Rico.—The Committee recommends that NCES collect and publish data for Puerto Rico in the same manner it collects and publishes data for States.

Regional Educational Laboratories

The Committee recommends $60,400,000 for Regional Educational Laboratories (RELs), which is $4,977,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate this program. This program supports a network of 10 laboratories that promote the use and development of knowledge and evidence to increase student learning and further school improvement efforts.

The Committee notes the critical role RELs play in helping to translate education research to policymakers and practitioners, which assists SEAs and LEAs in implementing ESSA and providing a high-quality education for more children.

Research in Special Education

The Committee recommends $61,000,000 for Research in Special Education, which is $5,000,000 more than the fiscal year 2019 enacted level and $7,000,000 above the fiscal year 2020 budget request. This program supports competitive awards to produce and advance the use of knowledge to improve services and results for children with disabilities. The program focuses on producing new knowledge, integrating research and practice, and improving the use of knowledge.

Special Education Studies and Evaluations

The Committee recommends $11,674,000 for Special Education Studies and Evaluations, which is $856,000 more than the fiscal year 2019 enacted level and the fiscal year 2020 budget request. This program awards competitive grants, contracts and cooperative agreements to assess the implementation of the IDEA and the effectiveness of State and local efforts to provide special education and early intervention programs and services to infants, toddlers, and children with disabilities.

Statewide Data Systems

The Committee recommends $35,281,000 for Statewide Data Systems, which is $3,000,000 more than the fiscal year 2019 enacted level. The fiscal year 2020 budget proposes to eliminate this program. Competitive grants under this authority are made to SEAs to help them manage, analyze, disaggregate and use student data consistent with the ESEA.

Assessment

The Committee recommends $158,745,000 for Assessment, which is the same as the fiscal year 2019 enacted level and $2,000,000 above the fiscal year 2020 budget request. This amount includes $7,745,000 for the National Assessment Governing Board (NAGB), which is the same as both the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

The National Assessment of Educational Progress (NAEP) is the only nationally representative and continuing survey of educational ability and achievement of American students. The primary goal of the assessment is to determine and report the status and trends of the knowledge and skills of students, subject by subject. Subject areas assessed in the past have included reading, writing, mathematics, science, history, citizenship, literature, art, and music. The NAEP is operated by contractors through competitive awards made by the NCES. The NAGB formulates the policy guidelines for the program.

DEPARTMENTAL MANAGEMENT

Appropriation, fiscal year 2019	$616,143,000
Budget request, fiscal year 2020	635,418,000
Committee Recommendation	623,418,000
Change from enacted level	+7,275,000
Change from budget request	−12,000,000

These activities are authorized by the Department of Education Organization Act (P.L. 96–88) and include costs associated with the management and operation of the Department as well as separate costs associated with the Office for Civil Rights and the Office of Inspector General.

Program Administration

The Committee recommends $430,000,000 for Program Administration, which is the same as the fiscal year 2019 enacted level and $17,000,000 below the fiscal year 2020 budget request. These funds support the staff and other costs of administering programs and activities at the Department. Items include personnel compensation, health, retirement, and other benefits as well as travel, rent, telephones, utilities, postage fees, data processing, printing, equipment, supplies, technology training, consultants, and other contractual services.

Communication with the Committee.—There are concerns about the breakdown of the normal flow of information from some areas of the Department to the Committee. The Committee expects the Department to correct these shortcomings. If no improvement is made, the Committee will evaluate the resources spent on the offices and staff involved in the unacceptable delays regarding the

transmission of information to the Committee and whether the resources are better allocated to other areas of the bill.

Acting Inspector General.—The Committee is concerned by the Department's recent effort to replace its Acting Inspector General (IG) with a career attorney from the Department, especially when that attorney served as the Acting Secretary of Education. While this decision was reversed after the Administration received correspondence from Members of Congress, questions about the process by which the replacement of the Acting IG occurred remain. The Committee directs the Department to respect the independence of the OIG, to refrain from influencing or undermining any audit or investigation conducted by the OIG, and to respond promptly to all Congressional inquiries concerning the replacement of the Acting IG.

Accrediting Council for Independent Colleges and Schools.—Accrediting agencies provide an important role in guarding access to federal student aid and ensuring that students receive a quality education. The Committee is therefore deeply concerned with the Secretary's decision to recognize the Accrediting Council for Independent Colleges and Schools (ACICS). ACICS has a history of certifying predatory for-profit institutions, and an extensive review conducted in 2018 by Department staff showed that ACICS failed to meet 57 of 93 federal standards. Within 90 days of enactment of this Act, the Committee directs the Secretary to certify in a report to the Committees on Appropriations, with detailed justifications, citing relevant supporting documents, that ACICS demonstrated compliance with all 57 of those standards before recognizing ACICS beyond the current 12-month conditional period.

Advertising Contracts.—The Committee understands that, as the largest advertiser in the United States, the Federal Government should work to ensure fair access to its advertising contracts for small disadvantaged businesses and businesses owned by minorities and women. The Committee directs the Department to include the following information in its fiscal year 2021 Congressional Budget Justification: Expenditures for fiscal year 2019 and expected expenditures for fiscal years 2020 and 2021, respectively, for (1) all contracts for advertising services; and (2) contracts for the advertising services of (I) socially and economically disadvantaged small business concerns (as defined in section 8(a)(4) of the Small Business Act (15 U.S.C. 637(a)(4)); and (II) women- and minority-owned businesses.

Randolph-Sheppard Act.—The Committee is aware that the Department is facing challenges in meeting its responsibilities to administer and oversee the Randolph-Sheppard program as prescribed by the Randolph-Sheppard Act of 1936. These challenges include convening arbitration panels in a timely manner, reviewing and approving state licensing agencies' policy changes, and working with state licensing agencies to approve routine expenditures associated with the program. The Department shall report to the Committees on Appropriations no later than one year from the date of enactment of this Act on the status of all pending arbitration, state licensing agency policy reviews, and prior approval procedures.

Open Data Reporting.—The Committee encourages the Secretary, to the extent practicable, to disclose information through the College Navigator website, or its successor website, and to publish

such information using an open source description language for the purpose of comparing institutions of higher education, programs and credentials.

Teacher Shortages.—The Committee is concerned by the wide-ranging teacher shortages experienced in many States and districts across the country. In particular, the Committee is concerned by national research which shows that rural districts, where salaries are lower and districts are forced to rely on provisionally licensed teachers, can be hit particularly hard by teacher shortages. Similarly, in school districts with higher minority student populations, shortages have necessitated lower standards for teacher certification and other professional qualifications. Accordingly, the Committee directs the Policy and Program Studies Service of the Department, in partnership in the Department of Labor, to provide no later than 270 days after enactment of this Act, a report on teacher shortages. The report should examine trends in teacher shortages and factors contributing to challenges with teacher recruitment and retention. The analysis should include, but not be limited to an examination of the following factors: personnel to support students with disabilities; geography; the characteristics of communities impacted, including student demographics, area median income, or per-pupil spending; the diversity of the educator workforce; and issues related to licensure. The report shall also include information on shortages of educational support staff, which may include school leaders. The report shall also identify areas of chronic teacher shortages and their underlying causes. The report shall examine ways to improve the effectiveness of current federal policy in preventing and responding to teacher shortages as well as make recommendations on potential federal interventions to improve teacher recruitment and retention.

Lead Testing in Schools.—The Committee strongly agrees with recommendations from a 2018 GAO report, *Lead Testing of School Drinking Water Would Benefit from Improved Federal Guidance,* that the Assistant Secretary for Elementary and Secondary Education should collaborate with the Environmental Protection Agency (EPA) to disseminate guidance related to lead testing and remediation in schools. The Committee is aware that EPA has made available updated guidance and web-based toolkits for lead testing and remediation in schools. The Committee is also aware that EPA is soliciting applications from education officials to provide grant funds to assist States and local education agencies with testing and remediation efforts. The Committee directs the Department to coordinate with EPA in disseminating this new guidance and resources within 90 days of enactment of this Act. Further, the Committee encourages the Department to assist school systems seeking to remediate lead contamination in working with EPA. Further, the Committee is aware that many States and local jurisdictions may have their own requirements and guidance in place regarding lead testing in schools. The Committee encourages the Department to coordinate and assist in the sharing of best practices among States and local school systems. The Committee expects the Department to provide biannual reports on the Department's efforts in these regards.

Military Student Identifier—The Committee notes that ESSA recognized military-connected students as a distinct subgroup of stu-

dents. More than 80 percent of military-connected children attend public schools. Students with parents/guardians who serve full time in the military move and change schools frequently. In addition, they experience separations from a parent/guardian due to their parents' service to the U.S. Military. The Military Student Identifier provides educators, school leaders and policy makers with critical information to personalize attention and direct resources to better support military dependent children. Current law directs the military student identifier towards the children of active duty families, leaving out the nearly one-half million children of the reserve component, both National Guard and Reserves. The Committee supports efforts to address the unique needs of children whose parents/guardians serve in the National Guard and reserve component.

Youth Apprenticeship Programs.—The Committee directs the Department to submit a report to the Committees on Appropriations on high school youth apprenticeship programs within 180 days of enactment of this Act. The Department should focus on registered apprenticeship programs that have a documented industry partnership, that incorporate practical and classroom-based instruction oriented towards industry standards, and that culminate in a portable, industry-recognized credential or postsecondary credit. The report should also be made publicly available on the Department's website.

Evidence-based Grant Making.—The Committee is supportive of efforts by the Department to consider evidence of effectiveness in grant competitions.

Investments in Impoverished Areas.—The Committee supports targeted investments in impoverished areas, particularly in persistent poverty counties and in other high-poverty census tracts. To understand how anti-poverty programs funded through the Department are serving these particular areas, the Committee directs the Department to submit a report to the Committees on Appropriations on the percentage of funds allocated by such programs in fiscal years 2017, 2018 and 2019 and estimates for fiscal year 2020 to areas serving students living in persistent poverty counties, as defined as a county that has had 20 percent or more of its population living in poverty over the past 30 years, as measured by the 1990 and 2000 decennial censuses and the most recent Small Area Income and Poverty estimates, and high-poverty areas, as defined as any census tract with a poverty rate of at least 20 percent as measured by the 2013–2017 5-year data series available from the American Community Survey of the Census Bureau. The Department shall report this information to the Committees within 90 days of such data being available and provide a briefing to the Committees not later than 180 days of enactment of this Act on how the Department is carrying out this directive.

Customer Service.—The Committee continues to support efforts to improve customer service in accordance with Executive Order 13571—Streamlining Service Delivery and Improving Customer Service. The Committee directs the Secretary to develop standards to improve customer service and incorporate the standards into the performance plans required under 31 U.S.C. 1115.

Performance Measures.—The Committee directs the Department to comply with title 31 of the United States Code, including the de-

velopment of organizational priority goals and outcomes such as performance outcome measures, output measures, efficiency measures, and customer service measures.

OFFICE FOR CIVIL RIGHTS

Appropriation, fiscal year 2019	$125,000,000
Budget request, fiscal year 2020	125,000,000
Committee Recommendation	130,000,000
Change from enacted level	+5,000,000
Change from budget request	+5,000,000

The Office for Civil Rights (OCR) is responsible for enforcing laws that prohibit discrimination on the basis of race, color, national origin, sex, disability, and age in all programs and institutions that receive funds from the Department. These laws extend to State educational agencies, local educational agencies, and institutions of higher education, including proprietary schools. They also extend to State rehabilitation agencies, libraries, museums, and other institutions receiving Federal funds.

The Committee recommendation includes $130,000,000, an increase of $5,000,000 over the fiscal year 2019 enacted level and fiscal year 2020 budget request. The Committee directs OCR to use this appropriation to increase its level of full-time equivalent (FTE) employment in order to effectively and timely investigate complaints; execute and accurately report the civil rights data collection; thoroughly monitor corrective actions of institutions and meet other critical workloads.

The Joint Statement accompanying the Department of Education Appropriations Act, 2019, directed the Department to submit quarterly reports on FTE levels and attrition. The first report was submitted to the Committees on Appropriations on February 11, 2019. In the report, OCR showed 510 FTE for the first quarter of 2019. Yet, the fiscal year 2020 budget request shows the number of FTE in fiscal year 2019 at 625. The Committee is concerned about this discrepancy and expects the Department to explain how it onboarded 115 FTE between the time the first report was submitted and the end of fiscal year 2019 in the fiscal year 2021 Congressional Budget Justification.

FTE and Attrition Report.—The Committee directs the Department to provide the Committees on Appropriations a report, not later than 30 days after the conclusion of each quarter, detailing the number of full-time equivalent employees and attrition by principal office and appropriations account.

Expulsions and Suspensions.—The Committee is deeply concerned about expulsions and suspensions that occur in preschool settings and K–3 classrooms, particularly given the racial and gender disparities that exist. These outcomes are problematic given the research that indicates these practices can adversely affect development, health, and education outcomes. The Committee strongly urges the Office for Civil Rights (OCR) to collect data annually on expulsions and suspensions in preschool, elementary and secondary school settings, disaggregated by race/ethnicity, sex, disability status, and English Learner status.

OCR should also submit to the Committees on Appropriations, no later than 180 days after the enactment of this Act, and annually thereafter, a report detailing school discipline in all preschool and

K–3 classrooms, including disaggregated data and any disparities by subgroup in disciplinary rates. The report should also include specific recommendations given to schools on expulsions and suspensions—including evidence-based interventions, consumer education specific to each school, and opportunities to improve school climate. The Committee urges OCR to provide technical assistance to help prevent or severely limit expulsion and suspension practices in preschool settings and K–3 classrooms, eliminate disparities in the provision of discipline, and ensure the safety and well-being of all young children.

Data Collection on Access to Computer Science Education in K–12.—The Committee encourages OCR to obtain data through the Civil Rights Data Collection on access to K–12 computer science education and computational thinking education, and to submit a report of its findings, within 180 days of enactment of this Act, to the Committees on Appropriations and the authorizing committees of jurisdiction. The data obtained should include the number of computer science and computational thinking classes offered in elementary and secondary schools, the number of students enrolled in these classes disaggregated by race, sex, disability according to the Individuals with Disabilities Education Act, and English Learner status, and the number of teachers in elementary and secondary schools with computer science certifications.

Title IX.—The Committee recognizes that the Department failed to fully estimate the burden of the Notice of Proposed Rulemaking on Title IX, Nondiscrimination on the Basis of Sex in Education Programs or Activities Receiving Federal Financial Assistance, as required by law, and omitted significant costs to students and schools. The Committee further recognizes that OCR failed to engage in required consultation with stakeholders. The proposed changes to Title IX go against Congressional intent of the civil rights law and the mission of the OCR.

English Learners.— The Committee encourages the Department to conduct and publish a study, within 180 days of enactment of this Act, on the effectiveness of English Learner (EL) programs in delivering adequate services and accommodations to qualified students as guaranteed under civil rights provisions. The Committee encourages the Department, within 180 days of enactment of this Act, to report outcomes in English language acquisition, proficiency levels in math and reading nationwide, and other State accountability indicators in each of the 50 States, the District of Columbia, and the U.S. Territories, as required through Section 1111(h)(1)(C) of the ESEA, with data disaggregated by the major race and ethnicity categories in the Decennial Census as compared to students never eligible for EL designation. Where such data is available, the Committee encourages the Department to include disaggregated data by EL subgroups (current, long-term, former, opt-out, recent arriving and late arriving ELs) and note in which States gaps in the data exist. The Committee is also concerned about the high volume of Title VI complaints related to ELs.

OFFICE OF INSPECTOR GENERAL

Appropriation, fiscal year 2019	$61,143,000
Budget request, fiscal year 2020	63,418,000
Committee Recommendation	63,418,000
Change from enacted level	+2,275,000
Change from budget request	– – –

This Office has authority to inquire into all program and administrative activities of the Department as well as into related activities of grant and contract recipients. It conducts audits and investigations to determine compliance with applicable laws and regulations, to check alleged fraud and abuse, efficiency of operations, and effectiveness of results.

Use of Resources.—The Committee urges the Office of Inspector General to ensure its focus remains on the primary missions of the Office. The Committee cautions the Office, when receiving requests from the Department for investigations, to consider the most effective and best use of its resources.

GENERAL PROVISIONS

Sec. 301. The Committee continues a provision related to the implementation of programs of voluntary prayer and meditation in public schools.

(TRANSFER OF FUNDS)

Sec. 302. The Committee modifies a provision providing the Secretary of Education with the authority to transfer up to one percent of discretionary funds between appropriations, provided that no appropriation is increased by more than three percent by any such transfer. This transfer authority is available only to meet emergency needs, and may not be used to create any new program or fund a project or activity that is not otherwise funded in this Act. All transfers are subject to notification to the Committees on Appropriations of the House of Representatives and the Senate.

Sec. 303. The Committee modifies a provision allowing ESEA funds consolidated for evaluation purposes to be available from July 1, 2020 through September 30, 2021.

Sec. 304. The Committee continues a provision allowing certain institutions to continue to use endowment income for student scholarships.

Sec. 305. The Committee modifies a provision extending the authorization of the National Advisory Committee on Institutional Quality and Integrity.

Sec. 306. The Committee modifies a provision extending the authority to provide account maintenance fees to guaranty agencies for Federal student loans.

Sec. 307. The Committee continues a provision allowing administrative funds to cover outstanding Perkins loans servicing costs.

(RESCISSION)

Sec. 308. The Committee modifies a provision rescinding fiscal year 2020 mandatory funding to offset the mandatory costs of increasing the discretionary Pell award.

Sec. 309. The Committee continues a provision clarifying current law regarding data sharing with organizations assisting students in applying for financial aid.

Sec. 310. The Committee modifies a provision regarding Public Service Loan Forgiveness.

Sec. 311. The Committee continues a provision regarding outreach to borrowers and the Public Service Loan Forgiveness program.

TITLE IV—RELATED AGENCIES

COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$8,250,000
Budget request, fiscal year 2020	9,400,000
Committee Recommendation	9,000,000
Change from enacted level	+750,000
Change from budget request	−400,000

The Committee believes oversight is necessary to ensure the program is operating in accordance with statutory requirements that blind or other severely disabled individuals provide at least 75 percent of hours or direct labor required for the production or provision of the products or services to Federal government agencies. To ensure the Committee for Purchase from People Who Are Blind or Severely Disabled (AbilityOne Commission) maintains its oversight capacity, the Committee continues bill language requiring the AbilityOne Commission to establish written agreements with central nonprofit agencies. The written agreements ensure the AbilityOne Commission can conduct appropriate audit, oversight, and reporting functions in accordance with standard Federal procurement policies.

The Committee supports opportunities for the Commission to assert its authority in the oversight of the AbilityOne program, however, is concerned about language in the cooperative agreements between the Commission and the Central Nonprofit Agencies (CNAs) requiring CNAs to report to the Commission any meetings with key stakeholders, including Congressional members and staff. The Committee requests additional information on the justification for and necessity of this language.

Requested Reports.—The Committee continues to request the reports listed under this heading in House Report 115–244. Such reports shall be submitted to the Committee no later than 60 days after the end of each fiscal quarter.

Office of Inspector General.—The Committee recommends not less than $1,650,000 for the Office of Inspector General.

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

OPERATING EXPENSES

Appropriation, fiscal year 2019	$1,082,958,000
Budget request, fiscal year 2020	93,663,000
Committee Recommendation	1,138,106,000
Change from enacted level	+55,148,000
Change from budget request	+1,044,443,000

Volunteers in Service to America

The Committee recommends $95,000,000 for Volunteers in Service to America (VISTA), which is an increase of $2,636,000 over the fiscal year 2019 enacted level and $90,335,000 above the fiscal year 2020 budget request. This program provides capacity building for small, community-based organizations with a mission of combating poverty. VISTA members raise resources, recruit, and organize volunteers, and establish and expand programs in housing, employment, health, and economic development.

National Senior Volunteer Corps

The Committee recommends $221,517,000 for the National Senior Volunteer Corps programs, which is $13,400,000 more than the fiscal year 2019 enacted level and $221,184,000 above the fiscal year 2020 budget request. Senior Corps is a collection of programs that connect Americans older than the age of 55 with opportunities to contribute their job skills and expertise to community projects and organizations.

The Committee intends for all funding to be used to support programs and volunteers. The recommendation provides sufficient funding to increase the stipend for the Foster Grandparents Program and Senior Companion Program to $3.00/hour for the first time. The Committee notes that the last stipend increase to the current level of $2.65/hour occurred in 2002.

The funding breakout by program is as follows:

National Senior Volunteer Corps:	FY 2020 Committee
Foster Grandparents Program	$118,799,000
Senior Companion Program	50,863,000
Retired Senior Volunteer Program	51,855,000

AmeriCorps State and National Grants

The Committee recommends $450,010,000 for AmeriCorps State and National Grants, which is $25,000,000 more than the fiscal year 2019 enacted level and $447,786,000 above the fiscal year 2020 budget request. This program provides funds to local and national organizations and agencies to address community needs in education, public safety, health, and the environment.

Innovation, Assistance, and Other Activities

The Committee recommends $8,600,000 for Innovation, Assistance, and Other Activities, which is $1,000,000 more than the fiscal year 2019 enacted level and $8,600,000 more than the fiscal year 2020 budget request.

The Committee acknowledges the value of the Volunteer Generation Fund (VGF) in supporting State service commissions to identify effective approaches to increase the number of volunteers, strengthening the capacity of volunteer connector organizations to recruit and retain volunteers, and prioritizing support for service-learning and youth service opportunities from kindergarten to college, and develop strategies to effectively engage volunteers to solve local problems. The Committee recommendation includes an additional $1,000,000 for the VGF.

The Committee continues to support the September 11 National Day of Service and Remembrance and the Martin Luther King, Jr. National Day of Service—two important national events.

Evaluation

The Committee recommends $4,000,000 for evaluation, which is the same as the fiscal year 2019 enacted level. The fiscal year 2020 budget request does not include funding for this purpose and proposes to eliminate the agency. These funds support research on program effectiveness.

National Civilian Community Corps

The Committee recommends $33,000,000 for National Civilian Community Corps, which is $1,000,000 more than the fiscal year 2019 enacted level and $10,117,000 above the fiscal year 2020 budget request. This program supports residential, team-based service opportunities for individuals aged 18–24.

State Commission Administrative Grants

The Committee recommends $17,538,000 for State Commission Support Grants, which is the same as the fiscal year 2019 enacted level and $17,538,000 above the fiscal year 2020 budget request. Funds are used for formula grants to support State oversight of service programs.

PAYMENT TO THE NATIONAL SERVICE TRUST

Appropriation, fiscal year 2019	$206,842,000
Budget request, fiscal year 2020	– – –
Committee Recommendation	218,691,000
Change from enacted level	+11,849,000
Change from budget request	+218,691,000

The National Service Trust makes payments for Segal education awards, pays interest that accrues on qualified student loans for AmeriCorps participants during terms of service in approved national service positions, and makes other payments entitled to members who serve in the programs of the Corporation for National and Community Service.

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$83,737,000
Budget request, fiscal year 2020	59,300,000
Committee Recommendation	83,737,000
Change from enacted level	– – –
Change from budget request	+24,437,000

Evidence-based Grant Making.—The Committee is supportive of efforts by the Corporation to consider evidence of effectiveness in grant competitions.

Transformation and Sustainability Plan.—The Committee remains concerned over the Corporation's plan to drastically alter and consolidate 46 State offices into eight regional offices. The Committee has heard many concerns from various stakeholders, including Members of Congress, about the hasty implementation of the plan and the disruption of support for grantees and services in local communities.

The Committee is deeply concerned that such a significant undertaking is occurring at a time when the fiscal year 2020 budget request proposes to eliminate the Corporation, which the Committee rejects. The fiscal years 2019 and 2020 budget requests do not provide sufficient explanation or rationale for the restructuring, making it difficult to conduct oversight. The Committee notes that the Corporation's OIG also has concerns regarding the Corporation's capacity to execute the proposed changes in the 18 month timeframe and the risks of doing so. In a separate message to the Committees on Appropriations regarding the fiscal year 2020 budget request, the OIG stated, "Aspects of this plan present heightened risks of fraud, waste and mismanagement that warrant particularly close oversight."

The Committee is disappointed that the Corporation is moving forward with its regionalization plan despite opposition among stakeholders and serious concerns from the OIG. The Committee directs the Corporation to cease implementation of the regionalization plan until it participates in meaningful engagement with those impacted; conducts a cost-benefit analysis of piloting the regionalization plan compared to full-scale implementation; and, conducts an analysis of the impact of State office closures on grantees, current services and staff in each respective State where a closure occurs, including an analysis of whether there is reasonable proximity between each State that has experienced a closure and the new regional office serving that State and submits the information, including details on further stakeholder engagement, to the Committees on Appropriations within 30 days of enactment of this Act.

OFFICE OF INSPECTOR GENERAL

Appropriation, fiscal year 2019	$5,750,000
Budget request, fiscal year 2020	4,258,000
Committee Recommendation	6,013,000
Change from enacted level	+263,000
Change from budget request	+1,755,000

ADMINISTRATIVE PROVISIONS

Sec. 401. The Committee continues a provision requiring CNCS to make any significant changes to program requirements or policy through rulemaking.

Sec. 402. The Committee continues a provision related to National Service Trust minimum share requirements.

Sec. 403. The Committee continues a provision related to donations.

Sec. 404. The Committee continues a provision related to veterans.

Sec. 405. The Committee continues a provision related to criminal history background checks.

Sec.406. The Committee continues a provision related to 1,200 hour service positions.

CORPORATION FOR PUBLIC BROADCASTING

Appropriation, fiscal year 2021	$445,000,000
Budget request, fiscal year 2022	– – –
Committee Recommendation	495,000,000
Change from enacted level	+50,000,000
Change from budget request	+495,000,000

The Committee recommends $495,000,000 as an advance appropriation for fiscal year 2022, an increase of $50,000,000 over the fiscal year 2021 advance. The fiscal year 2020 budget request proposes to eliminate the Corporation for Public Broadcasting (CPB) and requests $30,000,000 for this purpose. In addition, the Committee recommendation includes $20,000,000 in fiscal year 2020 for continued support of CPB in replacing and upgrading the public broadcasting interconnection system and further investing in system-wide infrastructure and services.

National Minority Consortia.—According to the Public Broadcasting Act, one of the greatest priorities of public broadcasting is to address the "needs of unserved and underserved audiences, particularly children and minorities." Programming that reflects the histories and perspectives of diverse racial and ethnic communities is a core value and responsibility of public broadcasting, therefore the Committee supports continued investment in the National Minority Consortia to help accomplish this goal.

Continued Access to Public Broadcasting.—The Committee recognizes the importance of continued access to public broadcasting in local communities. The Committee encourages federally-funded public radio stations to engage in public-private partnerships with state and local entities, including nonprofits, in this effort. The Committee requests CPB include in its fiscal years 2021/2023 Congressional Budget Justification information on how public private partnerships may be used to ensure continued access to public broadcasting in underserved areas.

FEDERAL MEDIATION AND CONCILIATION SERVICE

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$46,650,000
Budget request, fiscal year 2020	47,200,000
Committee Recommendation	48,200,000
Change from enacted level	+1,550,000
Change from budget request	+1,000,000

The Federal Mediation and Conciliation Service promotes labor-management cooperation through mediation and conflict resolution services to industry, government agencies, and communities.

FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$17,184,000
Budget request, fiscal year 2020	17,184,000
Committee Recommendation	17,184,000
Change from enacted level	– – –
Change from budget request	– – –

The Federal Mine Safety and Health Review Commission is an independent adjudicative agency that provides administrative trial and appellate review of legal disputes arising under the Federal Mine Safety and Health Act of 1977.

INSTITUTE OF MUSEUM AND LIBRARY SERVICES

OFFICE OF MUSEUM AND LIBRARY SERVICES: GRANTS AND ADMINISTRATION

Appropriation, fiscal year 2019	$242,000,000
Budget request, fiscal year 2020	23,000,000
Committee Recommendation	257,000,000
Change from enacted level	+15,000,000
Change from budget request	+234,000,000

Within the total for the Institute of Museum and Library Services (IMLS), the Committee recommends the following amounts:

Budget Activity	FY 2020 Committee
Library Services Technology Act:	
Grants to States	$170,803,000
Native American Library Services	5,063,000
National Leadership: Libraries	13,406,000
Laura Bush 21st Century Librarian	10,000,000
Museum Services Act:	
Museums for America	28,899,000
Native American/Hawaiian Museum Service	1,772,000
National Leadership: Museums	8,313,000
African American History and Culture Act:	
Museum Grants for African American History and Culture	2,731,000
Museum and Library Services Act General Provisions:	
Research, Analysis and Data Collection	2,013,000
Program Administration	14,000,000

Library Services and Technology

The Grants to State Library Agencies program provides funds to State Library Administrative Agencies using a population-based formula.

Program Administration

The Committee recommends $14,000,000 for Program Administration, which is the same as the fiscal year 2019 enacted level. The fiscal year 2020 budget request proposes to eliminate IMLS. These funds provide administrative and management support for all programs administered by IMLS. The Committee also includes $2,013,000 for IMLS' activities in policy, research, and data collection, including functions formerly conducted by the National Commission on Libraries and Information Science.

Women in the Arts.—The Committee encourages IMLS to provide assistance to major, independent, non-profit organizations that are qualified to support and whose sole purpose is dedicated to promoting women in the arts. To remain independent, such organizations should be unaffiliated with universities or their museums and should have a proven track record of advocating for women in the arts through the receipt of private funds.

Holocaust Education and Survivor Stories.—The Committee acknowledges that preserving and presenting the living memories of Holocaust survivors in an interactive format can educate future generations about the atrocities of the Holocaust. The Committee is aware that the number of survivors in the United States is diminishing every month due to the advanced age of the survivors, and studies have shown that memories and understanding of the Holocaust are fading from culture. Given the rising trends of hate

and intolerance, the Committee commends and supports the work Museums are doing across the country to preserve the memories and to educate the public of the Holocaust.

Community Wellbeing.—The Committee recognizes the reach and impact of libraries and museums in their communities. Programs such as the Community Catalyst Initiative, Applying Promising Practices for Small Libraries, Museums Inspired, and the Understanding the Social Wellbeing Impacts of the Nation's Libraries and Museums, provide essential and actionable information so that more Americans are able to benefit from the economic, social, and educational services of museums and libraries. The Committee encourages the Institute of Museum and Library Services to continue its essential grantmaking, research, and evaluation activities in a manner that improves community wellbeing, especially in rural and under-served areas.

MEDICARE PAYMENT ADVISORY COMMISSION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$12,545,000
Budget request, fiscal year 2020	12,645,000
Committee Recommendation	12,645,000
Change from enacted level	+100,000
Change from budget request	– – –

The Medicare Payment Advisory Commission (MedPAC) is an independent agency tasked with advising the Congress on issues affecting the Medicare program. In addition to advising on payments to private health plans participating in Medicare and providers in Medicare's traditional fee-for-service program, MedPAC is also responsible for providing analysis on access to care, quality of care, and other issues affecting Medicare.

MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$8,480,000
Budget request, fiscal year 2020	9,000,000
Committee Recommendation	8,480,000
Change from enacted level	– – –
Change from budget request	–520,000

The Medicaid and CHIP Payment and Access Commission (MACPAC) is an independent agency tasked with advising the Congress on issues affecting Medicaid and the State Children's Health Insurance Program (CHIP). MACPAC conducts policy and data analysis on Medicaid and CHIP to support policymakers and support program accountability.

NATIONAL COUNCIL ON DISABILITY

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$3,250,000
Budget request, fiscal year 2020	3,450,000
Committee Recommendation	3,450,000
Change from enacted level	+200,000
Change from budget request.	– – –

The National Council Disability (NCD) is an independent Federal agency charged with advising the President, Congress, and other Federal agencies regarding policies, programs, practices, and procedures that affect people with disabilities. NCD is comprised of a team of Presidential and Congressional appointees, an Executive Director appointed by the Chair, and a full-time professional staff.

NATIONAL LABOR RELATIONS BOARD

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$274,224,000
Budget request, fiscal year 2020	241,550,000
Committee Recommendation	341,500,000
Change from enacted level	+67,276,000
Change from budget request	+99,950,000

The National Labor Relations Board (NLRB) is an independent agency responsible for enforcing U.S. labor law related to collective bargaining and unfair labor practices, including the National Labor Relations Act (NLRA) of 1935.

The Committee is concerned that NLRB field staff have declined by 17 percent over just two years. Further, the Committee is concerned that multiple regional director positions remain unfilled. To restore the ability of the NLRB to fulfill its statutory mission, the Committee provides an increase of $67,276,000 over fiscal year 2019 and $99,950,000 over the fiscal year 2020 budget request. With this increase, the Committee directs the NLRB to hire at least 300 additional regional field staff and fill all open regional director positions.

The Committee is also concerned by questions of conflicts of interest surrounding NLRB board members. The Committee requests a report no less than 90 days from the enactment of this Act from the NLRB on the findings, recommendations, and implementation of its Comprehensive Internal Ethics and Recusal Review, specifically all actions that have been taken to ensure case decisions and rulemakings are compliant with all applicable ethics standards and any failures to comply with those standards.

To protect public trust in NLRB's work and decision-making, the Committee directs the board to make board member recusal obligations publicly available within 60 days of the enactment of this Act and updated monthly thereafter. In addition, within the funding increase for NLRB, $1,000,000 above amounts provided in fiscal year 2019 is directed to the NLRB Office of Inspector General (OIG) to investigate the process, findings, and recommendations surrounding the board's comprehensive internal ethics and recusal review. The Committee expects the increase in funds to help support an additional FTE to assist with this investigation.

The Committee is deeply concerned that the current board majority routinely breaks with the NLRB's traditional practice of providing public notice and an invitation to file briefs before reconsidering significant precedent. To restore public participation in critical NLRB matters and to promote informed-decision making, the Board shall immediately resume its long-standing practice of providing public notice and an invitation to file briefs before issuing decisions unless, within 90 days of enactment of this Act, it provides a report to the Committees on Appropriations with an expla-

nation of the Board's current method for deciding to invite public notice and briefing.

On March 13, 2019, the NLRB Office of the General Counsel (OGC) issued Operations-Management Memorandum 19–05, which discouraged Regional Directors from issuing subpoenas when investigating whether to issue a complaint. The General Counsel has a Congressional mandate to investigate unfair labor practices by collecting documentary evidence, summoning witnesses, and taking testimony—a statutory responsibility, which includes and often requires the issuance of subpoenas. Therefore, within 90 days of enactment of this Act, the Committee directs the General Counsel, along with the Divisions of Operations Management and Legal Counsel, to provide the Committees on Appropriations with an impact analysis of the memorandum's policies on the quality of NLRB investigations of charges.

The Committee is deeply concerned about the impact of Presidential Executive Order 13843 on the judicial independence of administrative law judges (ALJs). The Order eliminates the competitive hiring process for ALJs and has the potential impact of converting independent adjudicators to political appointees, undermining longstanding principles of fair and unbiased consideration of matters of vital importance to the American people. ALJs must be independent decision-makers and it is the Committee's expectation that NLRB maintain the highest standards for appointment of ALJs. Within 60 days of enactment of this Act, NLRB is directed to provide to the Committees on Appropriations and Oversight and Government and Reform of the House of Representatives a report explaining the process, qualification standards, and criteria used to recruit, evaluate and hire ALJs under the executive order.

The Committee is deeply concerned by several recent decisions that weaken workers' collective bargaining rights. PCC Structurals (365 NLRB No. 160; Dec. 15, 2017) allows employers to more easily gerrymander union elections by requiring the NLRB to include employees who did not previously express an interest in the union. Further, SuperShuttle DRW, (367 NLRB No. 75; Jan. 25, 2019) allows employers to more easily classify their workers as independent contractors instead of employees by deviating from the common law standard for determining an employee and instead focusing on whether the worker has "entrepreneurial opportunity." This test has no basis in the NLRA or the common law. In addition, the Committee is concerned by the NLRB's joint employer proposed rulemaking, which will make it easier for unscrupulous employers to sidestep their legal responsibility to bargain with their employees. The Committee strongly urges the NLRB to abandon any proposal that weakens workers' rights while protecting bad actors from liability. The Committee is also deeply concerned that the NLRB failed to hold any public hearings as part of its joint employer rulemaking process and strongly urges the Board to do so prior to publishing any final rule.

NATIONAL MEDIATION BOARD

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$13,800,000
Budget request, fiscal year 2020	13,800,000
Committee Recommendation	15,800,000
Change from enacted level	+2,000,000
Change from budget request	+2,000,000

The National Mediation Board is an independent agency that coordinates labor-management relations within the U.S. railroads and airlines industries.

The Committee recognizes the continued success of the National Mediation Board in mediating collectively bargained contracts in the rail and air travel industries. The Committee is concerned that there is a lag in mediating cases, increasing the length of time cases are being addressed and cleared. The Committee recommends an additional $2,000,000 over the fiscal year 2019 enacted level and the fiscal year 2020 budget request, of which $1,000,000 is directed for the administration of the agency and its staffing needs. The remaining $1,000,000 is to be used specifically to supplement, not supplant, existing resources devoted to Section 3 arbitrator salaries and expenses and address the backlog of Section 3 arbitration cases at the NMB. The Committee has prioritized these additional funds in order to allow the Board to accomplish its statutory mission in a timelier manner. The funding increase is not intended to support rulemaking activities or the development of regulatory changes.

OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

SALARIES AND EXPENSES

Appropriation, fiscal year 2019	$13,225,000
Budget request, fiscal year 2020	13,225,000
Committee Recommendation	13,225,000
Change from enacted level	– – –
Change from budget request	– – –

The Occupational Safety and Health Review Commission is an independent Federal agency, providing administrative trial and appellate review, created to decide contests of citations or penalties resulting from OSHA inspections of American work places.

RAILROAD RETIREMENT BOARD

DUAL BENEFITS PAYMENTS ACCOUNT

Appropriation, fiscal year 2019	$19,000,000
Budget request, fiscal year 2020	16,000,000
Committee Recommendation	16,000,000
Change from enacted level	−3,000,000
Change from budget request	– – –

This appropriation is authorized by the Railroad Retirement Act of 1974 to fund vested dual benefits received by railroad retirees who, under prior law, would have become covered by both the railroad retirement system and the Social Security system because railroad retirement was not fully coordinated with Social Security

from 1937 to 1974. The Committee includes a provision permitting a portion of these funds to be derived from income tax receipts on dual benefits as authorized by law. The Railroad Retirement Board estimates that approximately $1,000,000 may be derived in this manner.

FEDERAL PAYMENT TO THE RAILROAD RETIREMENT ACCOUNTS

Appropriation, fiscal year 2019	$150,000
Budget request, fiscal year 2020	150,000
Committee Recommendation	150,000
Change from enacted level	– – –
Change from budget request	– – –

LIMITATION ON ADMINISTRATION

Appropriation, fiscal year 2019	$123,500,000
Budget request, fiscal year 2020	137,216,000
Committee Recommendation	135,500,000
Change from enacted level	+12,000,000
Change from budget request	– 1,716,000

The Committee includes $13,460,000 for the implementation of information technology systems modernization efforts. Within 180 days of enactment of this Act, the Railroad Retirement Board is directed to submit a comprehensive update to the Committees on Appropriations of the House of Representatives and the Senate on project status, timelines to completion, and total cost of development.

LIMITATION ON THE OFFICE OF INSPECTOR GENERAL

Appropriation, fiscal year 2019	$11,000,000
Budget request, fiscal year 2020	11,000,000
Committee Recommendation	11,500,000
Change from enacted level	+500,000
Change from budget request	+500,000

SOCIAL SECURITY ADMINISTRATION

PAYMENTS TO SOCIAL SECURITY TRUST FUNDS

Appropriation, fiscal year 2019	$11,000,000
Budget request, fiscal year 2020	11,000,000
Committee Recommendation	11,000,000
Change from enacted level	– – –
Change from budget request	– – –

This appropriation provides reimbursement to the Social Security trust funds for non-trust fund activities.

SUPPLEMENTAL SECURITY INCOME PROGRAM

Appropriation, fiscal year 2019	$41,366,203,000
Budget request, fiscal year 2020	41,832,000,000
Committee Recommendation	41,938,540,000
Change from enacted level	+572,337,000
Change from budget request	+106,540,000

The Committee recommends $19,900,000,000 in advance funding for the first quarter of fiscal year 2021, as requested.

Research and Demonstration

Section 1110 of the Social Security Act provides authority to the Social Security Administration (SSA) for conducting research and demonstration projects related to SSA's programs.

Within the appropriation for Supplemental Security Income (SSI), the Committee recommends $101,000,000 for research and demonstration activities, which is the same as the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

Administration

Within the appropriation for SSI, the Committee recommends $4,510,540,000, which is $412,663,000 below the fiscal year 2019 enacted level and $106,540,000 above the fiscal year 2020 budget request. This funding is for payment to the Social Security trust funds for SSI's share of the administrative expenses of SSA.

LIMITATION ON ADMINISTRATIVE EXPENSES

Appropriation, fiscal year 2019	$11,058,945,000
Budget request, fiscal year 2020	11,060,000,000
Committee Recommendation	11,358,945,000
Change from enacted level	+300,000,000
Change from budget request	+298,945,000

The Limitation on Administrative Expenses (LAE) funds the administrative and operational costs for administering the Old Age and Survivors Insurance, Disability Insurance, and Supplemental Security Income programs, and associated costs for support to the Centers for Medicare and Medicaid Services in administering their programs.

The Committee includes an increase of $300,000,000 for additional hires and resources to improve public service at SSA field offices and direct service operations, with $22,000,000 specifically for hiring at teleservice center operations. The Committee remains concerned about the excessive waiting times, benefit delays, and service problems faced every day by Americans who are trying to access their earned benefits. It is the Committee's expectation that this funding will be sufficient to replace all losses in the field offices, teleservice and processing centers, and build additional capacity so that offices can function at appropriate levels.

The Committee acknowledges SSA's progress in reducing excessive and harmful delays for people waiting for a hearing before an Administrative Law Judge and is pleased to hear that SSA is on track to eliminate its hearing backlog in fiscal year 2021. This progress has been facilitated by $290,000,000 in dedicated funding provided in fiscal years 2017 through 2019, and the Committee designates $50,000,000 in this bill for activities that will continue to address the disability hearing backlog.

The bill continues to provide $45,000,000 in dedicated funding for Information Technology Modernization.

Administrative Law Judge Selection.—The Committee is deeply concerned about the impact of Presidential Executive Order 13843 on the judicial independence of administrative law judges (ALJs). The Order eliminates the competitive hiring process for ALJs and has the potential impact of converting independent adjudicators to political appointees, undermining longstanding principles of fair and unbiased consideration of matters of vital importance to the

American people. ALJs must be independent decision-makers and it is the Committee's expectation that SSA maintain the highest standards for appointment of ALJs. The Committee directs SSA to submit a report within 60 days of enactment of this Act to the Committees on Appropriations, Ways and Means, and Oversight and Reform, explaining the process, qualification standards, and criteria used to recruit, evaluate and hire ALJs under the executive order.

Beneficiary Education.—The Committee recommends SSA include more complete information in the annual Social Security Benefit Verification Letter on the coverage decisions individuals have when turning age 65 and enrolling, or re-enrolling, in Medicare through informational materials shared with individuals as they become Medicare-eligible. The Verification Letter should provide a brief description of the process for obtaining information and enrolling in either Original Medicare or Medicare Advantage, as well as information on, and the enrollment process for, additional coverage, including through a Medicare Advantage -Part D plan, stand-alone Part D prescription drug plan, or supplemental coverage under Part G. The Verification Letter should include language that refers beneficiaries to Centers for Medicare & Medicaid Services' online, print, telephone and in-person resources.

Collective Bargaining.—The Committee strongly supports the rights of federal employees to bargain collectively. Presidential Executive Orders 13836, 13837, and 13839 undermine those rights, which is why a Federal court invalidated many provisions of those executive orders and enjoined Federal agencies from implementing them. The Committee is very concerned about reports that SSA, during recent contract negotiations with its union, insisted on proposals that closely resemble the invalidated provisions of the executive orders. The Committee understands that several of the articles still in dispute have been referred to the Federal Service Impasses Panel (FSIP) and are awaiting a final determination. Within 30 days of enactment of this Act, the Committee directs SSA to submit a report and brief the Committees on Appropriations, Ways and Means, and Oversight and Reform on all articles in dispute with the unions as of April 16, 2019. The report shall include the modifications SSA made to each of the articles in dispute in order to comply with the court order.

Additionally, it is the Committee's understanding that parties can continue to discuss open matters while awaiting a final determination from FSIP. The Committee directs SSA to do so and to engage the Federal Mediation and Conciliation Service (FMCS) in order to address these issues through mediation.

SSA is directed to resume contract negotiations with its union in good faith and to present proposals that do not mirror District Court discredited provisions of the aforementioned executive orders. If after a reasonable period of good faith bargaining has been conducted, FMCS determines that a contract impasse exists, the parties will jointly select an independent mediator-arbitrator from a list of mediators-artibrators supplied by the FMCS. Such mediator-arbitrator will conduct mediatiion and, if needed, an arbitration hearing with the authority to decide the final contract.

Headache Disorders.—The Committee supports efforts to ensure consistent decision-making with regard to how to appropriately and

correctly apply the current Listing of Impairments to headache disorders-related impairments.

Information Technology.—The Committee continues to monitor the Information Technology Modernization Plan and remains concerned that while SSA undertakes information technology upgrades and improvements, the agency must also maintain an appropriate balance between SSA's various service delivery options. As the agency continues to focus on modernizing information technology and systems, the Committee strongly encourages SSA to focus on enhancements that positively affect service to the public and add efficiency to administration of its programs. In addition, the Committee encourages involvement of agency front-line staff, those most familiar with the use of such programs, in all aspects of development, testing and deployment. The Committee requests an update of the plan referenced under this heading in House Report 114–699.

Mailing Paper Statements.—The Committee is concerned that SSA is not mailing Social Security benefits and earning statements to all contributors aged 25 and older not yet receiving benefits, in accordance with Section 1143 of the Social Security Act (42 U.S.C. 1320b–13). The Administration is directed to brief the Committee within 60 days of enactment of this Act on progress to date on implementing the law as written, and to include in its fiscal year 2021 Congressional Budget Justification an estimate of costs associated with the mailing of paper statements as required by law.

Muscular Dystrophy.— The Committee requests SSA include in the fiscal year 2021 Congressional Budget Justification the rate at which persons with Duchenne and Becker Muscular Dystrophy utilize SSA programs, particularly those focused on promoting employment and community independence such as the Ticket to Work Program.

Occupational Information System.—SSA is developing a new Occupational Information System (OIS) that will replace the Dictionary of Occupational Titles as the primary source of occupational information used in SSA's disability adjudication process. The Committee directs SSA to continue to include in its annual Report on the Occupational Information System Project the estimated costs for each future fiscal year until the project is expected to be completed, as well as the estimated cost for a five-year data refresh cycle.

Pilot Program Metrics.—The Committee appreciates the information on pilot program metrics provided in the fiscal year 2020 Congressional Budget Justification. The Committee expects that, prior to undertaking any new pilots, SSA will ensure that it has developed a research design that identifies a clear purpose for the pilot, key objectives and an evaluation plan, including adequate metrics to determine the pilot's effectiveness. Metrics should be specific, quantifiable measures—accompanied by specific goals for the measures—that can be used to evaluate success. The Committee reminds SSA that it uses the term "pilot" to encompass all efforts to test the effects of process changes, including "initiatives" and "tests."

The Committee directs SSA to submit a report to the Committees on Appropriations, the Committee on Ways and Means, and the Committee on Finance not later than 90 days after the enactment

of this Act with a description of all pilots conducted in fiscal years 2019 and 2020, or proposed for fiscal year 2021; the purpose and key objectives of each pilot; its start date and timeline; which SSA components are involved in the pilot; the evaluation plan; the measures or metrics the SSA will use to evaluate the pilot; and a specific goal for each metric that will be used to determine the pilot's effectiveness. Similar information should be provided in the fiscal year 2021 Congressional Budget Justification. All SSA pilots should be included in the requested report and justification, including those undertaken as part of the Compassionate and Responsive Service (CARES) plan and in other parts of the agency. The report (and section in the justification) does not need to include programmatic demonstrations, such as those involving changes in program eligibility rules.

Reconsideration.—The Committee is concerned that SSA is reinstating reconsideration in ten States despite bipartisan, bicameral concern about the quality of the reconsideration process and the delays it causes, and without any plan to improve decision-making at the initial or reconsideration levels. The Committee directs SSA to provide a plan to the Committee on Appropriations and the Committee on Ways and Means within 180 days of enactment of this Act to improve the Disability Determination Services processes, including research topics and potential pilots to improve the disability process, including the reconsideration appeal step, to help ensure the correct decision is made as early as possible, avoiding the need for eligible individuals to seek a hearing in order to receive the benefits for which they are eligible.

Replacement Card Fees.—The Committee considers the proposal to charge a fee to replace a lost or stolen Social Security card incomplete and ill-considered. It is an inappropriate attempt to circumvent the Federal rulemaking process and the agency is directed not to move forward with this proposal.

Report on LAE Expenditures.—The Committee continues to request that the data referenced under this heading in House Report 114–699 be included in future budget justifications. In addition, the Committee requests the fiscal year 2021 Congressional Budget Justification include a historical table of costs and fiscal year 2021 requests for personnel and benefits, by major SSA component to include Operations (field offices, teleservice centers, processing centers, and regional offices); Office of Hearings Operations; Systems; Office of Analytics, Review, and Oversight; and Headquarters.

Social Media.—The Committee is concerned about the proposal in the budget request to permit SSA disability adjudicators to use social media postings and other Internet-based sources as part of evaluating whether the individual meets the disability eligibility criteria. The reliability of social media is often low and hard to determine and SSA adjudicators lack the time, resources, and expertise to properly review, evaluate, and corroborate social media posts. SSA should not pursue this strategy, but instead continue with its existing process of referring cases of suspected fraud to investigators at SSA's Office of Inspector General, who are trained to investigate information found on the Internet or social media and corroborate it against other sources.

Video Hearings.—The Committee is concerned that SSA's proposal in the Notice of Proposed Rulemaking "Setting the Manner

for the Appearance of Parties and Witnesses at a Hearing" (83 Fed. Reg. 57368, November 15, 2018) eliminates an individual's right to an in-person hearing before an SSA Administrative Law Judge (ALJ). This change would deprive millions of Americans of their right to due process and could result in hearings which are less fair and less efficient. The Committee strongly urges SSA to maintain its current policy, which allows claimants to choose to use video hearings on a voluntary basis or to have an in-person hearing or proceeding if the party chooses to do so.

Vocational Experts.—The Committee directs SSA to provide an update to the Committee on Appropriations and the Committee on Ways and Means within 90 days of enactment of this Act on the status of its plans to strengthen Vocational Expert (VE) qualification standards and to pay fees that are sufficient to hire VEs with the necessary expertise and current knowledge. The Committee directs SSA to ensure that anyone testifying as a vocational expert under a Blanket Purchase Agreement meets the qualification standards; and explain how SSA's new fees will reflect VE qualification standards and take into account the fees paid for VE services by other Federal agencies and the private sector. The plan should be developed in consultation with knowledgeable stakeholders, including VEs.

Vocational Factors.—The Committee considers the recent Notice of Proposed Rulemaking "Removing Inability to Communicate in English as an Education Category" (84 Fed. Reg 1006, February 1, 2019) to be a harmful and unjustified attempt to deny Social Security and SSI disability benefits to older workers with long-term or fatal medical impairments who are severely limited in their functional capacity and who cannot communicate in English. The rule does not provide any valid evidence that there is a sufficient occupational base of jobs that this narrow group of severely disabled individuals can perform despite their pervasive limitations. The Committee understands that of the 157 organizations who submitted or signed comments, all but one commented in opposition to the rule. In light of the harm that would be caused by this policy change, the Committee strongly urges SSA to withdraw this proposed rule.

Social Security Advisory Board

The Committee recommends $2,400,000 for the Social Security Advisory Board (SSAB), equal to the fiscal year 2019 enacted level and the fiscal year 2020 budget request.

User Fees

In addition to the other amounts provided, the Committee recommends $131,000,000 for administrative activities funded from user fees. Of this amount, $130,000,000 is derived from fees collected from States that request SSA to administer State SSI supplementary payments. The remaining $1,000,000 is derived from fees charged to non-attorneys who apply for certification to represent claimants under titles II and XVI of the Social Security Act.

Continuing Disability Reviews and Redeterminations

The Committee recommends $1,582,000,000 for program integrity activities. This includes the maximum cap adjustment authorized in the Budget Control Act. The Committee continues bill lan-

guage allowing for the transfer of up to $10,000,000 to the Office of the Inspector General for the cost of jointly operating co-operative disability investigation units.

OFFICE OF THE INSPECTOR GENERAL

Appropriation, fiscal year 2019	$105,500,000
Budget request, fiscal year 2020	105,500,000
Committee Recommendation	105,500,000
Change from enacted level	– – –
Change from budget request	– – –

The Office of the Inspector General (OIG) is responsible for meeting the statutory mission of promoting economy, efficiency, and effectiveness in the administration of SSA programs and operations and to prevent and detect fraud, waste, abuse, and mismanagement in such programs and operations. To accomplish this mission, the OIG directs, conducts, and supervises audits, evaluations, and investigations relating to SSA's programs and operations. In addition, the OIG searches for and reports on systemic weaknesses in SSA programs and operations, and makes recommendations for needed improvements and corrective actions.

TITLE V—GENERAL PROVISIONS

(TRANSFER OF FUNDS)

Sec. 501. The Committee continues a provision allowing the Secretaries of Labor, Health and Human Services, and Education to transfer unexpended balances of prior appropriations to accounts corresponding to current appropriations to be used for the same purposes and for the same periods of time for which they were originally appropriated.

Sec. 502. The Committee continues a provision prohibiting the obligation of funds beyond the current fiscal year unless expressly so provided.

Sec. 503. The Committee continues a provision prohibiting funds from being used to support or defeat legislation.

Sec. 504. The Committee continues a provision limiting the amount available for official reception and representation expenses for the Secretaries of Labor and Education, the Director of the Federal Mediation and Conciliation Service, and the Chairman of the National Mediation Board.

Sec. 505. The Committee continues a provision requiring grantees receiving Federal funds to clearly state the percentage of the total cost of the program or project that will be financed with Federal money.

Sec. 506. The Committee continues a provision prohibiting the use of federal funds for abortion services.

Sec. 507. The Committee continues a provision providing exceptions to section 506 if the pregnancy is the result of an act of rape or incest, or in the case of a threat to the life of the woman; a provision to clarify that section 506 does not apply to State, locality, or private funds; and a provision to ensure that health care entities are not required to cover abortion services.

Sec. 508. The Committee continues a provision prohibiting use of funds for certain research involving human embryos.

Sec. 509. The Committee continues a provision prohibiting use of funds for any activity that promotes the legalization of any drug or substance included in schedule I of the schedules of controlled substances.

Sec. 510. The Committee continues a provision prohibiting use of funds to promulgate or adopt any final standard providing for a unique health identifier until legislation is enacted specifically approving the standard.

Sec. 511. The Committee continues a provision related to annual reports to the Secretary of Labor.

Sec. 512. The Committee continues a provision prohibiting transfer of funds made available in this Act except by authority provided in this Act or another appropriations Act.

Sec. 513. The Committee continues a provision to limit funds in the bill for public libraries to those that comply with the requirements of the Children's Internet Protection Act.

Sec. 514. The Committee modifies a provision regarding procedures for reprogramming of funds.

Sec. 515. The Committee continues a provision pertaining to appointments to scientific advisory committees.

Sec. 516. The Committee continues a provision requiring each department and related agency funded through this Act to submit an operating plan within 45 days of enactment, detailing any funding allocations that are different than those specified in this Act, the accompanying detailed table, or budget request.

Sec. 517. The Committee modifies a provision requiring the Secretaries of Labor, Health and Human Services, and Education to submit a quarterly report to the Committees on Appropriations containing certain information on noncompetitive contracts, grants, and cooperative agreements exceeding $500,000 in value.

Sec. 518. The Committee continues a provision prohibiting the use of funds to process claims for credit for quarters of coverage based on work performed under a Social Security number that was not the claimant's number, where the performance of such work under such number has formed the basis for a conviction of the claimant of a violation of section 208(a)(6) or (7) of the Social Security Act.

Sec. 519. The Committee continues a provision prohibiting the use of funds to implement a Social Security totalization agreement with Mexico.

Sec. 520. The Committee continues a provision prohibiting the use of funds for the downloading or exchanging of pornography.

Sec. 521. The Committee continues a provision relating to reporting requirements for conference expenditures.

Sec. 522. The Committee continues a provision relating to disclosure of U.S. taxpayer funding for programs used in advertising.

Sec. 523. The Committee modifies a provision relating to performance partnership pilots.

Sec. 524. The Committee continues provision requesting quarterly reports on the status of balances of appropriations from the Departments of Labor, Health and Human Services and Education.

Sec. 525. The Committee includes a new provision making funds from the Children's Health Insurance Program Performance Bonus Fund unavailable for obligation in fiscal year 2020.

HOUSE OF REPRESENTATIVES REPORTING REQUIREMENTS

The following materials are submitted in accordance with various requirements of the Rules of the House of Representatives:

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the following is a statement of general performance goals and objectives for which this measure authorizes funding: The Committee on Appropriations considers program performance, including a program's success in developing and attaining outcome-related goals and objectives, in developing funding recommendations.

RESCISSION OF FUNDS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following lists the rescissions of unexpended balances included in the accompanying bill:

RESCISSIONS RECOMMENDED IN THE BILL

Account	Amount
Department of Health and Human Services	
Children's Health Insurance Program	$4,000,000,000
Department of Education	
Pell Grants	52,000,000

TRANSFER OF FUNDS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following lists the transfers of unexpended balances included in the accompanying bill:

TITLE I

Language is included under "Job Corps" permitting the transfer of funds for Job Corps Center construction, rehabilitation and acquisition to meet the operational needs of Job Corps Centers or to achieve administrative efficiencies.

Language is included under "Special Benefits" which provides for the transfer of such sums as necessary from the "Postal Service" account.

Language is included under "Black Lung Disability Trust Fund" which provides for the transfer of funds to the "Department of Labor, Office of Workers' Compensation Program, Salaries and Expenses."

Language is included under "Black Lung Disability Trust Fund" which provides for the transfer of funds to the "Department of Labor, Departmental Management, Salaries and Expenses."

Language is included under "Black Lung Disability Trust Fund" which provides for the transfer of funds to the "Department of Labor, Departmental Management, Office of Inspector General."

Language is included under "Black Lung Disability Trust Fund" which provides for the transfer of funds to the "Department of the Treasury."

Language is included under "Departmental Management, Salaries and Expenses" authorizing the transfer of funds available for

program evaluation to any other account within the Department to carry out evaluation activities.

A general provision is included permitting up to one percent of any discretionary appropriation to be transferred between a program, project, or activity of the Department of Labor, provided that no such program, project, or activity is increased by more than three percent by any such transfer.

A general provision is included that provides for the transfer of funds from the "Employment and Training Administration" for technical assistance services to grantees to "Program Administration". The provision does not apply to section 171 of the WIOA. The general provision also authorizes the transfer of up 0.5 percent of each discretionary appropriation for "Employment and Training Administration" to carry out program integrity activities subject to certain limitations related to "Job Corps."

A general provision is included that provides for the transfer of up to 0.75 percent of appropriated funds to carry out program evaluations of "Training and Employment Services", "Job Corps", "Community Service Employment for Older Americans," "State Unemployment Insurance and Employment Service Operations", "Employee Benefits Security Administration", "Office of Workers Compensation Programs", "Wage and Hour Division", "Office of Federal Contract Compliance Programs", "Office of Labor-Management Standards", "Occupational Safety and Health Administration", "Mine Safety and Health Administration", "Office of Disability Employment Policy", funding made available to the "Bureau of International Labor Affairs" and "Women's Bureau" within the Departmental Management, Salaries and Expenses" account, and "Veterans Employment and Training" for use by the Office of the Chief Evaluation Officer.

TITLE II

Language is included under "Centers for Disease Control and Prevention, Buildings and Facilities" to allow the transfer of prior year unobligated Individual Learning Account funds to be transferred to this account to carry out the purpose of this account.

Language is included under "Centers for Disease Control and Prevention, Buildings and Facilities" for funds to be transferred from the HHS Nonrecurring Expenses Fund.

Language is included under "Centers for Disease Control and Prevention, CDC-Wide Activities and Program Support" for funds to be transferred to and merged with the Infectious Disease Rapid Response Reserve Fund.

Language is included under "National Institutes of Health, Innovation Account" to allow the transfer of funds to other Institutes and Centers to support activities authorized in the 21st Century Cures Act (PL 114–255).

Language is included under "Administration for Community Living, Aging and Disability Services Programs" for transfer to the Secretary of Agriculture to carry out section 311 of the Older Americans Act of 1965.

A general provision is included that allows not to exceed one percent of any discretionary funds to be transferred between appropriation accounts of the "Department of Health and Human Serv-

ices", provided that no appropriation account is increased by more than three percent by such transfer.

A general provision is included that allows the transfer of up to three percent among the institutes and centers of the "National Institutes of Health" from amounts identified as pertaining to the human immunodeficiency virus.

A general provision is included that allows the transfer of funding determined to be related to the human immunodeficiency virus to the "Office of AIDS Research".

A general provision is included that transfers one percent of the amount made available for "National Research Service Awards" at the "National Institutes of Health" to the "Health Resources and Services Administration".

A general provision is included to direct the transfer of the "Prevention and Public Health Fund" as specified in the committee report accompanying this Act.

TITLE III

A general provision is included that allows not to exceed one percent of any discretionary funds to be transferred between appropriation accounts of the Department of Education, provided that no appropriation account is increased by more than three percent by such transfer.

TITLE IV

Language is included under Payment to the National Service Trust authorizing the transfer of funds from the "Corporation for National and Community Service, Operating Expenses" to support the activities of national service participants.

Language is included under "Social Security Administration" authorizing the transfer funds from the Social Security Administration's "Limitation on Administration Expenses" account to be available for purposes of the Office of Inspector General.

TITLE V

A general provision is included that allows the Secretaries of Labor, Health and Human Services, and Education to transfer balances of prior appropriation to accounts corresponding to current appropriations.

DISCLOSURE OF EARMARKS AND CONGRESSIONALLY DIRECTED SPENDING ITEMS

Neither the bill nor the report contains any Congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9 of rule XXI.

COMPLIANCE WITH RULE XIII, CL. 3(e) (RAMSEYER RULE)

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

HIGHER EDUCATION ACT OF 1965

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TITLE I—GENERAL PROVISIONS

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PART B—ADDITIONAL GENERAL PROVISIONS

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SEC. 114. NATIONAL ADVISORY COMMITTEE ON INSTITUTIONAL QUALITY AND INTEGRITY.

(a) ESTABLISHMENT.—There is established in the Department a National Advisory Committee on Institutional Quality and Integrity (in this section referred to as the "Committee") to assess the process of accreditation and the institutional eligibility and certification of institutions of higher education (as defined in section 102) under title IV.

(b) MEMBERSHIP.—

(1) IN GENERAL.—The Committee shall have 18 members, of which—

(A) six members shall be appointed by the Secretary;

(B) six members shall be appointed by the Speaker of the House of Representatives, three of whom shall be appointed on the recommendation of the majority leader of the House of Representatives, and three of whom shall be appointed on the recommendation of the minority leader of the House of Representatives; and

(C) six members shall be appointed by the President pro tempore of the Senate, three of whom shall be appointed on the recommendation of the majority leader of the Senate, and three of whom shall be appointed on the recommendation of the minority leader of the Senate.

(2) QUALIFICATIONS.—Individuals shall be appointed as members of the Committee—

(A) on the basis of the individuals' experience, integrity, impartiality, and good judgment;

(B) from among individuals who are representatives of, or knowledgeable concerning, education and training beyond secondary education, representing all sectors and types of institutions of higher education (as defined in section 102); and

(C) on the basis of the individuals' technical qualifications, professional standing, and demonstrated knowledge in the fields of accreditation and administration in higher education.

(3) TERMS OF MEMBERS.—Except as provided in paragraph (5), the term of office of each member of the Committee shall be for six years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which the member's predecessor was appointed shall be appointed for the remainder of such term.

(4) VACANCY.—A vacancy on the Committee shall be filled in the same manner as the original appointment was made not later than 90 days after the vacancy occurs. If a vacancy occurs in a position to be filled by the Secretary, the Secretary shall publish a Federal Register notice soliciting nominations for the position not later than 30 days after being notified of the vacancy.

(5) INITIAL TERMS.—The terms of office for the initial members of the Committee shall be—

(A) three years for members appointed under paragraph (1)(A);

(B) four years for members appointed under paragraph (1)(B); and

(C) six years for members appointed under paragraph (1)(C).

(6) CHAIRPERSON.—The members of the Committee shall select a chairperson from among the members.

(c) FUNCTIONS.—The Committee shall—

(1) advise the Secretary with respect to establishment and enforcement of the standards of accrediting agencies or associations under subpart 2 of part H of title IV;

(2) advise the Secretary with respect to the recognition of a specific accrediting agency or association;

(3) advise the Secretary with respect to the preparation and publication of the list of nationally recognized accrediting agencies and associations;

(4) advise the Secretary with respect to the eligibility and certification process for institutions of higher education under title IV, together with recommendations for improvements in such process;

(5) advise the Secretary with respect to the relationship between—

(A) accreditation of institutions of higher education and the certification and eligibility of such institutions; and

(B) State licensing responsibilities with respect to such institutions; and

(6) carry out such other advisory functions relating to accreditation and institutional eligibility as the Secretary may prescribe by regulation.

(d) MEETING PROCEDURES.—

(1) SCHEDULE.—

(A) BIANNUAL MEETINGS.—The Committee shall meet not less often than twice each year, at the call of the Chairperson.

(B) PUBLICATION OF DATE.—The Committee shall submit the date and location of each meeting in advance to the Secretary, and the Secretary shall publish such information in the Federal Register not later than 30 days before the meeting.

(2) AGENDA.—

(A) ESTABLISHMENT.—The agenda for a meeting of the Committee shall be established by the Chairperson and shall be submitted to the members of the Committee upon notification of the meeting.

(B) OPPORTUNITY FOR PUBLIC COMMENT.—The agenda shall include, at a minimum, opportunity for public comment during the Committee's deliberations.

(3) SECRETARY'S DESIGNEE.—The Secretary shall designate an employee of the Department to serve as the Secretary's designee to the Committee, and the Chairperson shall invite the Secretary's designee to attend all meetings of the Committee.

(4) FEDERAL ADVISORY COMMITTEE ACT.—The Federal Advisory Committee Act (5 U.S.C. App.) shall apply to the Committee, except that section 14 of such Act shall not apply.

(e) REPORT AND NOTICE.—

(1) NOTICE.—The Secretary shall annually publish in the Federal Register—

(A) a list containing, for each member of the Committee—

(i) the member's name;

(ii) the date of the expiration of the member's term of office; and

(iii) the name of the individual described in subsection (b)(1) who appointed the member; and

(B) a solicitation of nominations for each expiring term of office on the Committee of a member appointed by the Secretary.

(2) REPORT.—Not later than the last day of each fiscal year, the Committee shall make available an annual report to the Secretary, the authorizing committees, and the public. The annual report shall contain—

(A) a detailed summary of the agenda and activities of, and the findings and recommendations made by, the Committee during the fiscal year preceding the fiscal year in which the report is made;

(B) a list of the date and location of each meeting during the fiscal year preceding the fiscal year in which the report is made;

(C) a list of the members of the Committee; and

(D) a list of the functions of the Committee, including any additional functions established by the Secretary through regulation.

(f) TERMINATION.—The Committee shall terminate on September 30, [2019] *2020*.

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TITLE IV—STUDENT ASSISTANCE

PART A—GRANTS TO STUDENTS IN ATTENDANCE AT INSTITUTIONS OF HIGHER EDUCATION

* * * * * * *

Subpart 1—Federal Pell Grants

SEC. 401. FEDERAL PELL GRANTS: AMOUNT AND DETERMINATIONS; APPLICATIONS.

(a) PROGRAM AUTHORITY AND METHOD OF DISTRIBUTION.—(1) For each fiscal year through fiscal year 2017, the Secretary shall pay

to each eligible institution such sums as may be necessary to pay to each eligible student (defined in accordance with section 484) for each academic year during which that student is in attendance at an institution of higher education, as an undergraduate, a Federal Pell Grant in the amount for which that student is eligible, as determined pursuant to subsection (b). Not less than 85 percent of such sums shall be advanced to eligible institutions prior to the start of each payment period and shall be based upon an amount requested by the institution as needed to pay eligible students until such time as the Secretary determines and publishes in the Federal Register with an opportunity for comment, an alternative payment system that provides payments to institutions in an accurate and timely manner, except that this sentence shall not be construed to limit the authority of the Secretary to place an institution on a reimbursement system of payment.

(2) Nothing in this section shall be interpreted to prohibit the Secretary from paying directly to students, in advance of the beginning of the academic term, an amount for which they are eligible, in cases where the eligible institution elects not to participate in the disbursement system required by paragraph (1).

(3) Grants made under this subpart shall be known as "Federal Pell Grants".

(b) PURPOSE AND AMOUNT OF GRANTS.—(1) The purpose of this subpart is to provide a Federal Pell Grant that in combination with reasonable family and student contribution and supplemented by the programs authorized under subparts 3 and 4 of this part, will meet at least 75 percent of a student's cost of attendance (as defined in section 472), unless the institution determines that a greater amount of assistance would better serve the purposes of this section.

(2)

(A) The amount of the Federal Pell Grant for a student eligible under this part shall be—

(i) the maximum Federal Pell Grant, as specified in the last enacted appropriation Act applicable to that award year, plus

(ii) the amount of the increase calculated under paragraph (7)(B) for that year, less

(iii) an amount equal to the amount determined to be the expected family contribution with respect to that student for that year.

(B) In any case where a student attends an institution of higher education on less than a full-time basis (including a student who attends an institution of higher education on less than a half-time basis) during any academic year, the amount of the Federal Pell Grant to which that student is entitled shall be reduced in proportion to the degree to which that student is not so attending on a full-time basis, in accordance with a schedule of reductions established by the Secretary for the purposes of this division, computed in accordance with this subpart. Such schedule of reductions shall be established by regulation and published in the Federal Register in accordance with section 482 of this Act.

(3) No Federal Pell Grant under this subpart shall exceed the difference between the expected family contribution for a student and the cost of attendance (as defined in section 472) at the institution

at which that student is in attendance. If, with respect to any student, it is determined that the amount of a Federal Pell Grant plus the amount of the expected family contribution for that student exceeds the cost of attendance for that year, the amount of the Federal Pell Grant shall be reduced until the combination of expected family contribution and the amount of the Federal Pell Grant does not exceed the cost of attendance at such institution.

(4) No Federal Pell Grant shall be awarded to a student under this subpart if the amount of that grant for that student as determined under this subsection for any academic year is less than ten percent of the maximum amount of a Federal Pell Grant award determined under paragraph (2)(A) for such academic year.

(5) Notwithstanding any other provision of this subpart, the Secretary shall allow the amount of the Federal Pell Grant to be exceeded for students participating in a program of study abroad approved for credit by the institution at which the student is enrolled when the reasonable costs of such program are greater than the cost of attendance at the student's home institution, except that the amount of such Federal Pell Grant in any fiscal year shall not exceed the maximum amount of a Federal Pell Grant award determined under paragraph (2)(A), for which a student is eligible during such award year. If the preceding sentence applies, the financial aid administrator at the home institution may use the cost of the study abroad program, rather than the home institution's cost, to determine the cost of attendance of the student.

(6) No Federal Pell Grant shall be awarded under this subpart to any individual who is incarcerated in any Federal or State penal institution or who is subject to an involuntary civil commitment upon completion of a period of incarceration for a forcible or nonforcible sexual offense (as determined in accordance with the Federal Bureau of Investigation's Uniform Crime Reporting Program).

(7) ADDITIONAL FUNDS.—

(A) IN GENERAL.—There are authorized to be appropriated, and there are appropriated (in addition to any other amounts appropriated to carry out this section and out of any money in the Treasury not otherwise appropriated) the following amounts—

(i) $2,030,000,000 for fiscal year 2008;

(ii) $2,090,000,000 for fiscal year 2009;

(iii) to carry out subparagraph (B) of this paragraph, such sums as may be necessary for fiscal year 2010 and each subsequent fiscal year to provide the amount of increase of the maximum Federal Pell Grant required by clauses (ii) and (iii) of subparagraph (B); and

(iv) to carry out this section—

(I) $13,500,000,000 for fiscal year 2011;

(II) $13,795,000,000 for fiscal year 2012;

(III) $7,587,000,000 for fiscal year 2013;

(IV) $588,000,000 for fiscal year 2014;

(V) $0 for fiscal year 2015;

(VI) $0 for fiscal year 2016;

(VII) $1,320,000,000 for fiscal year 2017;

(VIII) $1,334,000,000 for fiscal year 2018;

(IX) $1,370,000,000 for fiscal year 2019;

(X) [$1,430,000,000] *$1,378,000,000* for fiscal year 2020; and

(XI) $1,145,000,000 for fiscal year 2021 and each succeeding fiscal year.

(B) INCREASE IN FEDERAL PELL GRANTS.—The amounts made available pursuant to clauses (i) through (iii) of subparagraph (A) of this paragraph shall be used to increase the amount of the maximum Federal Pell Grant for which a student shall be eligible during an award year, as specified in the last enacted appropriation Act applicable to that award year, by—

(i) $490 for each of the award years 2008–2009 and 2009–2010;

(ii) $690 for each of the award years 2010–2011, 2011–2012, and 2012–2013; and

(iii) the amount determined under subparagraph (C) for each succeeding award year.

(C) ADJUSTMENT AMOUNTS.—

(i) AWARD YEAR 2013–2014.—For award year 2013–2014, the amount determined under this subparagraph for purposes of subparagraph (B)(iii) shall be equal to—

(I) $5,550 or the total maximum Federal Pell Grant for the preceding award year (as determined under clause (iv)(II)), whichever is greater, increased by a percentage equal to the annual adjustment percentage for award year 2013–2014, reduced by

(II) $4,860 or the maximum Federal Pell Grant for which a student was eligible for the preceding award year, as specified in the last enacted appropriation Act applicable to that year, whichever is greater; and

(III) rounded to the nearest $5.

(ii) AWARD YEARS 2014–2015 THROUGH 2017–2018.—For each of the award years 2014–2015 through 2017–2018, the amount determined under this subparagraph for purposes of subparagraph (B)(iii) shall be equal to—

(I) the total maximum Federal Pell Grant for the preceding award year (as determined under clause (iv)(II)), increased by a percentage equal to the annual adjustment percentage for the award year for which the amount under this subparagraph is being determined, reduced by

(II) $4,860 or the maximum Federal Pell Grant for which a student was eligible for the preceding award year, as specified in the last enacted appropriation Act applicable to that year, whichever is greater; and

(III) rounded to the nearest $5.

(iii) SUBSEQUENT AWARD YEARS.—For award year 2018–2019 and each subsequent award year, the amount determined under this subparagraph for purposes of subparagraph (B)(iii) shall be equal to the

amount determined under clause (ii) for award year 2017–2018.

(iv) DEFINITIONS.—For purposes of this subparagraph—

(I) the term "annual adjustment percentage" as applied to an award year, is equal to the estimated percentage change in the Consumer Price Index (as determined by the Secretary, using the definition in section 478(f)) for the most recent calendar year ending prior to the beginning of that award year; and

(II) the term "total maximum Federal Pell Grant" as applied to a preceding award year, is equal to the sum of—

(aa) the maximum Federal Pell Grant for which a student is eligible during an award year, as specified in the last enacted appropriation Act applicable to that preceding award year; and

(bb) the amount of the increase in the maximum Federal Pell Grant required by this paragraph for that preceding award year.

(D) PROGRAM REQUIREMENTS AND OPERATIONS OTHERWISE UNAFFECTED.—Except as provided in subparagraphs (B) and (C), nothing in this paragraph shall be construed to alter the requirements and operations of the Federal Pell Grant Program as authorized under this section, or authorize the imposition of additional requirements or operations for the determination and allocation of Federal Pell Grants under this section.

(E) RATABLE INCREASES AND DECREASES.—The amounts specified in subparagraph (B) shall be ratably increased or decreased to the extent that funds available under subparagraph (A) exceed or are less than (respectively) the amount required to provide the amounts specified in subparagraph (B).

(F) AVAILABILITY OF FUNDS.—The amounts made available by subparagraph (A) for any fiscal year shall be available beginning on October 1 of that fiscal year, and shall remain available through September 30 of the succeeding fiscal year.

(8)(A) Effective in the 2017–2018 award year and thereafter, the Secretary shall award an eligible student not more than one and one-half Federal Pell Grants during a single award year to permit such student to work toward completion of an eligible program if, during that single award year, the student—

(i) has received a Federal Pell Grant for an award year and is enrolled in an eligible program for one or more additional payment periods during the same award year that are not otherwise fully covered by the student's Federal Pell Grant; and

(ii) is enrolled on at least a half-time basis while receiving any funds under this section.

(B) In the case of a student receiving more than one Federal Pell Grant in a single award year under subparagraph (A), the total amount of Federal Pell Grants awarded to such student for the award year may exceed the maximum basic grant level specified in the appropriate appropriations Act for such award year.

(C) Any period of study covered by a Federal Pell Grant awarded under subparagraph (A) shall be included in determining a student's duration limit under subsection (c)(5).

(D) In any case where an eligible student is receiving a Federal Pell Grant for a payment period that spans two award years, the Secretary shall allow the eligible institution in which the student is enrolled to determine the award year to which the additional period shall be assigned, as it determines is most beneficial to students.

(c) PERIOD OF ELIGIBILITY FOR GRANTS.—(1) The period during which a student may receive Federal Pell Grants shall be the period required for the completion of the first undergraduate baccalaureate course of study being pursued by that student at the institution at which the student is in attendance except that any period during which the student is enrolled in a noncredit or remedial course of study as defined in paragraph (2) shall not be counted for the purpose of this paragraph.

(2) Nothing in this section shall exclude from eligibility courses of study which are noncredit or remedial in nature (including courses in English language instruction) which are determined by the institution to be necessary to help the student be prepared for the pursuit of a first undergraduate baccalaureate degree or certificate or, in the case of courses in English language instruction, to be necessary to enable the student to utilize already existing knowledge, training, or skills. Nothing in this section shall exclude from eligibility programs of study abroad that are approved for credit by the home institution at which the student is enrolled.

(3) No student is entitled to receive Pell Grant payments concurrently from more than one institution or from the Secretary and an institution.

(4) Notwithstanding paragraph (1), the Secretary may allow, on a case-by-case basis, a student to receive a basic grant if the student—

(A) is carrying at least one-half the normal full-time work load for the course of study the student is pursuing, as determined by the institution of higher education; and

(B) is enrolled or accepted for enrollment in a postbaccalaureate program that does not lead to a graduate degree, and in courses required by a State in order for the student to receive a professional certification or licensing credential that is required for employment as a teacher in an elementary school or secondary school in that State,

except that this paragraph shall not apply to a student who is enrolled in an institution of higher education that offers a baccalaureate degree in education.

(5) The period during which a student may receive Federal Pell Grants shall not exceed 12 semesters, or the equivalent of 12 semesters, as determined by the Secretary by regulation. Such regu-

lations shall provide, with respect to a student who received a Federal Pell Grant for a term but was enrolled at a fraction of full-time, that only that same fraction of such semester or equivalent shall count towards such duration limits.

(d) APPLICATIONS FOR GRANTS.—(1) The Secretary shall from time to time set dates by which students shall file applications for Federal Pell Grants under this subpart.

(2) Each student desiring a Federal Pell Grant for any year shall file an application therefor containing such information and assurances as the Secretary may deem necessary to enable the Secretary to carry out the functions and responsibilities of this subpart.

(e) DISTRIBUTION OF GRANTS TO STUDENTS.—Payments under this section shall be made in accordance with regulations promulgated by the Secretary for such purpose, in such manner as will best accomplish the purpose of this section. Any disbursement allowed to be made by crediting the student's account shall be limited to tuition and fees and, in the case of institutionally owned housing, room and board. The student may elect to have the institution provide other such goods and services by crediting the student's account.

(f) CALCULATION OF ELIGIBILITY.—(1) Each contractor processing applications for awards under this subpart (including a central processor, if any, designated by the Secretary) shall, in a timely manner, furnish to the student financial aid administrator (at each institution of higher education which a student awarded a Federal Pell Grant under this subpart is attending), as a part of its regular output document, the expected family contribution for each such student. Each such student financial aid administrator shall—

(A) examine and assess the data used to calculate the expected family contribution of the student furnished pursuant to this subsection;

(B) recalculate the expected family contribution of the student if there has been a change in circumstances of the student or in the data submitted;

(C) make the award to the student in the correct amount; and

(D) after making such award report the corrected data to such contractor and to a central processor (if any) designated by the Secretary for a confirmation of the correct computation of amount of the expected family contribution for each such student.

(2) Whenever a student receives an award under this subpart that, due to recalculation errors by the institution of higher education, is in excess of the amount which the student is entitled to receive under this subpart, such institution of higher education shall pay to the Secretary the amount of such excess unless such excess can be resolved in a subsequent disbursement to the institution.

(3) Each contractor processing applications for awards under this subpart shall for each academic year after academic year 1986–1987 prepare and submit a report to the Secretary on the correctness of the computations of amount of the expected family contribution, and on the accuracy of the questions on the application form under this subpart for the previous academic year for which the contractor is responsible. The Secretary shall transmit the report,

together with the comments and recommendations of the Secretary, to the Committee on Appropriations of the Senate, the Committee on Appropriations of the House of Representatives, and the authorizing committees.

(g) INSUFFICIENT APPROPRIATIONS.—If, for any fiscal year, the funds appropriated for payments under this subpart are insufficient to satisfy fully all entitlements, as calculated under subsection (b) (but at the maximum grant level specified in such appropriation), the Secretary shall promptly transmit a notice of such insufficiency to each House of the Congress, and identify in such notice the additional amount that would be required to be appropriated to satisfy fully all entitlements (as so calculated at such maximum grant level).

(h) USE OF EXCESS FUNDS.—(1) If, at the end of a fiscal year, the funds available for making payments under this subpart exceed the amount necessary to make the payments required under this subpart to eligible students by 15 percent or less, then all of the excess funds shall remain available for making payments under this subpart during the next succeeding fiscal year.

(2) If, at the end of a fiscal year, the funds available for making payments under this subpart exceed the amount necessary to make the payments required under this subpart to eligible students by more than 15 percent, then all of such funds shall remain available for making such payments but payments may be made under this paragraph only with respect to entitlements for that fiscal year.

(i) TREATMENT OF INSTITUTIONS AND STUDENTS UNDER OTHER LAWS.—Any institution of higher education which enters into an agreement with the Secretary to disburse to students attending that institution the amounts those students are eligible to receive under this subpart shall not be deemed, by virtue of such agreement, a contractor maintaining a system of records to accomplish a function of the Secretary. Recipients of Pell Grants shall not be considered to be individual grantees for purposes of subtitle D of title V of Public Law 100–690.

(j) INSTITUTIONAL INELIGIBILITY BASED ON DEFAULT RATES.—

(1) IN GENERAL.—No institution of higher education shall be an eligible institution for purposes of this subpart if such institution of higher education is ineligible to participate in a loan program under part B or D as a result of a final default rate determination made by the Secretary under part B or D after the final publication of cohort default rates for fiscal year 1996 or a succeeding fiscal year.

(2) SANCTIONS SUBJECT TO APPEAL OPPORTUNITY.—No institution may be subject to the terms of this subsection unless the institution has had the opportunity to appeal the institution's default rate determination under regulations issued by the Secretary for the loan program authorized under part B or D, as applicable. This subsection shall not apply to an institution that was not participating in the loan program authorized under part B or D on the date of enactment of the Higher Education Amendments of 1998, unless the institution subsequently participates in the loan programs.

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PART D—WILLIAM D. FORD FEDERAL DIRECT LOAN PROGRAM

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SEC. 458. FUNDS FOR ADMINISTRATIVE EXPENSES.

(a) ADMINISTRATIVE EXPENSES.—

(1) MANDATORY FUNDS FOR FISCAL YEAR 2006.—For fiscal year 2006, there shall be available to the Secretary, from funds not otherwise appropriated, funds to be obligated for—

(A) administrative costs under this part and part B, including the costs of the direct student loan programs under this part; and

(B) account maintenance fees payable to guaranty agencies under part B and calculated in accordance with subsections (b) and (c),

not to exceed (from such funds not otherwise appropriated) $820,000,000 in fiscal year 2006.

(3) AUTHORIZATION FOR ADMINISTRATIVE COSTS BEGINNING IN FISCAL YEARS 2007 THROUGH 2014.—For each of the fiscal years 2007 through 2014, there are authorized to be appropriated such sums as may be necessary for administrative costs under this part and part B, including the costs of the direct student loan programs under this part.

(4) CONTINUING MANDATORY FUNDS FOR ACCOUNT MAINTENANCE FEES.—For each of the fiscal years 2007 through [2019] *2020*, there shall be available to the Secretary, from funds not otherwise appropriated, funds to be obligated for account maintenance fees payable to guaranty agencies under part B and calculated in accordance with subsection (b).

(5) ACCOUNT MAINTENANCE FEES.—Account maintenance fees under paragraph (3) shall be paid quarterly and deposited in the Agency Operating Fund established under section 422B.

(6) TECHNICAL ASSISTANCE TO INSTITUTIONS OF HIGHER EDUCATION.—

(A) PROVISION OF ASSISTANCE.—The Secretary shall provide institutions of higher education participating, or seeking to participate, in the loan programs under this part with technical assistance in establishing and administering such programs.

(B) FUNDS.—There are authorized to be appropriated, and there are appropriated, to carry out this paragraph (in addition to any other amounts appropriated to carry out this paragraph and out of any money in the Treasury not otherwise appropriated), $50,000,000 for fiscal year 2010.

(C) DEFINITION.—In this paragraph, the term "assistance" means the provision of technical support, training, materials, technical assistance, and financial assistance.

(7) ADDITIONAL PAYMENTS.—

(A) PROVISION OF ASSISTANCE.—The Secretary shall provide payments to loan servicers for retaining jobs at locations in the United States where such servicers were operating under part B on January 1, 2010.

(B) FUNDS.—There are authorized to be appropriated, and there are appropriated, to carry out this paragraph (in

addition to any other amounts appropriated to carry out this paragraph and out of any money in the Treasury not otherwise appropriated), $25,000,000 for each of the fiscal years 2010 and 2011.

(8) CARRYOVER.—The Secretary may carry over funds made available under this section to a subsequent fiscal year.

(b) CALCULATION BASIS.—Account maintenance fees payable to guaranty agencies under subsection (a)(4) shall be calculated on the basis of 0.06 percent of the original principal amount of outstanding loans on which insurance was issued under part B.

(c) BUDGET JUSTIFICATION.—No funds may be expended under this section unless the Secretary includes in the Department of Education's annual budget justification to Congress a detailed description of the specific activities for which the funds made available by this section have been used in the prior and current years (if applicable), the activities and costs planned for the budget year, and the projection of activities and costs for each remaining year for which administrative expenses under this section are made available.

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CHANGES IN THE APPLICATION OF EXISTING LAW

Pursuant to clause 3(f)(1)(A) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the effect of provisions in the accompanying bill that directly or indirectly change the application of existing law.

TITLE I—DEPARTMENT OF LABOR

Language is included under "Employment and Training Administration" providing that allotments to outlying areas are not required to be made through competitive grants as provided by section 127 of the Workforce Innovation and Opportunity Act (WIOA).

Language is included under "Employment and Training Administration" providing amounts made available for dislocated workers may be used for State activities or across multiple local areas where workers remain dislocated.

Language is included under "Employment and Training Administration" providing that technical assistance and demonstration projects may provide assistance to new entrants in the workforce and incumbent workers.

Language is included under "Employment and Training Administration" providing that the Department of Labor may take no action to limit the number or proportion of eligible applicants receiving related assistance services in the migrant and seasonal farmworkers programs.

Language is included under "Job Corps" providing that amounts made available for construction and rehabilitation may include acquisition and maintenance of major items of equipment.

Language is included under "Job Corps" providing authority to transfer up to 15 percent of construction and rehabilitation funds for operational needs with prior written notice to the Committee and that any such transfers are available for obligation through June 30, 2021.

Language is included under "Job Corps" providing that no funds from any other appropriation may be used for meal services at Job Corps.

Language is included under "Community Service Employment for Older Americans" allowing funds to be recaptured and reobligated.

Language is included under "Federal Unemployment Benefits and Allowances" providing that funding may be available beyond the current year in accordance with section 245(c) of the Trade Act of 1974.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing for reemployment services and eligibility assessments.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing funds to States to improve operations and modernize State Unemployment Insurance systems.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing for additional administrative funds from the Unemployment Trust Fund if unemployment claims exceed certain levels.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing authority for States to use funds to assist other States to carry out authorized activities in cases of a major disaster declared by the President under the Robert T. Stafford Disaster Relief and Emergency Assistance Act.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that the Department of Labor may make payments on behalf of States for the use of the National Directory of New Hires.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that the Department of Labor may make payments from funds appropriated for States' grants on behalf of States to the entity operating the State Information Data Exchange System.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that the Department of Labor may make payments from funds appropriated for States' grants on behalf of States to the entity operating the Unemployment Insurance Integrity Center of Excellence.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that appropriations for establishing a national one-stop career system may be obligated in contracts, grants or agreements with States or non-State entities.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that States awarded grants to support national activities of the Federal-State unemployment insurance system may award subgrants to other States.

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that funds available for integrated Unemployment Insurance and Employment Service automation may be used by States notwithstanding cost allocation principles prescribed under the Office of Management and Budget "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards."

Language is included under "State Unemployment Insurance and Employment Service Operations" providing that the Department of Labor may reallot funds among States participating in a consortium.

Language is included under "State Unemployment Insurance and Employment Service Operations" allowing the Secretary to collect fees for the costs associated with additional data collection, analyses, and reporting services related to the National Agricultural Workers Survey.

Language is included under "Pension Benefit Guarantee Corporation" providing for additional administrative funds if participants with plans terminated during the period exceed a certain level.

Language is included under "Pension Benefit Guarantee Corporation" providing that obligations may exceed amounts provided for unforeseen and extraordinary pre-termination or termination expenses or unforeseen and extraordinary multiemployer program expenses if approved by the Office of Management and Budget.

Language is included under "Special Benefits" providing that the Department of Labor may use authority to reimburse an employer who is not the employer at the time of injury for portions of the salary of a re-employed, disabled beneficiary.

Language is included under "Special Benefits" providing that unobligated balances of reimbursements shall remain available until expended for the payment of compensation, benefits, and expenses.

Language is included under "Special Benefits" providing that funds shall be transferred to the appropriation from entities required under 5 U.S.C. 8147(c) as determined by the Department of Labor.

Language is included under "Special Benefits" providing that funds transferred from entities under 5 U.S.C 8147(c), specified amounts may be used by the Department of Labor for maintenance and data and communications systems, workload processing, roll disability management and medical review, and program integrity with remaining amounts paid into the Treasury.

Language is included under "Special Benefits" providing that the Secretary may prescribe regulations requiring identification for the filing of benefit claims.

Language is included under "Administrative Expenses, Energy Employees Occupational Illness Compensation Fund" providing that the Secretary may prescribe regulations for requiring identification for the filing of benefit claims.

Language is included under "Occupational Safety and Health Administration" providing that up to a certain amount of fees collected from the training institute may be retained and used for related training and education.

Language is included under "Occupational Safety and Health Administration" providing that fees collected from Nationally Recognized Testing Laboratories may be used to administer laboratory recognition programs that ensure safety of equipment used in the workplace.

Language is included under "Mine Safety and Health Administration" providing that a specific amount may be collected by the National Mine Health and Safety Academy and made available for mine safety and health education and training.

Language is included under "Mine Safety and Health Administration" providing that a specific amount may be collected from the approval and certification of equipment and materials and made available for other such activities.

Language is included under "Mine Safety and Health Administration" providing that the Department of Labor may accept lands, buildings, equipment, and other contributions from public and private sources for cooperative projects.

Language is included under "Mine Safety and Health Administration" providing that the Department of Labor may promote health and safety education and training through cooperative agreements with States, industry and safety associations.

Language is included under "Mine Safety and Health Administration" providing that the Department of Labor may recognize the Joseph A. Holmes Safety Association as the principal safety association and may provide funds or personnel as officers in local chapters or the national organization.

Language is included under "Mine Safety and Health Administration" providing that the Department of Labor may use appropriated funds to provide for costs associated with mine rescue and survival operations in the event of a major disaster.

Language is included under "Departmental Management—Salaries and Expenses" providing that the Bureau of International Labor Affairs may administer international labor activities through grants, subgrants or other arrangements.

Language is included under "Departmental Management—Salaries and Expenses" providing that funds available for program evaluation may be used to administer grants for evaluation purposes subject to certain conditions.

Language is included under "Departmental Management—Salaries and Expenses" providing that funds available to the Women's Bureau may be used for grants to service and promote the interests of women in the workplace.

Language is included under "Departmental Management—Salaries and Expenses" providing that certain amounts made available to the Women's Bureau shall be used for grants authorized by the Women in Apprenticeship and Nontraditional Occupations Act.

Language is included under "Veterans Employment and Training" providing that up to three percent of States' grants may be used for federal expenditures for data systems and contract support.

Language is included under "Veterans Employment and Training" providing that funds may be used for support specialists providing intensive services to wounded service members.

Language is included under "Veterans Employment and Training" providing that Department of Labor may reallocate up to three percent of funds provided among appropriated accounts.

Language is included under "Veterans Employment and Training" providing that the Department may award grants under section 2023 of Title 38, United States Code.

Language is included under "Veterans Employment and Training" providing that services may be provided to certain homeless or recently incarcerated veterans under section 2021, 2021A, and 2023 of Title 38, United States Code.

Language is included under "Veterans Employment and Training" providing that funds made available to assist homeless veterans may be used for data systems and contract support track participant and performance information.

Language is included under "Veterans Employment and Training" providing that the fees assessed pursuant to the HIRE Vets Medallion Award Fund shall be available to the Secretary for expenses of the HIRE Vets Medallion Award Program and that the start date prescribed in the Act shall not apply.

Language is included under "General Provisions" prohibiting the use of Job Corps funds to pay the salaries and bonuses at a rate in excess of Executive Level II.

Language is included under "General Provisions" prohibiting the use funds for procurement of goods or services rendered by forced or indentured child labor.

Language is included under "General Provisions" prohibiting the use of any funds appropriated for grants under section 414(c) of the American Competitiveness and Workforce Improvement Act of 1998, for purposes other than competitive grants for training individuals over the age of 16 who are not currently enrolled in school in the occupations and industries for which employers are using H–1B visa to hire foreign workers.

Language is included under "General Provisions" prohibiting the use of any funds appropriated for Employment and Training Administration programs to be used to pay the salaries and bonuses at a rate in excess of Executive Level II except under specific exclusions.

Language is included under "General Provisions" providing certain authorities related to the Secretary's security detail.

TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES

Language is included under "Health Resources and Services Administration—Health Workforce" overriding the proportional funding requirements in the Public Health Service Act for sections 751 and 762.

Language is included under "Health Resources and Services Administration—Health Workforce" providing permissive authority to the Secretary to waive requirements for entities awarded funds from sections 751(d)(2)(A) and 751(d)(2)(B).

Language is included under "Health Resources and Services Administration—Health Workforce" prohibiting the use of Health Workforce appropriations to carry out section 340G–1.

Language is included under "Health Resources and Services Administration—Health Workforce" providing that fees collected for the disclosure of information under the information reporting requirement program authorized by section 1921 of the Social Security Act shall be sufficient to recover the full costs of the operation program and shall remain available until expended to carry out that Act.

Language is included under "Health Resources and Services Administration—Health Workforce" allowing funds for the Nurse Corps and National Health Service Corps Scholarship and Loan programs to be used to make prior year adjustments.

Language is included under "Health Resources and Services Administration—Health Workforce" providing funding under the National Health Service Corps Loan Repayment Program for substance use disorder counselors and placement in Indian Health Service facilities.

Language is included under "Health Resources and Services Administration—Health Workforce" to provide funds for the purpose of supporting graduate education for physicians provided by public institutions of higher education and shall remain available until expended.

Language is included under "Health Resources and Services Administration—Ryan White HIV/AIDS Program" to make funds available to the Secretary to carry out grants and contracts under title XXVI or 311(c) for the purposes of ending the HIV/AIDS epidemic.

Language is included under "Health Resources and Services Administration—Rural Health" to provide funding for State Offices of Rural Health notwithstanding section 338J(k), which terminates the program after an aggregate funding amount.

Language is included under "Health Resources and Services Administration—Family Planning" to require the Secretary to carry out section 1001 solely in accordance with regulations or other conditions in effect as of January 18, 2017.

Language is included under "Health Resources and Services Administration—Family Planning" placing additional restrictions on the use of funds.

Language is included under "Centers for Disease Control and Prevention—CDC-Wide Activities and Program Support" permitting CDC to operate and maintain an aircraft.

Language is included under "Centers for Disease Control and Prevention—Buildings and Facilities" providing the use of funds to support acquisition, renovation, or replacement, of the National Institute Occupational Safety and Health's underground and surface coal mining research capacity.

Language is included under "Centers for Disease Control and Prevention—Buildings and Facilities" providing funds from former employees with existing Individual Learning Accounts unobligated to be available to support acquisition, renovation, or replacement, of the National Institute for Occupational Safety and Health's underground and surface coal mining research capacity.

Language is included under "Substance Abuse and Mental Health Services Administration—Mental Health" requiring states to spend 10 percent of the Mental Health Block Grant for programs for individuals with early serious mental illness.

Language is included under "Substance Abuse and Mental Health Services Administration—Mental Health" requiring states to spend five percent of the Mental Health Block Grant for programs for crisis care programs for individuals with early serious mental illness and children with serious mental and emotional disturbances.

Language is included under "Substance Abuse and Mental Health Services Administration—Mental Health" exempting the Mental Health Block Grant from the evaluation set-aside in section 241 of the Public Health Service Act.

Language is included under "Substance Abuse and Mental Health Services Administration—Substance Abuse Treatment" exempting the Substance Abuse Prevention and Treatment Block Grant from the evaluation set-aside in section 241 of the Public Health Service Act.

Language is included under "Centers for Medicare and Medicaid Services—Program Management" limiting the amount of funding available under that heading for quality improvement organizations.

Language is included under "Centers for Medicare and Medicaid Services—Program Management" directing the Secretary to obligate funds collected through user fees to carry out the navigator program, as well as outreach, education, and advertising related to the Affordable Care Act Exchange open enrollment period.

Language is included under "Centers for Medicare and Medicaid Services—Health Care Fraud and Abuse Control Account" providing funds to support the cost of the Senior Medicare Patrol program.

Language is included under "Administration for Children and Families—Low Income Home Energy Assistance" modifying the formula distribution of funds.

Language is included under "Administration for Children and Families—Refugee and Entrant Assistance" to specify the purposes of specified funds.

Language is included under "Administration for Children and Families—Refugee and Entrant Assistance" prohibiting use of funds for certain purposes.

Language is included under "Administration for Children and Families—Refugee and Entrant Assistance" requiring the Secretary of Health and Human Services to submit a spend plan to the Committee.

Language is included under "Administration for Children and Families—Payments to States for the Child Care and Development Block Grant" increasing the tribal set-aside.

Language is included under "Administration for Children and Families—Children and Families Services Programs" providing for payments under the Head Start Act for a cost of living adjustment, the calculation of a base grant, quality improvement funding, and the re-establishment of a Head Start Partnership program.

Language is included under Administration for Community Living continuing an assistive technology alternative financing program.

Language is included under Administration for Community Living prohibiting the use of the funds provided in the bill to pursue legal action on behalf of a protection and advocacy system described in section 103 of the Protection and Advocacy for Individuals with Mental Illness Act unless public notice has been provided within 90 of instituting action to the named person or their legal guardian.

Language is included under Administration for Community Living waiving the public notice requirement for individuals without a guardian, who are not competent to consent, who are wards of the State or subject to public guardianship.

Section 201 limits the amount available for official reception and representation expenses.

Section 202 limits the salary of an individual through an HHS grant or other extramural mechanism to not more than the rate of Executive Level II.

Section 203 prohibits the Secretary from using evaluation set-aside funds until the Committees on Appropriations of the House of Representatives and the Senate receive a report detailing the planned use of such funds.

Section 204 sets the PHS evaluation set-aside to 2.5 percent.

Section 205 permits the Secretary of HHS to transfer up to one percent of any discretionary funds between appropriations, provided that no appropriation is increased by more than three percent by any such transfer to meet emergency needs. Notification must be provided to the Committees on Appropriations at least 15 days in advance of any transfer.

Section 206 modifies the 60 day flexibility for National Health Service Corps contract terminations to provide more flexibility.

Section 207 prohibits the use of Title X funds unless the applicant for the award certifies to the Secretary that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.

Section 208 states that no provider of services under Title X shall be exempt from any state law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.

Section 209 prohibits the Secretary from denying participation in the Medicare Advantage program to entities who do not provider coverage or referrals for abortion services.

Section 210 prohibits funds from being used to advocate or promote gun control.

Section 211 limits assignments of Public Health Service staff to assist in child survival activities to not more than 60 employees.

Section 212 permits funding for HHS international HIV/AIDS and other infectious disease, chronic and environmental disease, and other health activities abroad to be spent under the State Department Basic Authorities Act of 1956.

Section 213 provides the Director of NIH, jointly with the Director of the Office of AIDS Research, the authority to transfer up to three percent of human immunodeficiency virus funds.

Section 214 makes NIH funds available for human immunodeficiency virus research available to the Office of AIDS Research.

Section 215 grants authority to the Office of the Director of the NIH to enter directly into transactions in order to implement the NIH Common Fund for medical research and permitting the Director to utilize peer review procedures, as appropriate, to obtain assessments of scientific and technical merit.

Section 216 clarifies that funds appropriated to NIH institutes and centers may be used for minor repairs or improvements to their buildings, up to $3,500,000 per project with a total limit for NIH of $45,000,000.

Section 217 transfers one percent of the funding made available for National Institutes of Health National Research Service Awards to the Health Resources and Services Administration and Agency for Healthcare Research and Quality.

Section 218 continues the Biomedical Advanced Research and Development Authority ten year contract authority.

Section 219 requires HHS to include certain information concerning the number of full-time federal employees and contractors working on the ACA in the fiscal year 2020 budget request.

Section 220 includes specific report requirements for CMS's marketplaces activities in the fiscal year 2020 budget request.

Section 221 prohibits CMS Program Account from being used to support risk corridor payments.

Section 222 directs the spending and transfer of amount in the Prevention and Public Health fund.

Section 223 modifies a provision relating to breast cancer screening.

Section 224 requires the NIH to continue to use existing guidance for calculating indirect cost negotiated rates.

Section 225 permits transfer authority within NIH, to the Director of NIH for activities related to opioid addiction, opioid alternatives, pain management, and addiction treatment.

Section 226 includes certain Congressional notification requirements.

Section 227 includes a provision related to a report on staffing.

Section 228 allows HHS to cover travel expenses when necessary for employees to obtain medical care when they are assigned to duty in a location with a public health emergency.

Section 229 allows certain donations for unaccompanied alien children.

Section 230 rescinds unobligated funds from prior-year Children's Health Insurance Program State allotments.

Section 231 modifies a provision relating to Members of Congress and oversight of facilities responsible for the care of unaccompanied alien children.

Section 232 requires the Department to make efforts to place unaccompanied alien children who are siblings together.

Section 233 prohibits funds from being used to facilitate the Secretary of Homeland Security taking certain actions against sponsors of unaccompanied alien children, except under certain conditions.

Section 234 prohibits funds from being used to house unaccompanied alien children in certain facilities, unless the Secretary grants limited-duration waivers.

Section 235 requires a weekly report on unaccompanied alien children who were separated from their parents or legal guardians and transferred to the care of the Office of Refugee Resettlement.

Section 236 prohibits funds from being awarded to an organization that does not comply with Federal nondiscrimination regulations.

Section 237 allows for primary and secondary school costs for eligible dependents of HHS personnel stationed in the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, and other territories or possessions of the United States.

Section 238 prohibits funds from being used to implement, enforce, or otherwise give effect to certain revisions of the Code of Federal Regulations published on July 7, 2018.

TITLE III—DEPARTMENT OF EDUCATION

Language is included under "Impact Aid" allowing continued eligibility for students affected by the deployment or death of their

military parent so long as the children attend school in the same local education agency they attended prior to the parent's death or deployment.

Language is included under "School Improvement Programs" allowing the Secretary of Education to reserve up to 5 percent of Supplemental Education Grants funds to provide technical assistance for these grants.

Language is included under "Special Education" clarifying the amounts required to be transferred to the Department of the Interior under the Grants to States program.

Language is included under "Special Education" outlining procedures for reducing a State's award because of a failure to meet the maintenance of State financial support requirements of the Individuals with Disabilities Education Act.

Language is included under "Special Education" authorizing the Department to use certain funds to provide technical assistance and support to States to improve data collection capacity.

Language is included under "Special Education" authorizing the Department to use funds appropriated for the State Personnel Development Grants program to evaluate program performance.

Language is included under "Special Education" permitting States to subgrant funds that they reserve for "Other State-level activities" under the Grants to States and Preschool Grants to States programs.

Language is included under "Special Education" allowing the Department to provide all States that apply for the State Incentive Grants program, in years in which five or fewer States apply for funding, 20 percent of the funds reserved for the program.

Language is included under "Rehabilitation Services" allowing the Secretary to use amounts that remain available after the reallotment of funds to States under the Vocational Rehabilitation State Grants program for innovative activities designed to improve the outcomes of individuals with disabilities.

Language is included under "Special Institutions for Persons with Disabilities" allowing the National Technical Institute for the Deaf to use, at its discretion, funds for the endowment program as authorized under section 207 of the Education of the Deaf Act of 1986.

Language is included under "Special Institutions for Persons with Disabilities" allowing Gallaudet University to use, at its discretion, funds for the endowment program as authorized under section 207 of the Education of the Deaf Act of 1986.

Language is included under "Student Aid Administration" requiring the Secretary to allocate new student loan borrower accounts to eligible student loan servicers on the basis of their past performance and their compliance with Federal and State law.

Language is included under "Student Aid Administration" requiring the Secretary to allow student loan borrowers to have their consolidated Federal student loans serviced by any student loan servicer.

Language is included under "Student Aid Administration" requiring any new servicing environment, including FSA Next Generation Processing and Servicing Environment, to include the participation of multiple student loan servicers.

Language is included under "Student Aid Administration" requiring any new servicing environment, including FSA Next Generation Processing and Servicing Environment, to include accountability measures that account for the performance of the portfolio and contractor compliance with Federal Student Aid (FSA) guidelines.

Language is included under "Student Aid Administration" requiring any new servicing environment, including FSA Next Generation Processing and Servicing Environment, to incentivize more support to borrowers at risk of delinquency or default.

Language is included under "Higher Education" allowing funds to carry out Title VI of the Higher Education Act and section 102(b)(6) of the Mutual Educational and Cultural Exchange Act of 1961 to be used to support visits and study in foreign countries for participants in foreign countries by individuals who are participating in advanced foreign language training and international studies in areas that are vital to United States national security and who plan to apply their language skills and knowledge of these countries in the fields of government, the professions, or international development.

Language is included under "Higher Education" allowing one percent of funds to carry out Title VI of the Higher Education Act and section 102(b)(6) of the Mutual Educational and Cultural Exchange Act of 1961 to be used for program evaluation, national outreach, and information dissemination activities.

Language is included under "Higher Education" allowing up to one-and-one-half percent of the funds made available under chapter 2 of subpart 2 of part A of Title IV of the Higher Education Act to be used for evaluation.

Language is included under "Historically Black College and University Capital Financing Program Account" allowing for the deferment of loans made under part D of Title III of the Higher Education Act for private Historically Black Colleges and Universities who meet certain conditions.

Language is included under "Historically Black College and University Capital Financing Program Account" allowing for the deferment of loans made under part D of Title III of the Higher Education Act for public Historically Black Colleges and Universities who meet certain conditions.

Language is included under "Departmental Management" restricting the Department from dissolving the Budget Service of the Department of Education, relative to the organization and operation of the Budget Service as in effect on January 1, 2018.

Language is included under "General Provisions" authorizing the transfer of up to one percent of discretionary funds between programs, projects, or activities as long as the transfer does not increase any program, project, or activity by more than three percent and no new program, project, or activity is created by such transfer.

Language is included under "General Provisions" allowing ESEA funds consolidated for evaluation purposes to be available from July 1, 2020 through September 30, 2021.

Language is included under "General Provisions" allowing certain institutions to continue to use endowment income for student scholarships.

Language is included under "General Provisions" extending the authorization of the National Advisory Committee on Institutional Quality and Integrity.

Language is included under "General Provisions" extending the authority to provide account maintenance fees to guaranty agencies for Federal student loans.

Language is included under "General Provisions" allowing funds to be made available for payments for student loan servicing to an institution of higher education for loans under part E of Title IV of the Higher Education Act of 1965.

Language is included under "General Provisions" allowing institutions of higher education, in certain conditions, to share data to a designated scholarship granting organizations, or other eligible organizations, to assist a student in applying for and receiving student financial assistance.

Language is included under "General Provisions" providing funds for loan cancellation for certain borrowers of loans under part D of title IV of the Higher Education Act.

Language is included under "General Provisions" providing funds for outreach to certain borrowers of loans made under part D of title IV of the Higher Education Act.

TITLE IV—RELATED AGENCIES

Language is included under "The Committee for Purchase from People Who are Blind or Severely Disabled" requiring that written agreements, with certain oversight provisions, be in place in order for authorized fees to be charged by certified nonprofit agencies.

Language is included under "Corporation for National and Community Service" requiring the Corporation to make awards on a competitive basis pursuant to section 501(a)(4)(F) of the 1990 Act, section 198P notwithstanding.

Language is included under "Corporation for National and Community Service" regarding changes to program requirements or policy through rulemaking.

Language is included under "Corporation for National and Community Service" regarding National Service Trust minimum share requirements.

Language is included under "Corporation for National and Community Service" limiting the use of an educational award under section 148(a)(4) to individuals who are veterans.

Language is included under "Corporation for National and Community Service" related to criminal background checks.

Language is included under "Corporation for National and Community Service" related to 1,200 hour service positions.

Language is included under "Federal Mediation and Conciliation Service—Salaries and Expenses" providing that fees charged for special training and other services and be retained and used for authorized purposes, that fees for arbitration services may only be used for training agency personnel, and that the Director may accept gifts and services in aid of any projects under the Director's jurisdiction.

TITLE V—GENERAL PROVISIONS

Section 501 permits the Secretaries of Labor, Health and Human Services, and Education to transfer unexpended balances of prior appropriations to accounts corresponding to current appropriations to be used for the same purpose and for the same periods of time for which they were originally appropriated.

Section 502 prohibits the obligation of funds beyond the current fiscal year unless expressly so provided.

Section 503 prohibits funds from being used to support or defeat legislation.

Section 504 limits the amount available for official reception and representation expenses for the Secretaries of Labor and Education, the Director of the Federal Mediation and Conciliation Service, and the Chairman of the National Mediation Board.

Section 505 requires grantees receiving Federal funds to clearly state the percentage of the total cost of the program or project that will be financed with Federal money.

Section 506 prohibits the use of funds for abortion services.

Section 507 provides exceptions to section 506 if the pregnancy is the result of an act of rape or incest, or is a threat to the life of the woman; clarifies that section 506 does not apply to State, locality, or private funds; and ensures that health care entities are not required to cover abortion services.

Section 508 prohibits use of funds for certain research involving human embryos.

Section 509 prohibits use of funds for any activity that promotes the legalization of any drug or substance included in schedule I of the schedules of controlled substances.

Section 510 prohibits use of funds to promulgate or adopt any final standard providing for a unique health identifier until legislation is enacted specifically approving the standard.

Section 511 prohibits funds to be obligated or expended on a contract with an entity that has not submitted a report on qualified veteran employees as required under 38 U.S.C. 4212(d).

Section 512 prohibits any transfer of funds made available in this Act except by the authority provided in this Act or another appropriation Act.

Section 513 limits funds in the bill for public libraries to those that comply with the requirements of the Children's Internet Protection Act.

Section 514 dictates the procedures for the reprogramming of any funds provided in the bill.

Section 515 continues a provision pertaining to appointments to federal scientific advisory committees to prevent the disclosure of information like political affiliation of candidates for appointment.

Section 516 requires each department and related agency funded through this Act to submit an operating plan within 45 days of enactment, detailing any funding allocations that are different than those specified in this Act, the accompanying detailed table, or budget request.

Section 517 requires the Secretaries of Labor, Health and Human Services, and Education to submit a quarterly report to the Committees on Appropriations of the House of Representatives and the Senate containing certain information on noncompetitive con-

tracts, grants, and cooperative agreements exceeding $500,000 in value.

Section 518 prohibits use of funds to process claims for credit for quarters of coverage based on work performed under a Social Security number that was not the claimant's number, where the performance of such work under such number has formed the basis for a conviction of the claimant of a violation of section 208(a)(6) or (7) of the Social Security Act.

Section 519 prohibits use of funds to implement a Social Security totalization agreement with Mexico.

Section 520 prohibits the use of funds for the downloading or exchanging of pornography.

Section 521 directs certain reporting requirements for conference expenditures.

Section 522 requires disclosure of U.S. taxpayer funding for programs used in advertising.

Section 523 authorizes performance partnership pilots.

Section 524 requires quarterly reports on the status of balances of appropriations from the Departments of Labor, Health and Human Services and Education.

Section 525 makes funds from the Children's Health Insurance Program Performance Bonus Fund unavailable for obligation in fiscal year 2020.

APPROPRIATIONS NOT AUTHORIZED BY LAW

Pursuant to clause 3(f)(1)(B) of rule XIII of the Rules of the House of Representatives, the following table lists the appropriations in the accompanying bill which are not authorized by law for the period concerned:

Agency Program	Last Year of Authorization	Authorization Level	Appropriations in Last Year of Authorization	Appropriations in this Bill
DEPARTMENT OF LABOR:				
ETA:				
Community Service Employment for Older Americans	FY 2019	$463,809,605	$400,000,000	$463,800,000
VETERANS' EMPLOYMENT AND TRAINING SERVICE:				
Homeless Veterans Program	FY 2019	50,000,000	50,000,000	60,000,000
DEPARTMENT OF HEALTH AND HUMAN SERVICES:				
HRSA:				
Health Careers Opportunity Program	FY 2014	Such Sums	14,153,000	20,000,000
Faculty Loan Repayment	FY 2014	5,000,000	1,187,000	1,190,000
Scholarships for Disadvantaged Students	FY 2014	Such Sums	44,857,000	53,470,000
Primary Care Training and Enhancement	FY 2014	Such Sums	36,831,000	48,924,000
Oral Health Training Programs	FY 2012	25,000,000	40,673,000	40,673,000
Area Health Education Centers	FY 2014	125,000,000	30,250,000	41,250,000
Education & Training—Geriatrics				
(Workforce Development)	FY 2014	10,800,000	33,237,000	43,384,000
(Career Incentive Awards)	FY 2013	10,000,000		
Loan Repayment Program for Substance Use Disorder Treatment Workforce	N/A	N/A	N/A	25,000,000
Mental and Substance Use Disorder Workforce Training Demonstration	N/A	N/A	N/A	10,000,000
National Center for Workforce Analysis	FY 2014	7,500,000	4,651,000	5,663,000
Nurse Education, Practice, Quality and Retention Program	FY 2016	Such Sums	41,913,000	43,590,000
Nurse Practitioner Residency Training	N/A	N/A	N/A	20,000,000
Nursing Education Loan Repayment	FY 2007	Such Sums	31,055,000	90,620,000
NURSE Corps Scholarship and Loan Repayment Program	FY 2007	Such Sums	87,135,000	90,620,000
Nurse Faculty Loan Program	FY 2014	Such Sums	24,500,000	29,640,000
Graduate Medical Education	N/A		N/A	30,000,000
Healthy Start	FY 2013	Formula	100,746,000	130,500,000
Emergency Relief—Part A	FY 2013	789,471,000	649,373,000	677,535,000
Comprehensive Care—Part B	FY 2013	1,562,169,000	1,314,446,000	1,331,665,000
Early Intervention—Part C	FY 2013	285,766,000	205,544,000	207,567,000
Coordinated Services and Access to Research for Women, Infants, Children and Youth—Part D	FY 2013	87,273,000	75,088,000	76,047,000
Dental Reimbursement—Part F	FY 2013	15,802,000	12,991,000	13,296,000
AIDS Education and Training Centers—Part F	FY 2013	42,178,000	33,275,000	34,047,000
Special Projects of National Significance—Part F	FY 2013	25,000,000	25,000,000	25,000,000
Ending HIV/AIDS Initiative	N/A	N/A	N/A	70,000,000
Organ Transplantation	FY 1993	Such Sums	2,767,000	32,049,000
Rural Health Outreach Grants	FY 2012	45,000,000	55,553,000	84,609,000
Rural Hospital Flexibility Grants	FY 2012	Such Sums	41,040,000	59,000,000

Agency Program	Last Year of Authorization	Authorization Level	Appropriations in Last Year of Authorization	Appropriations in this Bill
State Offices of Rural Health	FY 2002	Such Sums	4,000,000	12,500,000
Telehealth	FY 2006	Such Sums	6,814,000	28,500,000
Family Planning Grants	FY 1985	158,400,000	142,500,000	400,000,000
CDC:				
Sexually Transmitted Diseases Grants	FY 1998	Such Sums	113,671,000	167,310,000
National Cancer Registries	FY 2003	Such Sums	N/A	51,440,000
National Center for Health Statistics	FY 2003	Such Sums	125,899,000	160,397,000
WISEWOMAN	FY 2003	Such Sums	12,419,000	46,770,000
Asthma (Environmental)	FY 2005	Such Sums	32,422,000	34,000,000
Folic Acid	FY 2005	Such Sums	2,188,000	3,150,000
Injury Prevention and Control	FY 2005	Such Sums	138,237,000	697,559,000
Oral Health Promotion	FY 2005	Such Sums	11,204,000	20,000,000
Safe Motherhood/Infant Health Promotion	FY 2005	Such Sums	44,738,000	58,000,000
Grants to Promote Childhood Nutrition and Physical Activity	FY 2005	Such Sums	26,835,000	58,920,000
Screening, Referrals, and Education Regarding Lead Poisoning	FY 2005	40,000,000	36,474,000	40,000,000
Birth Defects, Developmental Disability, Disability and Health	FY 2007	Such Sums	122,242,000	161,560,000
Developmental Disabilities Surveillance and Research Program (Autism)	FY 2011	21,000,000	21,380,000	23,100,000
Breast and Cervical Cancer	FY 2012	275,000,000	204,779,000	245,000,000
Johanna's Law	FY 2014	18,000,000	4,972,000	12,000,000
Epidemiology Laboratory Capacity Grants	FY 2014	190,000,000	32,424,000	40,000,000
National TB Strategy/Grants	FY 2013	243,101,000	132,997,000	152,256,000
Public Health Workforce and Career Development	FY 2013	39,500,000	64,000,000	56,000,000
National Diabetes Prevention Program	FY 2014	Such Sums	10,000,000	30,000,000
Section 317 Immunization	FY 2014	Such Sums	610,847,000	650,000,000
Congenital Heart Disease Programs	FY 2015	Such Sums	4,000,000	8,000,000
Young Women's Breast Health Awareness and Support of Young Women Diagnosed with Breast Cancer (PHSA 399NN).	FY 2019	4,900,000	4,960,000	4,960,000
SAMHSA:				
State Opioid Response Grants	N/A	N/A	N/A	1,500,000,000
AHRQ:				
Research on Health Costs, Quality, and Outcomes	FY 2005	Such Sums	324,000,000	358,217,000
ACF:				
Low Income Home Energy Assistance Program	FY 2007	5,100,000,000	2,161,170,000	3,840,304,000
Children and Families Services Programs				
Adoption and Legal Guardianship Incentive Payments	FY 2016	43,000,000	37,943,000	75,000,000
Native American Programs	FY 2002	Such Sums	45,826,000	60,000,000
Community Services Block Grant	FY 2003	Such Sums	645,762,000	760,000,000

Head Start	FY 2012	Such Sums	7,968,544,000	11,563,095,000
Runaway and Homeless Youth Programs	FY 2013	Such Sums	107,852,000	125,280,000
CAPTA programs	FY 2015	Such Sums	143,981,000	179,000,000
Family Violence Programs	FY 2015	178,500,000	139,500,000	175,000,000
Child Welfare Services	FY 2016	325,000,000	268,735,000	268,735,000
Refugee and Entrant Assistance Transitional and Medical Services	FY 2002	Such Sums	227,243,000	354,000,000
Social Services	FY 2002	Such Sums	158,600,000	155,000,000
Preventive Health	FY 2002	Such Sums	4,835,000	4,600,000
Targeted Assistance	FY 2002	Such Sums	49,477,000	47,601,000
Victims of Torture	FY 2007	25,000,000	9,817,000	19,000,000
ACL:				
Alzheimer's Diseases Demonstration	FY 2002	Such Sums	11,483,000	27,500,000
Lifespan Respite Care	FY 2011	94,810,000	2,495,000	5,500,000
State Health Insurance Assistance Program	FY 1996	10,000,000	N/A	55,000,000
Developmental Disabilities	FY 2007	Such Sums	155,115,000	187,582,000
Voting Access for People with Disabilities	FY 2005	17,410,000	13,879,000	8,119,000
Elder Justice/Adult Protective Services	FY 2014	129,000,000	0	20,874,000
Assistive Technology	FY 2010	Such Sums	25,000,000	36,000,000
PHSSEF:				
National Disaster Medical System	FY 2018	52,700,000	57,404,000	57,404,000
Medical Reserve Corps	FY 2018	11,200,000	6,000,000	6,000,000
Hospital Preparedness Program	FY 2018	374,700,000	254,555,000	316,555,000
BARDA	FY 2018	415,000,000	536,700,000	566,700,000
Project BioShield	FY 2018	2,800,000,000	710,000,000	735,000,000
Strategic National Stockpile	FY 2018	533,800,000	610,000,000	620,000,000
DEPARTMENT OF EDUCATION:				
National Technical Institute for the Deaf	FY 2015	Such Sums	67,016,000	80,000,000
Gallaudet University	FY 2015	Such Sums	120,275,000	138,361,000
Aid for Institutional Development	FY 2015	Such Sums	429,762,000	917,464,000
Aid for Hispanic-Serving Institutions	FY 2015	Such Sums	109,223,000	150,000,000
International Education And Foreign Language	FY 2015	Such Sums	72,164,000	89,130,000
Teacher Quality Partnerships	FY 2011	Such Sums	43,000,000	53,092,000
Federal TRIO Programs	FY 2015	Such Sums	839,752,000	1,160,000,000
GEAR UP	FY 2015	Such Sums	301,639,000	395,000,000
Child Care Access Means Parents in School	FY 2015	Such Sums	15,134,000	60,000,000
Federal Work-Study Programs	FY 2015	Such Sums	989,728,000	1,434,000,000
Federal Supplemental Educational Opportunity Grants	FY 2015	Such Sums	733,130,000	1,028,000,000
Discretionary Federal Pell Grant	FY 2018	Such Sums	22,475,352,000	22,475,352,000
Postsecondary Program for Students with Intellectual Disabilities	FY 2015	Such Sums	11,800,000	11,800,000
Graduate Assistance in Areas of National Need	FY 2015	35,000,000	29,293,000	24,047,000

Agency Program	Last Year of Authorization	Authorization Level	Appropriations in Last Year of Authorization	Appropriations in this Bill
Fund for the Improvement of Postsecondary Education	FY 2015	Such Sums	67,775,000	10,000,000
Institute of Education Sciences	FY 2009	Such Sums	658,247,000	650,000,000
Student Aid Administration	FY 2015	Such Sums	1,396,924,000	1,678,943,000
Special Programs for Migrant Students	FY 2015	Such Sums	37,474,000	50,000,000
Comprehensive Centers	FY 2009	Such Sums	57,113,000	60,400,000
IDEA Grants for Infants and Families	FY 2011	Such Sums	438,548,000	491,300,000
IDEA National Activities	FY 2011	Such Sums	240,734,000	264,452,000
RELATED AGENCIES:				
Corporation for Public Broadcasting	FY 1996	425,000,000	275,000,000	465,000,000
Corporation for National and Community Service	FY 2014	Such Sums	1,049,954,000	1,138,106,000

PROGRAM DUPLICATION

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, no provision of this bill establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

COMMITTEE HEARINGS

For the purposes of section 103(i) of H. Res. 6 of the 116th Congress—

The following hearings were used to develop or consider the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2020:

The Subcommittee on Labor, Health and Human Services, Education, and Related Agencies (Subcommittee) held an oversight hearing on February 6, 2019, entitled "Impact of the Administration's Policies Affecting the Affordable Care Act." The Subcommittee received testimony from:

Aviva Aron-Dine, Ph.D., Vice President for Health Policy, Center on Budget and Policy Priorities.

Ed Haislmaier, Senior Research Fellow, The Heritage Foundation.

Peter Morley, Patient Advocate.

Joshua Peck, Co-Founder, Get America Covered.

The Subcommittee held an oversight hearing on February 27, 2019, entitled "Reviewing the Administration's Unaccompanied Children Program." The Subcommittee received testimony from:

Altha Stewart, M.D., President, American Psychiatric Association.

Michelle Brane, Director of the Migrant Rights and Justice Program, Women's Refugee Commission.

Jennifer Podkul, Senior Director for Policy and Advocacy, Kids in Need of Defense.

Andrew Arthur, Resident Fellow in Law and Policy, Center for Immigration Studies.

The Subcommittee held an oversight hearing on March 6, 2019, entitled "Protecting Student Loan Borrowers: Loan Servicing Oversight." The Subcommittee received testimony from:

Colleen Campbell, Director, Postsecondary Education, Center for American Progress

Preston Cooper, Research Analyst in Higher Education Policy, American Enterprise Institute

Joanna Darcus, Massachusetts Legal Assistance Corporation Racial Justice Fellow, National Consumer Law Center

Bryon Gordon, Assistant Inspector General for Audit, Department of Education Office of Inspector General

Shennan Kavanaugh, Deputy Chief of the Consumer Protection Division, Office of Massachusetts Attorney General Maura Healy

The Subcommittee held an oversight hearing on March 7, 2019, entitled "Addressing the Public Health Emergency of Gun Violence." The Subcommittee received testimony from:

Andrew Morral, Ph.D., Senior Behavioral Scientist, RAND Corporation

Ronald Stewart, M.D., FACS, Director of Trauma Programs, American College of Surgeons Committee on Trauma

Daniel Webster, Sc.D., Director, Johns Hopkins Center for Gun Policy and Research

John Lott, Ph.D., President, Crime Prevention Research Center

The Subcommittee held an oversight hearing on March 12, 2019, entitled "Oversight of For-Profit Colleges: Protecting Students and Taxpayer Dollars from Predatory Practices." The Subcommittee received testimony from:

The Honorable Richard J. Durbin, United States Senator

Kevin Carey, Vice President, Education Policy and Knowledge Management, New America

Marc Jerome, President, Monroe College

Eric Longo, Former For-Profit College Student

Robert Shireman, Director, Higher Education Excellence and Senior Fellow, The Century Foundation

The Subcommittee held a budget hearing on March 13, 2019, entitled "Department of Health and Human Services Budget Request for Fiscal Year 2020." The Subcommittee received testimony from:

The Honorable Alex M. Azar II, Secretary, Department of Health and Human Services

The Subcommittee held a budget hearing on March 26, 2019, entitled "Department of Education Fiscal Year 2020 Budget Request." The Subcommittee received testimony from:

The Honorable Betsy Devos, Secretary, Department of Education

The Subcommittee held a budget hearing on March 27, 2019 entitled "Member Day Hearing." The Subcommittee received testimony from:

The Honorable Brian K. Fitzpatrick, Member of Congress

The Honorable Debra A. Haaland, Member of Congress

The Honorable Jim Hagedorn, Member of Congress

The Honorable Sheila Jackson Lee, Member of Congress

The Honorable Ro Khanna, Member of Congress

The Honorable Betty McCollum, Member of Congress

The Honorable Christopher H. Smith, Member of Congress

The Honorable Thomas R. Suozzi, Member of Congress

The Honorable Peter J. Visclosky, Member of Congress

The Honorable Susan Wild, Member of Congress

The Subcommittee held a budget hearing on April 2, 2019, entitled "National Institutes of Health Fiscal Year 2020 Budget Request." The Subcommittee received testimony from:

Francis Collins, M.D., Ph.D., Director, National Institutes of Health

Diana Bianchi, M.D., Director, Eunice Kennedy Shriver National Institute of Child Health and Human Development

Anthony Fauci, M.D., Director, National Institute of Allergy and Infectious Diseases

Gary Gibbons, M.D., Director, National Heart, Lung, and Blood Institute

Doug Lowy, M.D., Deputy Director, National Cancer Institute

Nora Volkow, M.D., Director, National Institute on Drug Abuse

The Subcommittee held a budget hearing on April 3, 2019, entitled "Department of Labor Fiscal Year 2020 Budget Request." The Subcommittee received testimony from:

The Honorable Alexander Azar, Secretary, Department of Labor

The Subcommittee held an oversight hearing on April 9, 2019, entitled "Combatting Wage Theft." The Subcommittee received testimony from:

Paul DeCamp, Member, Epstein, Becker & Green

Laura Huizar, Senior Staff Attorney, National Employment Law Project

Daniel Katz, Senior Counsel, Washington Lawyers' Committee for Civil Rights and Urban Affairs

The Honorable Kwame Raoul, Attorney General of the State of Illinois

The Subcommittee held a budget hearing on April 9, 2019, entitled "Public Witness Hearing." The Subcommittee received testimony from:

Kathy Bates, National Spokesperson, LE&RN, Lymphatic Education & Research Network (LE&RN)

Terri Bissonette, National Indian Education Association

Mairead Bernadita Brennan, Evolutions After School Program Student/Yale Peabody Museum of Natural History, New Haven, Connecticut, on behalf of the American Alliance of Museums

Lucero Castaneda, National Council for Community and Education Partnerships (NCCEP)

Sancia Celestin, National College Access Network

Clare Coleman, National Family Planning & Reproductive Health Association

Rachel Conant, Senior Director, Federal Affairs, Alzheimer's Association and Alzheimer's Impact Movement

Amanda Peel Crowley, Founding Board Member, Mending Minds Foundation

Brandy Dailey, Council for Opportunity in Education

Shawn Dougherty, AFSCME Council 4 member and Substance Abuse Counselor, American Federation of State County and Municipal Employees (AFSCME)

Dr. Herman Felton, Wiley College

Marilyn Geller, CEO, Celiac Disease Foundation

Janet Hamilton, Director of Science and Policy, Council of State and Territorial Epidemiologists (CSTE)

Timothy Haylon, Myotonic Dystrophy Foundation

Donna Jones, Spina Bifida Association (SBA)

Myra Jones-Taylor, Ph.D., ZERO TO THREE

Brian Lovell, Assistant Superintendent, Union County Public Schools (KY)

Melinda Mack, Executive Director, New York Association of Training and Employment Professionals (NYATEP)

Jesse Milan, Jr., AIDS United

J. Carter Ralphe, M.D., Chief of the Division of Pediatric Cardiology within the University of Wisconsin School of Medicine and Public Health and co-director of UW Health, American Heart Association

Valerie Montgomery Rice, M.D., FACOG, President & Dean, Morehouse School of Medicine, Association of Minority Health Professions Schools

Nate Smith, M.D., M.P.H., Director and State Health Officer for the Arkansas Department of Health. President-elect ASTHO, Association of State and Territorial Health Officials (ASTHO)

Shawonda Swain, VP & COO, Boys & Girls Clubs of Hartford, CT

Brian Walach, I AM ALS

BUDGETARY IMPACT OF FY 2020 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93–344, AS AMENDED

In millions of dollars

COMPARISON WITH BUDGET RESOLUTION

Section 308(a)(1)(A) of the Congressional Budget Act requires the report accompanying a bill providing new budget authority to contain a statement comparing the levels in the bill to the suballocations submitted under section 302(b) of the Act for the most recently agreed to concurrent resolution on the budget for the applicable fiscal year.

[In millions of dollars]

	302(b) Allocation		This Bill	
	Budget Authority	Outlays	Budget Authority	Outlays
Comparison of amounts in the bill with Committee allocations to its subcommittees: Subcommittee on Labor, Health and Human Services, Education and Related Agencies				
General Purpose Discretionary	XXX,XXX	XXX,XXX	XXX,XXX	[1] XXX,XXX
Mandatory	XXX,XXX	XXX,XXX	XXX,XXX	[1] XXX,XXX

[1] Includes outlays from prior-year budget authority.

NOTE.—

FIVE-YEAR OUTLAY PROJECTIONS

In compliance with section 308(a)(1)(B) of the Congressional Budget and Impoundment Control Act of 1974 (Public Law 93–344), as amended, the following table contains five-year projections associated with the budget authority provided in the accompanying bill.

[In millions of dollars]

				Outlays
Projection of outlays associated with the recommendation:				
2020				[1] XXX,XXX
2021				XX,XXX
2022				XX,XXX
2023				X,XXX
2024 and future years				X,XXX

[1] Excludes outlays from prior-year budget authority.

FINANCIAL ASSISTANCE TO STATE AND LOCAL GOVERNMENTS

In accordance with section 308(a)(1)(C) of the Congressional Budget Act of 1974, as amended, the Congressional Budget Office has provided the following estimates of new budget authority and outlays provided by the accompanying bill for financial assistance to State and local governments.

[In millions of dollars]

	Budget Authority	Outlays
Financial assistance to State and local governments for 2020	X,XXX	[1] X,XXX

[1] Excludes outlays from prior-year budget authority.

FULL COMMITTEE VOTES

[TO BE PROVIDED]

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
TITLE I--DEPARTMENT OF LABOR							
EMPLOYMENT AND TRAINING ADMINISTRATION							
Training and Employment Services							
Grants to States:							
Adult Training, current year	D	133,556	133,556	188,000	+54,444	+54,444	FF
Advance from prior year	NA	(712,000)	(712,000)	(712,000)	---	---	
FY 2021	D	712,000	712,000	712,000	---	---	
Subtotal		845,556	845,556	900,000	+54,444	+54,444	
Youth Training	D	903,416	903,416	964,000	+60,584	+60,584	FF
Dislocated Worker Assistance, current year	D	180,860	180,860	243,360	+62,500	+62,500	FF
Advance from prior year	NA	(860,000)	(860,000)	(860,000)	---	---	
FY 2021	D	860,000	860,000	860,000	---	---	
Subtotal		1,040,860	1,040,860	1,103,360	+62,500	+62,500	
Subtotal, Grants to States		2,789,832	2,789,832	2,967,360	+177,528	+177,528	
Current Year		(1,217,832)	(1,217,832)	(1,395,360)	(+177,528)	(+177,528)	
FY 2021		(1,572,000)	(1,572,000)	(1,572,000)	---	---	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
National Programs:							
Dislocated Worker Assistance National Reserve:							
Current year	D	20,859	20,859	170,859	+150,000	+150,000	FF
Advance from prior year	NA	(200,000)	(200,000)	(200,000)	---	---	
FY 2021	D	200,000	113,858	200,000	---	+86,142	
Subtotal		220,859	134,717	370,859	+150,000	+236,142	
Subtotal, Dislocated Worker Assistance		1,261,719	1,175,577	1,474,219	+212,500	+298,642	
Native American programs	D	54,500	---	55,000	+500	+55,000	FF
Migrant and Seasonal Farmworker programs	D	88,896	---	98,896	+10,000	+98,896	FF
YouthBuild activities	D	89,534	84,534	127,500	+37,966	+42,966	FF
Reintegration of Ex-Offenders	D	93,079	78,324	100,000	+6,921	+21,676	
Workforce Data Quality Initiative	D	6,000	---	8,000	+2,000	+8,000	
Apprenticeship programs	D	160,000	160,000	250,000	+90,000	+90,000	
Total, National Programs		712,868	457,575	1,010,255	+297,387	+552,680	
Current Year		(512,868)	(343,717)	(810,255)	(+297,387)	(+466,538)	
FY 2021		(200,000)	(113,858)	(200,000)	---	(+86,142)	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
Total, Training and Employment Services (TES)...		3,502,700	3,247,407	3,977,615	+474,915	+730,208	
Current Year.....		(1,730,700)	(1,561,549)	(2,205,615)	(+474,915)	(+644,066)	
FY 2021.....		(1,772,000)	(1,685,858)	(1,772,000)	---	(+86,142)	
Job Corps							
Operations.....	D	1,603,325	908,457	1,603,325	---	+694,868	FF
Construction, Rehabilitation and Acquisition.....	D	83,000	75,016	233,000	+150,000	+157,984	FF
Administration.....	D	32,330	32,110	32,330	---	+220	
Total, Job Corps.....		1,718,655	1,015,583	1,868,655	+150,000	+853,072	
Current Year.....		(1,718,655)	(1,015,583)	(1,868,655)	(+150,000)	(+853,072)	
Community Service Employment For Older Americans.....	D	400,000	---	463,800	+63,800	+463,800	FF
Federal Unemployment Benefits and Allowances (indefinite).....	M	790,000	680,000	680,000	-110,000	---	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
State Unemployment Insurance and Employment Service Operations							
Unemployment Compensation (UI):							
State Operations	TF	2,356,816	2,434,230	2,434,230	+77,414	---	
Reemployment eligibility assessments--UI integrity	TF	117,000	117,000	117,000	---	---	
Permissible cap adjustment	TF	33,000	58,000	58,000	+25,000	---	
UI Integrity Center of Excellence	TF	9,000	6,000	9,000	---	+3,000	
Subtotal, Unemployment Compensation		2,515,816	2,615,230	2,618,230	+102,414	+3,000	
Federal-State UI National Activities	TF	12,000	48,000	12,000	---	-36,000	
Employment Service (ES):							
Grants to States:							
Federal Funds	D	21,413	21,413	21,413	---	---	FF
Trust Funds	TF	641,639	641,639	658,587	+16,948	+16,948	FF
Subtotal, Grants to States		663,052	663,052	680,000	+16,948	+16,948	FF
ES National Activities	TF	19,818	19,818	22,318	+2,500	+2,500	
Subtotal, Employment Service		682,870	682,870	702,318	+19,448	+19,448	
Federal Funds		(21,413)	(21,413)	(21,413)	---	---	
Trust Funds		(661,457)	(661,457)	(680,905)	(+19,448)	(+19,448)	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Foreign Labor Certifications and Related Activities:						
Federal Administration	TF	48,028	56,278	56,278	+8,250	---
Grants to States	TF	14,282	14,282	14,282	---	---
Subtotal, Foreign Labor Certification		62,310	70,560	70,560	+8,250	---
One-Stop Career Centers/Labor Market Information	D	62,653	59,326	62,653	---	+3,327 FF
Total, State UI and ES		3,335,649	3,475,986	3,465,761	+130,112	-10,225
Federal Funds		(84,066)	(80,739)	(84,066)	---	(+3,327)
Trust Funds		(3,251,583)	(3,395,247)	(3,381,695)	(+130,112)	(-13,552)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Program Administration						
Training and Employment	D	62,040	59,973	62,040	---	+2,067
Trust Funds	TF	8,639	8,351	8,639	---	+288
Employment Security	D	3,440	3,317	3,440	---	+123
Trust Funds	TF	39,264	37,864	39,264	---	+1,400
Apprenticeship Services	D	36,160	35,914	36,160	---	+246
Executive Direction	D	7,034	6,828	7,034	---	+206
Trust Funds	TF	2,079	2,018	2,079	---	+61
Total, Program Administration		158,656	154,265	158,656	---	+4,391
Federal Funds		(108,674)	(106,032)	(108,674)	---	(+2,642)
Trust Funds		(49,982)	(48,233)	(49,982)	---	(+1,749)
Total, Employment and Training Administration		9,905,660	8,573,241	10,614,487	+708,827	+2,041,246
Federal Funds		6,604,095	5,129,761	7,182,810	+578,715	+2,053,049
Current Year		(4,832,095)	(3,443,903)	(5,410,810)	(+578,715)	(+1,966,907)
FY 2021		(1,772,000)	(1,685,858)	(1,772,000)	---	(+86,142)
Trust Funds		3,301,565	3,443,480	3,431,677	+130,112	-11,803

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
EMPLOYEE BENEFITS SECURITY ADMINISTRATION (EBSA)						
Salaries and Expenses						
Enforcement and Participant Assistance	D	147,400	157,696	147,400	---	-10,296
Policy and Compliance Assistance	D	26,901	29,105	26,901	---	-2,204
Executive Leadership, Program Oversight and Administration	D	6,699	6,699	8,854	+2,155	+2,155
Total, EBSA		181,000	193,500	183,155	+2,155	-10,345
PENSION BENEFIT GUARANTY CORPORATION (PBGC)						
Pension Benefit Guaranty Corporation Fund						
Consolidated Administrative budget	NA	(445,363)	(452,858)	(452,858)	(+7,495)	---
WAGE AND HOUR DIVISION, Salaries and Expenses	D	229,000	232,568	298,131	+69,131	+65,563
OFFICE OF LABOR-MANAGEMENT STANDARDS, Salaries and Expenses	D	41,187	49,134	40,187	-1,000	-8,947

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
OFFICE OF FEDERAL CONTRACT COMPLIANCE PROGRAMS,						
Salaries and Expenses	D	103,476	103,576	120,000	+16,524	+16,424
OFFICE OF WORKERS' COMPENSATION PROGRAMS	D					
Salaries and Expenses	D	115,424	115,609	118,609	+3,185	+3,000
Trust Funds	TF	2,177	2,173	2,173	-4	---
Total, Salaries and Expenses		117,601	117,782	120,782	+3,181	+3,000
Federal Funds		(115,424)	(115,609)	(118,609)	(+3,185)	(+3,000)
Trust Funds		(2,177)	(2,173)	(2,173)	(-4)	---
Special Benefits						
Federal Employees' Compensation Benefits	M	227,000	232,600	232,600	+5,600	---
Longshore and Harbor Workers' Benefits	M	3,000	2,000	2,000	-1,000	---
Total, Special Benefits		230,000	234,600	234,600	+4,600	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Special Benefits for Disabled Coal Miners						
Benefit Payments	M	20,000	30,000	30,000	+10,000	---
Administration	M	5,319	4,970	4,970	-349	---
Subtotal, FY 2020 program level		25,319	34,970	34,970	+9,651	---
Less funds advanced in prior year	M	-15,000	-14,000	-14,000	+1,000	---
Total, Current Year		10,319	20,970	20,970	+10,651	---
New advances, 1st quarter, FY 2021	M	14,000	14,000	14,000	---	---
Total, Special Benefits for Disabled Coal Miners		24,319	34,970	34,970	+10,651	---
Administrative Expenses, Energy Employees Occupational Illness Compensation Fund						
Administrative Expenses	M	59,098	59,846	59,846	+748	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Black Lung Disability Trust Fund						
Benefit Payments and Interest on Advances	M	257,256	293,464	293,464	+36,208	---
Workers' Compensation Programs, Salaries and Expenses	M	38,246	38,246	38,246	---	---
Departmental Management, Salaries and Expenses	M	31,994	32,844	32,844	+850	---
Departmental Management, Inspector General	M	330	330	330	---	---
Subtotal, Black Lung Disability		327,826	364,884	364,884	+37,058	---
Treasury Department Administrative Costs	M	356	356	356	---	---
Total, Black Lung Disability Trust Fund		328,182	365,240	365,240	+37,058	---
Total, Workers' Compensation Programs		759,200	812,438	815,438	+56,238	+3,000
Federal Funds		757,023	810,265	813,265	+56,242	+3,000
Current year		(743,023)	(796,265)	(799,265)	(+56,242)	(+3,000)
FY 2020		(14,000)	(14,000)	(14,000)	---	---
Trust Funds		2,177	2,173	2,173	-4	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA)						
Salaries and Expenses						
Safety and Health Standards	D	18,000	18,000	23,100	+5,100	+5,100
Federal Enforcement	D	209,000	212,780	246,383	+37,383	+33,603
Whistleblower enforcement	D	17,500	18,624	18,809	+1,309	+185
State Programs	D	102,350	102,350	123,233	+20,883	+20,883
Technical Support	D	24,469	24,469	30,597	+6,128	+6,128
Compliance Assistance:						
Federal Assistance	D	73,481	73,914	86,623	+13,142	+12,709
State Consultation Grants	D	59,500	59,500	64,687	+5,187	+5,187
Training Grants	D	10,537	---	12,690	+2,153	+12,690
Subtotal, Compliance Assistance	D	143,518	133,414	164,000	+20,482	+30,586
Safety and Health Statistics	D	32,900	38,400	41,168	+8,268	+2,768
Executive Direction and Administration	D	10,050	9,496	13,618	+3,568	+4,122
Total, OSHA		557,787	557,533	660,908	+103,121	+103,375

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
MINE SAFETY AND HEALTH ADMINISTRATION						
Salaries and Expenses						
Coal Enforcement	D	160,000	---	178,608	+18,608	+178,608
Metal/Non-Metal Enforcement	D	94,500	---	105,490	+10,990	+105,490
Mine Safety and Health Enforcement	D	---	252,640	---	---	-252,640
Standards Development	D	4,500	5,382	5,023	+523	-359
Assessments	D	6,627	7,445	7,398	+771	-47
Educational Policy and Development	D	39,320	38,559	43,893	+4,573	+5,334
Technical Support	D	35,041	34,079	39,116	+4,075	+5,037
Program Evaluation and Information Resources (PEIR)	D	17,990	21,583	20,082	+2,092	-1,501
Program Administration	D	15,838	16,355	17,680	+1,842	+1,325
Total, Mine Safety and Health Administration		373,816	376,043	417,290	+43,474	+41,247
Total, Worker Protection Agencies		1,603,867	1,630,136	1,840,453	+236,586	+210,317
Federal Funds		(1,601,690)	(1,627,963)	(1,838,280)	(+236,590)	(+210,317)
Trust Funds		(2,177)	(2,173)	(2,173)	(-4)	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
BUREAU OF LABOR STATISTICS						
Salaries and Expenses						
Employment and Unemployment Statistics	D	211,000	211,000	237,900	+26,900	+26,900
Labor Market Information	TF	65,000	65,000	65,000	---	---
Prices and Cost of Living	D	210,000	210,000	222,900	+12,900	+12,900
Compensation and Working Conditions	D	83,500	83,500	88,400	+4,900	+4,900
Productivity and Technology	D	10,500	10,500	14,200	+3,700	+3,700
Executive Direction and Staff Services	D	35,000	75,000	47,400	+12,400	-27,600
Total, Bureau of Labor Statistics		615,000	655,000	675,800	+60,800	+20,800
Federal Funds		550,000	590,000	610,800	+60,800	+20,800
Trust Funds		65,000	65,000	65,000	---	---
OFFICE OF DISABILITY EMPLOYMENT POLICY						
Salaries and Expenses	D	38,203	27,000	38,500	+297	+11,500

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
DEPARTMENTAL MANAGEMENT						
Salaries and Expenses						
Executive Direction	D	30,250	32,027	30,250	---	-1,777
Departmental Program Evaluation	D	8,040	8,040	8,040	---	---
Legal Services	D	123,745	128,066	128,066	+4,321	---
Trust Funds	TF	308	308	308	---	---
International Labor Affairs	D	86,125	18,500	122,125	+36,000	+103,625
Administration and Management	D	28,450	29,004	29,004	+554	---
Adjudication	D	35,000	35,000	35,000	---	---
Women's Bureau	D	13,750	3,525	17,750	+4,000	+14,225
Civil Rights Activities	D	6,880	6,880	6,880	---	---
Chief Financial Officer	D	5,516	5,516	5,516	---	---
Total, Departmental Management Salaries and expenses		338,064	266,866	382,939	+44,875	+116,073
Federal Funds		(337,756)	(266,558)	(382,631)	(+44,875)	(+116,073)
Trust Funds		(308)	(308)	(308)	---	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Veterans Employment and Training						
State Administration, Grants	TF	180,000	180,000	180,000	---	---
Transition Assistance Program	TF	23,379	29,379	29,379	+6,000	---
Federal Administration	TF	43,248	43,248	43,548	+300	+300
National Veterans' Employment and Training Services Institute	TF	3,414	3,414	3,414	---	---
Homeless Veterans Programs	D	50,000	50,000	60,000	+10,000	+10,000
Total, Veterans Employment and Training		300,041	306,041	316,341	+16,300	+10,300
Federal Funds		50,000	50,000	60,000	+10,000	+10,000
Trust Funds		250,041	256,041	256,341	+6,300	+300
IT Modernization						
Departmental support systems	D	4,889	4,889	4,889	---	---
Infrastructure technology modernization	D	18,380	32,111	32,111	+13,731	---
Total, IT Modernization		23,269	37,000	37,000	+13,731	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Office of Inspector General						
Program Activities	D	83,487	84,461	90,461	+6,974	+6,000
Trust Funds	TF	5,660	5,660	5,660	---	---
Total, Office of Inspector General		89,147	90,121	96,121	+6,974	+6,000
Total, Departmental Management		750,521	700,028	832,401	+81,880	+132,373
Federal Funds		494,512	438,019	570,092	+75,580	+132,073
Current Year		(494,512)	(438,019)	(570,092)	(+75,580)	(+132,073)
Trust Funds		256,009	262,009	262,309	+6,300	+300
Total, Workforce Investment Act Programs		5,221,355	4,262,990	5,846,270	+624,915	+1,583,280
Current Year		(3,449,355)	(2,577,132)	(4,074,270)	(+624,915)	(+1,497,138)
FY 2021		(1,772,000)	(1,685,858)	(1,772,000)	---	(+86,142)
Total, Title I, Department of Labor		13,554,850	12,280,061	14,696,297	+1,141,447	+2,416,236
Federal Funds		9,930,099	8,507,399	10,935,138	+1,005,039	+2,427,739
Current Year		(8,144,099)	(6,807,541)	(9,149,138)	(+1,005,039)	(+2,341,597)
FY 2021		(1,786,000)	(1,699,858)	(1,786,000)	---	(+86,142)
Trust Funds		3,624,751	3,772,662	3,761,159	+136,408	-11,503

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE II --DEPARTMENT OF HEALTH AND HUMAN SERVICES						
HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA)						
Primary Health Care						
Community Health Centers	D	1,505,522	1,505,522	1,555,522	+50,000	+50,000
Mandatory budget authority (Public Law 115-123)(NA)	M	(4,000,000)	(4,000,000)	(4,000,000)	---	---
Health Center Tort Claims	D	120,000	120,000	120,000	---	---
Total, Community Health Centers		(5,625,522)	(5,625,522)	(5,675,522)	(+50,000)	(+50,000)
Free Clinics Medical Malpractice	D	1,000	1,000	1,000	---	---
Total, Primary Health Care (excluding mandatory funds)		1,626,522	1,626,522	1,676,522	+50,000	+50,000
Health Workforce						
National Health Service Corps	D	105,000	105,000	120,000	+15,000	+15,000
Training for Diversity:						
Centers of Excellence	D	23,711	---	25,000	+1,289	+25,000
Health Careers Opportunity Program	D	14,189	---	20,000	+5,811	+20,000
Faculty Loan Repayment	D	1,190	---	1,190	---	+1,190
Scholarships for Disadvantaged Students	D	48,970	---	53,470	+4,500	+53,470
Total, Training for Diversity		88,060	---	99,660	+11,600	+99,660

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Primary Care Training and Enhancement	D	48,924	---	48,924	---	+48,924
Oral Health Training	D	40,673	---	40,673	---	+40,673
Interdisciplinary Community-Based Linkages:						
Area Health Education Centers	D	39,250	---	41,250	+2,000	+41,250
Geriatric Programs	D	40,737	---	43,384	+2,647	+43,384
Mental and Behavorial Health	D	36,916	36,916	36,916	---	---
Behavioral Health Workforce Education and Training	D	75,000	75,000	85,000	+10,000	+10,000
Loan Repayment Program for Substance Use Disorder Treatment Work	D	---	---	25,000	+25,000	+25,000
Mental and Substance Use Disorder Workforce Training Demonstration		---	---	10,000	+10,000	+10,000
Total, Interdisciplinary Community Linkages		191,903	111,916	241,550	+49,647	+129,634
Workforce Assessment	D	5,663	4,663	5,663	---	+1,000
Public Health and Preventive Medicine programs	D	17,000	---	19,000	+2,000	+19,000
Subtotal, Health Professions Education and Training		392,223	116,579	455,470	+63,247	+338,891

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Nursing Programs:						
Advanced Education Nursing	D	74,581	---	77,585	+3,004	+77,585
Nurse Education, Practice, and Retention	D	41,913	---	43,590	+1,677	+43,590
Nurse Practitioner Residency Training Initiative		---	---	20,000	+20,000	+20,000
Nursing Workforce Diversity	D	17,343	---	18,037	+694	+18,037
Nursing Corps Scholarship and Loan Repayment Program	D	87,135	83,135	90,620	+3,485	+7,485
Nursing Faculty Loan Program	D	28,500	---	29,640	+1,140	+29,640
Subtotal, Nursing programs		249,472	83,135	279,472	+30,000	+196,337
Total, Nursing programs		249,472	83,135	279,472	+30,000	+196,337
Children's Hospitals Graduate Medical Education	D	325,000	---	350,000	+25,000	+350,000
Graduate Medical Education	D	25,000	---	30,000	+5,000	+30,000
National Practitioner Data Bank	D	18,814	18,814	18,814	---	---
User Fees	D	-18,814	-18,814	-18,814	---	---
Total, Health Workforce		1,096,695	304,714	1,234,942	+138,247	+930,228

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Maternal and Child Health						
Maternal and Child Health Block Grant	D	677,700	660,700	705,000	+27,300	+44,300
Sickle Cell Disease Treatment Program	D	4,455	---	7,000	+2,545	+7,000
Autism and Other Developmental Disabilities	D	50,599	---	53,099	+2,500	+53,099
Heritable Disorders in Newborns and Children	D	16,383	---	22,000	+5,617	+22,000
Healthy Start	D	122,500	122,500	130,500	+8,000	+8,000
Universal Newborn Hearing Screening	D	17,818	---	17,818	---	+17,818
Emergency Medical Services for Children	D	22,334	---	22,334	---	+22,334
Screening and Treatment for Maternal Depression	D	5,000	---	5,000	---	+5,000
Pediatric Mental Health Care Access	D	10,000	---	10,000	---	+10,000
Total, Maternal and Child Health		926,789	783,200	972,751	+45,962	+189,551
Ryan White HIV/AIDS Program						
Emergency Assistance (Part A)	D	655,876	655,876	677,535	+21,659	+21,659
Comprehensive Care Programs (Part B)	D	1,315,005	1,315,005	1,331,665	+16,660	+16,660
AIDS Drug Assistance Program (ADAP) (NA)	NA	(900,313)	(900,313)	(912,017)	(+11,704)	(+11,704)
Early Intervention Program (Part C)	D	201,079	201,079	207,567	+6,488	+6,488
Children, Youth, Women, and Families (Part D)	D	75,088	75,088	76,047	+959	+959
AIDS Dental Services (Part F)	D	13,122	13,122	13,296	+174	+174
Education and Training Centers (Part F)	D	33,611	33,611	34,047	+436	+436
Special Projects of National Significance	D	25,000	25,000	25,000	---	---
Ending HIV/AIDS Initative		---	70,000	70,000	+70,000	---
Total, Ryan White HIV/AIDS program		2,318,781	2,388,781	2,435,157	+116,376	+46,376

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Health Care Systems						
Organ Transplantation	D	25,549	27,549	32,049	+6,500	+4,500
National Cord Blood Inventory	D	16,266	12,266	16,266	---	+4,000
C.W. Bill Young Cell Transplantation	D	24,609	24,609	24,609	---	---
340B Drug Pricing program/Office of Pharmacy Affairs	D	10,238	10,238	10,238	---	---
Poison Control Centers	D	22,846	22,846	24,846	+2,000	+2,000
Hansen's Disease Program	D	13,706	11,653	13,706	---	+2,053
Hansen's Disease Program - Buildings and Facilities	D	122	---	122	---	+122
Payment to Hawaii, Treatment of Hansen's	D	1,857	1,857	1,857	---	---
Total, Health Care Systems		115,193	111,018	123,693	+8,500	+12,675
Rural Health						
Rural Outreach Grants	D	77,500	40,811	84,609	+7,109	+43,798
Rural Health Research/Policy Development	D	9,351	5,000	9,351	---	+4,351
Rural Hospital Flexibility Grants	D	53,609	---	59,000	+5,391	+59,000
State Offices of Rural Health	D	10,000	---	12,500	+2,500	+12,500
Black Lung Clinics	D	11,000	11,000	12,000	+1,000	+1,000
Radiation Exposure Screening and Education Program	D	1,834	1,834	1,834	---	---
Telehealth	D	24,500	10,000	28,500	+4,000	+18,500
Rural Communities Opioid Response	D	120,000	120,000	100,000	-20,000	-20,000
Rural Residency Program	D	10,000	---	10,000	---	+10,000
Total, Rural Health		317,794	188,645	317,794	---	+129,149

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Family Planning	D	286,479	286,479	400,000	+113,521	+113,521
Program Management	D	155,250	151,993	155,250	---	+3,257
Total, Health resources and services (HRS)		6,843,503	5,841,352	7,316,109	+472,606	+1,474,757
Vaccine Injury Compensation Program Trust Fund						
Post-FY 1988 Claims	M	308,000	308,000	308,000	---	---
HRSA Administrative expenses	TF	9,200	11,200	11,200	+2,000	---
Total, Vaccine Injury Compensation Trust Fund		317,200	319,200	319,200	+2,000	---
Total, Health Resources and Services Administration		7,160,703	6,160,552	7,635,309	+474,606	+1,474,757

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
CENTERS FOR DISEASE CONTROL AND PREVENTION						
Immunization and Respiratory Diseases	D	477,855	577,386	499,758	+21,903	-77,628
Prevention and Public Health Fund 1/	NA	(320,550)	(152,845)	(347,800)	(+27,250)	(+194,955)
Subtotal		(798,405)	(730,231)	(847,558)	(+49,153)	(+117,327)
HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases, and Tuberculosis Prevention	D	1,132,278	1,318,056	1,335,197	+202,919	+17,141
Emerging and Zoonotic Infectious Diseases	D	568,372	372,472	592,622	+24,250	+220,150
Prevention and Public Health Fund 1/	NA	(52,000)	(137,000)	(52,000)	---	(-85,000)
Subtotal		620,372	509,472	644,622	+24,250	+135,150
Chronic Disease Prevention and Health Promotion	D	932,821	347,145	1,073,121	+140,300	+725,976
Prevention and Public Health Fund 1/	NA	(254,950)	(604,105)	(277,450)	(+22,500)	(-326,655)
Subtotal		1,187,771	951,250	1,350,571	+162,800	+399,321

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Birth Defects, Developmental Disabilities, Disabilities and Health	D	155,560	112,000	161,560	+6,000	+49,560
Subtotal	NA	155,560	112,000	161,560	+6,000	+49,560
Public Health Scientific Services	D	496,397	45,000	603,897	+107,500	+558,897
Evaluation Tap Funding	NA	---	(423,000)	---	---	(-423,000)
Subtotal		(496,397)	(468,000)	(603,897)	(+107,500)	(+135,897)
Environmental Health	D	192,350	157,000	226,350	+34,000	+69,350
Prevention and Public Health Fund 1/	NA	(17,000)	---	(17,000)	---	(+17,000)
Subtotal		209,350	157,000	243,350	+34,000	+86,350
Injury Prevention and Control	D	648,559	628,839	697,559	+49,000	+68,720
National Institute for Occupational Safety and Health	D	336,300	190,000	346,300	+10,000	+156,300
Energy Employees Occupational Illness Compensation Program	M	55,358	55,358	55,358	---	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Global Health	D	488,621	456,984	513,621	+25,000	+56,637
Public Health Preparedness and Response	D	855,200	825,000	880,200	+25,000	+55,200
Buildings and Facilities	D	30,000	30,000	30,000	---	---
Transfers from Nonrecurring Expenses Fund	NA	---	---	(225,000)	(+225,000)	(+225,000)
Subtotal		30,000	30,000	255,000	+225,000	+225,000
CDC-Wide Activities and Program Support						
Prevention and Public Health Fund 1/	NA	(160,000)	---	(160,000)	---	(+160,000)
Office of the Director	D	113,570	105,000	113,570	---	+8,570
Infectious Diseases Rapid Response Reserve Fund	D	50,000	50,000	50,000	---	---
Subtotal		(323,570)	(155,000)	(323,570)	---	(+168,570)
Total, Centers for Disease Control		6,533,241	5,270,240	7,179,113	+645,872	+1,908,873
Discretionary		6,477,883	5,214,882	7,123,755	+645,872	+1,908,873
Prevention and Public Health Fund 1/	NA	(804,500)	(893,950)	(854,250)	(+49,750)	(-39,700)
Transfers from Nonrecurring Expenses Fund	NA	---	---	(225,000)	(+225,000)	(+225,000)
Total, Centers for Disease Control Program Level		(7,337,741)	(6,587,190)	(8,258,363)	(+920,622)	(+1,671,173)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
NATIONAL INSTITUTES OF HEALTH						
National Cancer Institute (NCI)	D	5,743,892	5,051,737	6,249,165	+505,273	+1,197,428
NIH Innovation Account, CURES Act2/	D	400,000	195,000	195,000	-205,000	---
Subtotal, NCI		6,143,892	5,246,737	6,444,165	+300,273	+1,197,428
National Heart, Lung, and Blood Institute (NHLBI)	D	3,488,335	3,002,696	3,658,822	+170,487	+656,126
National Institute of Dental and Craniofacial Research (NIDCR)	D	461,781	397,493	484,350	+22,569	+86,857
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)	D	2,029,823	1,746,493	2,129,027	+99,204	+382,534
Juvenile Diabetes (mandatory)	NA	(150,000)	(150,000)	(150,000)	---	---
Subtotal, NIDDK program level		2,179,823	1,896,493	2,279,027	+99,204	+382,534
National Institute of Neurological Disorders and Stroke (NINDS)	D	2,216,913	1,956,031	2,315,571	+98,658	+359,540
NIH Innovation Account, CURES Act2/	D	57,500	70,000	70,000	+12,500	---
Subtotal, NINDS		2,274,413	2,026,031	2,385,571	+111,158	+359,540
National Institute of Allergy and Infectious Diseases (NIAID)	D	5,523,324	4,754,379	5,808,268	+284,944	+1,053,889

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
National Institute of General Medical Sciences (NIGMS)	D	1,725,959	1,731,838	1,886,362	+160,403	+154,524
Evaluation Tap Funding	NA	(1,146,821)	(741,000)	(1,146,821)	---	(+405,821)
Subtotal, NIGMS program level		2,872,780	2,472,838	3,033,183	+160,403	+560,345
Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)	D	1,506,458	1,296,732	1,580,084	+73,626	+283,352
National Eye Institute (NEI)	D	796,536	685,644	835,465	+38,929	+149,821
National Institute of Environmental Health Sciences (NIEHS)	D	774,707	666,854	812,570	+37,863	+145,716
National Institute on Aging (NIA)	D	3,083,410	2,654,144	3,286,107	+202,697	+631,963
National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)	D	605,065	520,829	634,637	+29,572	+113,808
National Institute on Deafness and Other Communication Disorders (NIDCD)	D	474,404	408,358	497,590	+23,186	+89,232
National Institute of Nursing Research (NINR)	D	162,992	140,301	170,958	+7,966	+30,657
National Institute on Alcohol Abuse and Alcoholism (NIAAA)	D	525,591	452,419	551,278	+25,687	+98,859
National Institute on Drug Abuse (NIDA)	D	1,419,844	1,296,379	1,489,237	+69,393	+192,858
National Institute of Mental Health (NIMH)	D	1,812,796	1,560,442	1,891,704	+78,908	+331,262
NIH Innovation Account, CURES Act2/	D	57,500	70,000	70,000	+12,500	---
Subtotal, NIMH		1,870,296	1,630,442	1,961,704	+91,408	+331,262
National Human Genome Research Institute (NHGRI)	D	575,579	495,448	603,710	+28,131	+108,262
National Institute of Biomedical Imaging and Bioengineering (NIBIB)	D	389,464	335,986	408,498	+19,034	+72,512

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
National Center for Complementary and Integrative Health (NCCIH)	D	146,473	126,081	153,632	+7,159	+27,551
National Institute on Minority Health and Health Disparities (NIMHD)	D	314,679	270,870	341,244	+26,565	+70,374
John E. Fogarty International Center (FIC)	D	78,109	67,235	84,926	+6,817	+17,691
National Library of Medicine (NLM)	D	441,997	380,463	463,599	+21,602	+83,136
National Center for Advancing Translational Sciences (NCATS)	D	806,373	694,112	845,783	+39,410	+151,671
National Institute for Research on Safety and Quality (NIRSQ)3/	D	---	255,960	---	---	-255,960
Office of the Director	D	1,909,075	1,756,544	2,049,992	+140,917	+293,448
Common Fund (non-add)	NA	(606,566)	(520,367)	(617,761)	(+11,195)	(+97,394)
Gabriella Miller Kids First Research Act (Common Fund add)	D	12,600	12,600	12,600	---	---
NIH Innovation Account, CURES Act2/	D	196,000	157,000	157,000	-39,000	---
Buildings and Facilities	D	200,000	200,000	200,000	---	---
Total, National Institutes of Health (NIH)		37,937,179	33,410,068	39,937,179	+2,000,000	+6,527,111
(Evaluation Tap Funding)		(1,146,821)	(741,000)	(1,146,821)	---	(+405,821)
Total, NIH Program Level		(39,084,000)	(34,151,068)	(41,084,000)	(+2,000,000)	(+6,932,932)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)						
Mental Health						
Programs of Regional and National Significance.....	D	383,774	365,847	428,774	+45,000	+62,927
Prevention and Public Health Fund 1/.....	NA	(12,000)	---	(12,000)	---	(+12,000)
Subtotal.....		395,774	365,847	440,774	+45,000	+74,927
Community Mental Health Services Block Grant (MHBG)...	D	701,532	701,532	736,532	+35,000	+35,000
Evaluation Tap Funding.....	NA	(21,039)	(21,039)	(21,039)	---	---
Subtotal.....		(722,571)	(722,571)	(757,571)	(+35,000)	(+35,000)
Certified Community Behavioral Health Clinics.....	D	150,000	150,000	150,000	---	---
National Child Traumatic Stress Initiative.....	D	63,887	63,887	70,887	+7,000	+7,000
Children's Mental Health Services.....	D	125,000	125,000	130,000	+5,000	+5,000
Projects for Assistance in Transition from Homelessness (PATH).....	D	64,635	64,635	66,635	+2,000	+2,000
Protection and Advocacy for Individuals with Mental Illness (PAIMI).....	D	36,146	14,146	36,146	---	+22,000
Subtotal, Mental Health.....		1,524,974	1,485,047	1,618,974	+94,000	+133,927
(Evaluation Tap Funding).....		(21,039)	(21,039)	(21,039)	---	---
(Prevention and Public Health Fund 1/).....		(12,000)	---	(12,000)	---	(+12,000)
Subtotal, Mental Health program level.....		(1,558,013)	(1,506,086)	(1,652,013)	(+94,000)	(+145,927)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Substance Abuse Treatment						
Programs of Regional and National Significance.....	D	458,677	429,888	472,177	+13,500	+42,289
Evaluation Tap Funding.....	NA	(2,000)	---	(2,000)	---	(+2,000)
Subtotal.....		(460,677)	(429,888)	(474,177)	(+13,500)	(+44,289)
Substance Abuse Prevention and Treatment Block Grant..	D	1,778,879	1,778,879	1,778,879	---	---
Evaluation Tap Funding.....	NA	(79,200)	(79,200)	(79,200)	---	---
Subtotal, block grant.....		(1,858,079)	(1,858,079)	(1,858,079)	---	---
State Opioid Response grants.....	D	1,500,000	1,500,000	1,500,000	---	---
Subtotal, Substance Abuse Treatment.....		3,737,556	3,708,767	3,751,056	+13,500	+42,289
(Evaluation Tap Funding).....		(81,200)	(79,200)	(81,200)	---	(+2,000)
Subtotal, Program level.....		(3,818,756)	(3,787,967)	(3,832,256)	(+13,500)	(+44,289)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Substance Abuse Prevention						
Programs of Regional and National Significance.....	D	205,469	244,090	212,469	+7,000	-31,621
Health Surveillance and Program Support.....	D	128,830	97,004	128,830	---	+31,826
Evaluation Tap Funding (NA).....	NA	(31,428)	(42,453)	(31,428)	---	(-11,025)
Subtotal.....		160,258	139,457	160,258	---	+20,801
Total, SAMHSA.....		5,596,829	5,534,908	5,711,329	+114,500	+176,421
(Evaluation Tap Funding).....		(133,667)	(142,692)	(133,667)	---	(-9,025)
(Prevention and Public Health Fund 1/).....		(12,000)	---	(12,000)	---	(+12,000)
Total, SAMHSA Program Level.....		(5,742,496)	(5,677,600)	(5,856,996)	(+114,500)	(+179,396)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ)3/						
Healthcare Research and Quality						
Research on Health Costs, Quality, and Outcomes:						
Federal Funds	D	196,709	---	196,709	---	+196,709
Evaluation Tap funding	NA	---	---	(18,408)	(+18,408)	(+18,408)
Medical Expenditures Panel Surveys:						
Federal Funds	D	69,991	---	71,800	+1,809	+71,800
Program Support:						
Federal Funds	D	71,300	---	71,300	---	+71,300
Total, AHRQ (Federal funds)3/		338,000	---	358,217	+20,217	+358,217
Total, Public Health Service (PHS) appropriation		57,565,952	50,375,768	60,802,739	+3,236,787	+10,426,971
Total, Public Health Service Program Level		(59,662,940)	(52,576,410)	(63,192,885)	(+3,529,945)	(+10,616,475)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
CENTERS FOR MEDICARE AND MEDICAID SERVICES						
Grants to States for Medicaid						
Medicaid Current Law Benefits	M	384,882,625	383,836,264	383,836,264	-1,046,361	---
State and Local Administration	M	21,474,885	22,522,603	22,522,603	+1,047,718	---
Vaccines for Children	M	4,726,461	4,761,408	4,761,408	+34,947	---
Subtotal, Medicaid Program Level		411,083,971	411,120,275	411,120,275	+36,304	---
Less funds advanced in prior year	M	-134,847,759	-137,931,797	-137,931,797	-3,084,038	---
Total, Grants to States for Medicaid		276,236,212	273,188,478	273,188,478	-3,047,734	---
New advance, 1st quarter, FY 2020	M	137,931,797	139,903,075	139,903,075	+1,971,278	---
Payments to Health Care Trust Funds						
Supplemental Medical Insurance	M	284,288,300	304,044,600	304,044,600	+19,756,300	---
Federal Uninsured Payment	M	127,000	109,000	109,000	-18,000	---
Program Management	M	898,000	913,000	913,000	+15,000	---
General Revenue for Part D Benefit	M	92,070,000	104,539,500	104,539,500	+12,469,500	---
General Revenue for Part D Administration	M	642,000	861,000	861,000	+219,000	---
HCFAC Reimbursement	M	315,000	324,000	324,000	+9,000	---
State Low-Income Determination for Part D	M	3,500	5,000	5,000	+1,500	---
Total, Payments to Trust Funds, Program Level		378,343,800	410,796,100	410,796,100	+32,452,300	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Program Management						
Research, Demonstration, Evaluation	TF	20,054	---	20,054	---	+20,054
Program Operations	TF	2,519,823	2,389,702	2,824,823	+305,000	+435,121
State Survey and Certification	TF	397,334	442,192	407,334	+10,000	-34,858
Federal Administration	TF	732,533	747,533	732,533	---	-15,000
Total, Program management		3,669,744	3,579,427	3,984,744	+315,000	+405,317
Health Care Fraud and Abuse Control Account						
Centers for Medicare and Medicaid Services	TF	599,389	614,000	610,000	+10,611	-4,000
HHS Office of Inspector General	TF	87,230	98,000	93,000	+5,770	-5,000
Department of Justice	TF	78,381	80,000	83,000	+4,619	+3,000
Total, Health Care Fraud and Abuse Control		765,000	792,000	786,000	+21,000	-6,000
Total, Centers for Medicare and Medicaid Services		796,946,553	828,259,080	828,658,397	+31,711,844	+399,317
Federal funds		792,511,809	823,887,653	823,887,653	+31,375,844	---
Current year		(654,580,012)	(683,984,578)	(683,984,578)	(+29,404,566)	---
New advance, FY 2020		(137,931,797)	(139,903,075)	(139,903,075)	(+1,971,278)	---
Trust Funds		4,434,744	4,371,427	4,770,744	+336,000	+399,317

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
ADMINISTRATION FOR CHILDREN AND FAMILIES (ACF)						
Payments to States for Child Support Enforcement and Family Support Programs						
Payments to Territories	M	33,000	33,000	33,000	---	---
Repatriation	M	1,000	1,000	1,000	---	---
Subtotal		34,000	34,000	34,000	---	---
Child Support Enforcement:						
State and Local Administration	M	3,689,574	3,648,494	3,648,494	-41,080	---
Federal Incentive Payments	M	588,673	597,506	597,506	+8,833	---
Access and Visitation	M	10,000	10,000	10,000	---	---
Subtotal, Child Support Enforcement		4,288,247	4,256,000	4,256,000	-32,247	---
Total, Family Support Payments Program Level		4,322,247	4,290,000	4,290,000	-32,247	---
Less funds advanced in previous years	M	-1,400,000	-1,400,000	-1,400,000	---	---
Total, Family Support Payments, current year		2,922,247	2,890,000	2,890,000	-32,247	---
New advance, 1st quarter, FY 2021	M	1,400,000	1,400,000	1,400,000	---	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Low Income Home Energy Assistance Program						
(LIHEAP)						
Formula Grants	D	3,690,304	---	3,840,304	+150,000	+3,840,304
Refugee and Entrant Assistance						
Transitional and Medical Services	D	354,000	319,000	354,000	---	+35,000
Refugee Support Services	D	207,201	150,821	207,201	---	+56,380
Victims of Trafficking	D	26,755	17,000	28,255	+1,500	+11,255
Unaccompanied Alien Children (UAC)	D	1,303,245	1,303,245	1,803,245	+500,000	+500,000
Victims of Torture	D	14,000	14,000	19,000	+5,000	+5,000
Total, Refugee and Entrant Assistance		1,905,201	1,804,066	2,411,701	+506,500	+607,635

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Payments to States for the Child Care and Development Block Grant	D	5,276,000	5,276,000	7,676,000	+2,400,000	+2,400,000
Social Services Block Grant (Title XX)	M	1,700,000	---	1,700,000	---	+1,700,000
Children and Families Services Programs						
Programs for Children, Youth and Families:						
Head Start	D	10,063,095	10,063,095	11,563,095	+1,500,000	+1,500,000
Preschool Development Grants	D	250,000	---	350,000	+100,000	+350,000
Runaway and Homeless Youth Program	D	110,280	119,121	125,280	+15,000	+6,159
Service Connection for Youth on the Streets	D	17,141	---	22,141	+5,000	+22,141
Child Abuse State Grants	D	85,310	85,310	90,000	+4,690	+4,690
Child Abuse Discretionary Activities	D	33,000	33,000	34,000	+1,000	+1,000
Community Based Child Abuse Prevention	D	39,764	39,764	55,000	+15,236	+15,236
Child Welfare Services	D	268,735	268,735	268,735	---	---
Child Welfare Training, Research, or Demonstration projects	D	17,984	17,984	17,984	---	---
Adoption Opportunities	D	39,100	39,100	42,100	+3,000	+3,000
Adoption Incentive Grants	D	75,000	37,943	75,000	---	+37,057

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Social Services and Income Maintenance Research.....	D	6,512	6,512	7,012	+500	+500
Native American Programs.....	D	54,550	52,050	60,000	+5,450	+7,950
Community Services:						
Community Services Block Grant Act programs:						
Grants to States for Community Services.....	D	725,000	---	760,000	+35,000	+760,000
Economic Development.....	D	19,883	---	25,000	+5,117	+25,000
Rural Community Facilities.....	D	9,000	---	11,000	+2,000	+11,000
Subtotal, Community Services.....		753,883	---	796,000	+42,117	+796,000
Domestic Violence Hotline.....	D	10,250	10,250	12,000	+1,750	+1,750
Family Violence Prevention and Services.....	D	164,500	164,500	175,000	+10,500	+10,500
Chafee Education and Training Vouchers.....	D	43,257	43,257	43,257	---	---
Disaster Human Services Case Management.....	D	1,864	1,864	1,864	---	---
Program Direction.....	D	205,000	205,000	209,000	+4,000	+4,000
Total, Children and Families Services Programs..		12,239,225	11,187,485	13,947,468	+1,708,243	+2,759,983

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Promoting Safe and Stable Families	M	345,000	345,000	345,000	---	---
Discretionary Funds	D	99,765	59,765	79,765	-20,000	+20,000
Total, Promoting Safe and Stable Families		444,765	404,765	424,765	-20,000	+20,000
Payments for Foster Care and Permanency						
Foster Care	M	5,329,000	5,253,000	5,253,000	-76,000	---
Adoption Assistance	M	3,063,000	2,931,000	2,931,000	-132,000	---
Guardianship	M	203,000	217,000	217,000	+14,000	---
Independent Living	M	140,000	143,000	143,000	+3,000	---
Total, Payments to States		8,735,000	8,544,000	8,544,000	-191,000	---
Less Advances from Prior Year	M	-2,700,000	-2,800,000	-2,800,000	-100,000	---
Total, payments, current year		6,035,000	5,744,000	5,744,000	-291,000	---
New Advance, 1st quarter, FY 2021	M	2,800,000	2,800,000	2,800,000	---	---
Total, ACF		38,412,742	31,506,316	42,834,238	+4,421,496	+11,327,922
Current year		(34,212,742)	(27,306,316)	(38,634,238)	(+4,421,496)	(+11,327,922)
FY 2021		(4,200,000)	(4,200,000)	(4,200,000)	---	---
Total, ACF Program Level		38,412,742	31,506,316	42,834,238	+4,421,496	+11,327,922

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
ADMINISTRATION FOR COMMUNITY LIVING						
Aging and Disability Services Programs						
Grants to States:						
Home and Community-based Supportive Services.....	D	385,074	385,074	422,000	+36,926	+36,926
Preventive Health.....	D	24,848	24,848	24,848	---	---
Protection of Vulnerable Older Americans-Title VII	D	21,658	20,628	23,658	+2,000	+3,030
Subtotal.....		431,580	430,550	470,506	+38,926	+39,956
Family Caregivers.....	D	181,186	150,586	200,000	+18,814	+49,414
Native American Caregivers Support.....	D	10,056	7,556	12,056	+2,000	+4,500
Subtotal, Caregivers.....		191,242	158,142	212,056	+20,814	+53,914
Nutrition:						
Congregate Meals.....	D	495,342	495,342	525,000	+29,658	+29,658
Home Delivered Meals.....	D	251,342	251,342	305,000	+53,658	+53,658
Nutrition Services Incentive Program.....	D	160,069	160,069	170,000	+9,931	+9,931
Subtotal.....		906,753	906,753	1,000,000	+93,247	+93,247
Subtotal, Grants to States.....		1,529,575	1,495,445	1,682,562	+152,987	+187,117

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Grants for Native Americans	D	34,208	34,208	37,208	+3,000	+3,000
Aging Network Support Activities	D	17,461	11,503	12,461	-5,000	+958
Alzheimer's Disease Program	D	8,800	19,490	12,800	+4,000	-6,690
Prevention and Public Health Fund 1/	NA	(14,700)	---	(14,700)	---	(+14,700)
Lifespan Respite Care	D	4,110	3,360	5,500	+1,390	+2,140
Chronic Disease Self-Management Program	D	---	---	---	---	---
Prevention and Public Health Fund 1/	NA	(8,000)	---	(8,000)	---	(+8,000)
Elder Falls Prevention	D	---	---	---	---	---
Prevention and Public Health Fund 1/	NA	(5,000)	---	(5,000)	---	(+5,000)
Elder Rights Support Activities	D	15,874	13,874	20,874	+5,000	+7,000
Aging and Disability Resources	D	8,119	6,119	8,119	---	+2,000
State Health Insurance Program	TF	49,115	36,115	55,000	+5,885	+18,885
Paralysis Resource Center	D	8,700	---	8,700	---	+8,700
Limb Loss Resource Center	D	3,500	---	4,000	+500	+4,000
Traumatic Brain Injury	D	11,321	9,321	12,321	+1,000	+3,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Developmental Disabilities Programs:						
State Councils	D	76,000	56,000	80,000	+4,000	+24,000
Protection and Advocacy	D	40,734	38,734	43,000	+2,266	+4,266
Voting Access for Individuals with Disabilities	D	6,963	4,963	8,963	+2,000	+4,000
Developmental Disabilities Projects of National Significance	D	12,000	1,050	13,000	+1,000	+11,950
University Centers for Excellence in Developmental Disabilities	D	40,619	32,546	41,619	+1,000	+9,073
Subtotal, Developmental Disabilities Programs		176,316	133,293	186,582	+10,266	+53,289
Workforce Innovation and Opportunity Act						
Independent Living	D	116,183	108,646	116,183	---	+7,537
National Institute on Disability, Independent Living, and Rehabilitation Research	D	108,970	90,371	108,970	---	+18,599
Assistive Technology	D	36,000	31,939	37,000	+1,000	+5,061
Subtotal, Workforce Innovation and Opportunity Act		261,153	230,956	262,153	+1,000	+31,197

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Program Administration	D	41,063	38,987	41,063	---	+2,076
Total, Administration for Community Living (ACL)		2,169,315	2,032,671	2,349,343	+180,028	+316,672
Federal funds		(2,120,200)	(1,996,556)	(2,294,343)	(+174,143)	(+297,787)
Trust Funds		(49,115)	(36,115)	(55,000)	(+5,885)	(+18,885)
(Prevention and Public Health Fund 1/)		(27,700)	---	(27,700)	---	(+27,700)
Total, ACL program level		2,197,015	2,032,671	2,377,043	+180,028	+344,372
OFFICE OF THE SECRETARY						
General Departmental Management						
General Departmental Management, Federal Funds	D	186,919	183,895	193,169	+6,250	+9,274
Departmental Appeals Board	D	14,000	23,000	20,000	+6,000	-3,000
Teen Pregnancy Prevention Community Grants	D	101,000	---	110,000	+9,000	+110,000
Evaluation Tap Funding	NA	(6,800)	---	(6,800)	---	(+6,800)
Subtotal, Grants		(107,800)	---	(116,800)	(+9,000)	(+116,800)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Sexual Risk Avoidance	D	35,000	---	---	-35,000	---
Office of Minority Health	D	56,670	51,798	65,000	+8,330	+13,202
Office on Women's Health	D	32,140	27,316	36,000	+3,860	+8,684
Minority HIV/AIDS prevention and treatment	D	53,900	53,900	60,000	+6,100	+6,100
Embryo Adoption Awareness Campaign	D	1,000	---	1,000	---	+1,000
Planning and Evaluation, Evaluation Tap Funding	NA	(58,028)	(68,840)	(58,028)	---	(-10,812)
Total, General Departmental Management		480,629	339,909	485,169	+4,540	+145,260
Federal Funds		(480,629)	(339,909)	(485,169)	(+4,540)	(+145,260)
(Evaluation Tap Funding)		(64,828)	(68,840)	(64,828)	---	(-4,012)
Total, General Departmental Management Program		545,457	408,749	549,997	+4,540	+141,248
Office of Medicare Hearings and Appeals	TF	182,381	182,381	182,381	---	---
Office of the National Coordinator for Health Information Technology	D	60,367	43,000	---	-60,367	-43,000
Evaluation Tap Funding	D	---	---	(60,367)	(+60,367)	(+60,367)
Total, Program Level		(60,367)	(43,000)	(60,367)	---	(+17,367)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Office of Inspector General						
Inspector General Federal Funds	D	80,000	80,000	85,000	+5,000	+5,000
HCFAC funding (NA)	NA	(334,097)	---	---	(-334,097)	---
Total, Inspector General Program Level		(414,097)	(80,000)	(85,000)	(-329,097)	(+5,000)
Office for Civil Rights						
Federal Funds	D	38,798	30,286	38,798	---	+8,512
Retirement Pay and Medical Benefits for Commissioned Officers						
Retirement Payments	M	469,246	491,090	491,090	+21,844	---
Survivors Benefits	M	31,756	31,650	31,650	-106	---
Dependents' Medical Care	M	128,207	100,851	100,851	-27,356	---
Total, Benefits for Commissioned Officers		629,209	623,591	623,591	-5,618	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Public Health and Social Services Emergency Fund (PHSSEF)						
Assistant Secretary for Preparedness and Response						
Operations	D	30,938	30,938	30,938	---	---
Preparedness and Emergency Operations	D	24,654	24,654	24,654	---	---
National Disaster Medical System	D	57,404	77,404	57,404	---	-20,000
Hospital Preparedness Cooperative Agreement Grants:	D					
Formula Grants	D	264,555	257,555	316,555	+52,000	+59,000
Biomedical Advanced Research and Development	D					
Authority (BARDA)	D	561,700	561,700	566,700	+5,000	+5,000
Policy and Planning	D	14,877	19,877	14,877	---	-5,000
Project BioShield	D	735,000	735,000	735,000	---	---
Strategic National Stockpile	D	610,000	620,000	620,000	+10,000	---
Medical Reserve Corps		6,000	3,900	6,000	---	+2,100
Subtotal, Preparedness and Response	D	2,305,128	2,331,028	2,372,128	+67,000	+41,100

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Assistant Secretary for Administration						
Assistant Secretary for Administration, Cybersecurity.	D	58,860	68,093	58,860	---	-9,233
Office of Security and Strategic Information.....	D	7,470	7,470	7,470	---	---
Public Health and Science						
Pandemic Influenza Preparedness.....	D	260,000	260,000	270,000	+10,000	+10,000
Subtotal, Non-pandemic flu/BioShield/SNS.....	D	1,026,458	1,051,591	1,083,458	+57,000	+31,867
Total, PHSSEF.....		2,631,458	2,666,591	2,708,458	+77,000	+41,867
Total, Office of the Secretary.....		4,102,842	3,965,758	4,123,397	+20,555	+157,639
Federal Funds.....		3,920,461	3,783,377	3,941,016	+20,555	+157,639
Trust Funds.....		182,381	182,381	182,381	---	---
(Evaluation Tap Funding).....		(64,828)	(68,840)	(125,195)	(+60,367)	(+56,355)
Total, Office of the Secretary Program Level....		4,167,670	4,034,598	4,248,592	+80,922	+213,994

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Total, Title II, Health and Human Services.....	899,197,404	916,139,593	938,768,114	+39,570,710	+22,628,521
Federal Funds.....	894,521,964	911,538,470	933,748,789	+39,226,825	+22,210,319
Current year.....	(752,390,167)	(767,435,395)	(789,645,714)	(+37,255,547)	(+22,210,319)
FY 2021.....	(142,131,797)	(144,103,075)	(144,103,075)	(+1,971,278)	---
Trust Funds.....	4,675,440	4,601,123	5,019,325	+343,885	+418,202
Total, CURES Act2/.....	(711,000)	(492,000)	(492,000)	(-219,000)	---
Total, Prevention and Public Health Fund 1/.....	(844,200)	(893,950)	(893,950)	(+49,750)	---
Total, Transfers from Nonrecurring Expenses Fund	---	---	(225,000)	(+225,000)	(+225,000)

Title II Footnotes:
1/ Sec.4002 of Public Law 111-148
2/ 21St Century CURES Act (Public Law 114-255)
3/ FY2020 budget request proposes consolidating the Agency for Healthcare Research and Quality within the National Institutes of Health as the National Institute for Research on Safety and Quality

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
TITLE III - DEPARTMENT OF EDUCATION							
EDUCATION FOR THE DISADVANTAGED							
Grants to Local Educational Agencies (LEAs)							
Basic Grants:							
Advance from prior year.....	NA	(1,540,776)	(1,440,776)	(1,440,776)	(-100,000)	---	
Forward funded.....	D	5,013,625	4,172,904	6,013,625	+1,000,000	+1,840,721	FF
Current funded.....	D	5,000	5,000	5,000	---	---	
Subtotal, Basic grants current year approp..		5,018,625	4,177,904	6,018,625	+1,000,000	+1,840,721	
Subtotal, Basic grants total funds available		(6,559,401)	(5,618,680)	(7,459,401)	(+900,000)	(+1,840,721)	
Basic Grants FY 2021 Advance.....	D	1,440,776	2,281,497	440,776	-1,000,000	-1,840,721	
Subtotal, Basic grants, program level.....		6,459,401	6,459,401	6,459,401	---	---	
Concentration Grants:							
Advance from prior year.....	NA	(1,362,301)	(1,362,301)	(1,362,301)	---	---	
FY 2021 Advance.....	D	1,362,301	1,362,301	1,362,301	---	---	
Subtotal.....		1,362,301	1,362,301	1,362,301	---	---	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
Targeted Grants:							
Advance from prior year	NA	(3,969,050)	(4,019,050)	(4,019,050)	(+50,000)	---	
FY 2021 Advance	D	4,019,050	4,019,050	4,519,050	+500,000	+500,000	
Subtotal		4,019,050	4,019,050	4,519,050	+500,000	+500,000	
Education Finance Incentive Grants:							
Advance from prior year	NA	(3,969,050)	(4,019,050)	(4,019,050)	(+50,000)	---	
FY 2021 Advance	D	4,019,050	4,019,050	4,519,050	+500,000	+500,000	
Subtotal		4,019,050	4,019,050	4,519,050	+500,000	+500,000	
Subtotal, Grants to LEAs, program level		15,859,802	15,859,802	16,859,802	+1,000,000	+1,000,000	
Student-Centered Funding Incentive Grants	D	---	50,000	---	---	-50,000	FF
Innovative Approaches to Literacy	D	27,000	---	29,000	+2,000	+29,000	
Comprehensive literacy development grants	D	190,000	---	195,000	+5,000	+195,000	FF
State Agency Programs:							
Migrant	D	374,751	374,751	380,000	+5,249	+5,249	FF
Neglected and Delinquent/High Risk Youth	D	47,614	47,614	50,000	+2,386	+2,386	FF
Subtotal, State Agency programs		422,365	422,365	430,000	+7,635	+7,635	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Special Programs for Migrant Students	D	44,623	44,623	50,000	+5,377	+5,377
Total, Education for the disadvantaged		16,543,790	16,376,790	17,563,802	+1,020,012	+1,187,012
Current Year		(5,702,613)	(4,694,892)	(6,722,625)	(+1,020,012)	(+2,027,733)
FY 2021		(10,841,177)	(11,681,898)	(10,841,177)	---	(-840,721)
Subtotal, Forward Funded		(5,625,990)	(4,595,269)	(6,638,625)	(+1,012,635)	(+2,043,356)
IMPACT AID						
Basic Support Payments	D	1,301,242	1,301,242	1,351,242	+50,000	+50,000
Payments for Children with Disabilities	D	48,316	48,316	48,316	---	---
Facilities Maintenance (Sec. 8008)	D	4,835	4,835	4,835	---	---
Construction (Sec. 8007)	D	17,406	17,406	17,406	---	---
Payments for Federal Property (Sec. 8002)	D	74,313	---	76,313	+2,000	+76,313
Total, Impact aid		1,446,112	1,371,799	1,498,112	+52,000	+126,313

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
SCHOOL IMPROVEMENT PROGRAMS							
Supporting Effective Instruction State Grants	D	374,389	---	874,389	+500,000	+874,389	FF
Advance from prior year	NA	(1,681,441)	(1,681,441)	(1,681,441)	---	---	
FY 2021	D	1,681,441	---	1,681,441	---	+1,681,441	
Subtotal, Supporting Effective Instruction State Grants, program level		2,055,830	---	2,555,830	+500,000	+2,555,830	
Supplemental Education Grants	D	16,699	16,699	16,699	---	---	
21st Century Community Learning Centers	D	1,221,673	---	1,321,673	+100,000	+1,321,673	FF
State Assessments	D	378,000	378,000	378,000	---	---	FF
Education for Homeless Children and Youth	D	93,500	93,500	100,000	+6,500	+6,500	FF
Training and Advisory Services (Civil Rights)	D	6,575	6,575	6,575	---	---	
Education for Native Hawaiians	D	36,397	---	40,000	+3,603	+40,000	
Alaska Native Education Equity	D	35,453	---	36,453	+1,000	+36,453	
Rural Education	D	180,840	180,840	180,840	---	---	FF
Comprehensive Centers	D	52,000	---	60,400	+8,400	+60,400	
Student Support and Academic Enrichment grants	D	1,170,000	---	1,320,000	+150,000	+1,320,000	FF
Total, School Improvement Programs		5,246,967	675,614	6,016,470	+769,503	+5,340,856	
Current Year		(3,565,526)	(675,614)	(4,335,029)	(+769,503)	(+3,659,415)	
FY 2021		(1,681,441)	---	(1,681,441)	---	(+1,681,441)	
Subtotal, Forward Funded		(3,418,402)	(652,340)	(4,174,902)	(+756,500)	(+3,522,562)	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
INDIAN EDUCATION						
Grants to Local Educational Agencies	D	105,381	105,381	105,381	---	---
Federal Programs:						
Special Programs for Indian Children	D	67,993	63,993	67,993	---	+4,000
National Activities	D	6,865	6,865	13,000	+6,135	+6,135
Subtotal, Federal Programs		74,858	70,858	80,993	+6,135	+10,135
Total, Indian Education		180,239	176,239	186,374	+6,135	+10,135
INNOVATION AND IMPROVEMENT						
Education Innovation and Research	D	130,000	300,000	300,000	+170,000	---
American History and Civics Academies	D	1,815	---	1,815	---	+1,815
American History and Civics National Activities	D	3,000	---	3,000	---	+3,000
Charter Schools Grants	D	440,000	500,000	400,000	-40,000	-100,000
Magnet Schools Assistance	D	107,000	107,000	120,000	+13,000	+13,000
Teacher and School Leader Incentive Grants	D	200,000	200,000	200,000	---	---
Ready-to-Learn Television	D	27,741	---	30,000	+2,259	+30,000
Supporting Effective Educator Development (SEED)	D	75,000	---	100,000	+25,000	+100,000
Arts in Education	D	29,000	---	35,000	+6,000	+35,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
Javits Gifted and Talented Students	D	12,000	---	14,000	+2,000	+14,000	
Statewide Family Engagement Centers	D	10,000	---	15,000	+5,000	+15,000	
Total, Innovation and Improvement		1,035,556	1,107,000	1,218,815	+183,259	+111,815	
Current Year		(1,035,556)	(1,107,000)	(1,218,815)	(+183,259)	(+111,815)	
SAFE SCHOOLS AND CITIZENSHIP EDUCATION							
Promise Neighborhoods	D	78,254	---	80,000	+1,746	+80,000	
School Safety National Activities	D	95,000	200,000	120,000	+25,000	-80,000	
Full-Service Community Schools	D	17,500	---	40,000	+22,500	+40,000	
Total, Safe Schools and Citizenship Education		190,754	200,000	240,000	+49,246	+40,000	
ENGLISH LANGUAGE ACQUISITION							
Current funded	D	47,931	47,931	63,700	+15,769	+15,769	
Forward funded	D	689,469	689,469	916,300	+226,831	+226,831	FF
Total, English Language Acquisition		737,400	737,400	980,000	+242,600	+242,600	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
SPECIAL EDUCATION							
State Grants:							
Grants to States Part B current year	D	3,081,009	2,240,289	4,081,009	+1,000,000	+1,840,720	FF
Part B advance from prior year	NA	(9,283,383)	(9,283,383)	(9,283,383)	---	---	
Grants to States Part B (FY 2021)	D	9,283,383	10,124,103	9,283,383	---	-840,720	
Subtotal, program level		12,364,392	12,364,392	13,364,392	+1,000,000	+1,000,000	
Preschool Grants	D	391,120	391,120	398,400	+7,280	+7,280	FF
Grants for Infants and Families	D	470,000	470,000	491,300	+21,300	+21,300	FF
Subtotal, program level		13,225,512	13,225,512	14,254,092	+1,028,580	+1,028,580	
IDEA National Activities (current funded):							
State Personnel Development	D	38,630	38,630	40,630	+2,000	+2,000	
Technical Assistance and Dissemination (including Special Olympics Education)	D	61,928	44,345	65,465	+3,537	+21,120	
Personnel Preparation	D	87,200	87,200	98,310	+11,110	+11,110	
Parent Information Centers	D	27,411	27,411	30,000	+2,589	+2,589	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Educational Technology, Media, and Materials	D	28,047	28,047	30,047	+2,000	+2,000
Subtotal, IDEA National Activities		243,216	225,633	264,452	+21,236	+38,819
Total, Special education		13,468,728	13,451,145	14,518,544	+1,049,816	+1,067,399
Current Year		(4,185,345)	(3,327,042)	(5,235,161)	(+1,049,816)	(+1,908,119)
FY 2021		(9,283,383)	(10,124,103)	(9,283,383)	---	(-840,720)
Subtotal, Forward Funded		(3,942,129)	(3,101,409)	(4,970,709)	(+1,028,580)	(+1,869,300)
REHABILITATION SERVICES						
Vocational Rehabilitation State Grants	M	3,521,990	3,610,040	3,610,040	+88,050	---
Client Assistance State grants	D	13,000	13,000	15,000	+2,000	+2,000
Training	D	29,388	29,388	30,188	+800	+800
Demonstration and Training programs	D	5,796	5,796	7,333	+1,537	+1,537
Protection and Advocacy of Individual Rights (PAIR)	D	17,650	17,650	17,650	---	---
Supported Employment State grants	D	22,548	---	22,548	---	+22,548
Independent Living:						
Services for Older Blind Individuals	D	33,317	33,317	33,317	---	---
Helen Keller National Center for Deaf/Blind Youth and Adults	D	13,500	10,336	16,000	+2,500	+5,664
Total, Rehabilitation services		3,657,189	3,719,527	3,752,076	+94,887	+32,549

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES							
American Printing House for the Blind	D	30,431	25,431	39,000	+8,569	+13,569	
National Technical Institute for the Deaf (NTID):							
Operations	D	77,500	70,016	80,000	+2,500	+9,984	
Gallaudet University:							
Operations	D	134,361	121,275	138,361	+4,000	+17,086	
Total, Special Institutions for Persons with Disabilities		242,292	216,722	257,361	+15,069	+40,639	
CAREER, TECHNICAL, AND ADULT EDUCATION							
Career Education:							
Basic State Grants/Secondary & Technical Education							
State Grants, current funded	D	471,598	471,598	509,000	+37,402	+37,402	FF
Advance from prior year	NA	(791,000)	(791,000)	(791,000)	---	---	
FY 2021	D	791,000	791,000	791,000	---	---	
Subtotal, Basic State Grants, program level		1,262,598	1,262,598	1,300,000	+37,402	+37,402	
National Programs	D	7,421	20,000	7,421	---	-12,579	FF
Subtotal, Career Education		1,270,019	1,282,598	1,307,421	+37,402	+24,823	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request	
Adult Education:							
State Grants/Adult Basic and Literacy Education:	D						
State Grants, current funded	D	641,955	485,849	665,000	+23,045	+179,151	FF
National Leadership Activities	D	13,712	73,712	13,712	---	-60,000	FF
Subtotal, Adult education		655,667	559,561	678,712	+23,045	+119,151	
Total, Career, Technical, and Adult Education		1,925,686	1,842,159	1,986,133	+60,447	+143,974	
Current Year		(1,134,686)	(1,051,159)	(1,195,133)	(+60,447)	(+143,974)	
FY 2021		(791,000)	(791,000)	(791,000)	---	---	
Subtotal, Forward Funded		(1,134,686)	(1,051,159)	(1,195,133)	(+60,447)	(+143,974)	
STUDENT FINANCIAL ASSISTANCE							
Pell Grants -- maximum grant (NA)	NA	(5,135)	(5,135)	(5,285)	(+150)	(+150)	
Pell Grants	D	22,475,352	22,475,352	22,475,352	---	---	
Federal Supplemental Educational Opportunity Grants	D	840,000	---	1,028,000	+188,000	+1,028,000	
Federal Work Study	D	1,130,000	500,000	1,434,000	+304,000	+934,000	
Total, Student Financial Assistance (SFA)		24,445,352	22,975,352	24,937,352	+492,000	+1,962,000	
FEDERAL DIRECT STUDENT LOAN PROGRAM ACCOUNT	CH	350,000	---	350,000	---	+350,000	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
STUDENT AID ADMINISTRATION						
Salaries and Expenses	D	698,943	1,281,281	698,943	---	-582,338
Servicing Activities	D	980,000	530,719	980,000	---	+449,281
Total, Student Aid Administration		1,678,943	1,812,000	1,678,943	---	-133,057
HIGHER EDUCATION						
Aid for Institutional Development:						
Strengthening Institutions	D	99,875	---	110,000	+10,125	+110,000
Hispanic Serving Institutions	D	124,415	---	150,000	+25,585	+150,000
Promoting Post-Baccalaureate Opportunities for Hispanic Americans	D	11,163	---	30,000	+18,837	+30,000
Conslidated MSI Grant		---	147,906	---	---	-147,906
Strengthening Historically Black Colleges (HBCUs)	D	282,420	282,420	375,000	+92,580	+92,580
Strengthening Historically Black Graduate Institutions	D	73,037	73,037	125,000	+51,963	+51,963
Strengthening Predominantly Black Institutions	D	11,475	---	22,000	+10,525	+22,000
Asian American Pacific Islander	D	3,864	---	17,864	+14,000	+17,864
Strengthening Alaska Native and Native Hawaiian-Serving Institutions	D	15,930	---	18,100	+2,170	+18,100
Strengthening Native American-Serving Nontribal Institutions	D	3,864	---	5,000	+1,136	+5,000
Strengthening Tribal Colleges	D	31,854	27,599	51,000	+19,146	+23,401
Strengthening HBCU Masters programs	D	8,657	8,657	13,500	+4,843	+4,843
Subtotal, Aid for Institutional development		666,554	539,619	917,464	+250,910	+377,845

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
International Education and Foreign Language:						
Domestic Programs	D	65,103	---	80,400	+15,297	+80,400
Overseas Programs	D	7,061	---	8,730	+1,669	+8,730
Subtotal, International Education & Foreign Lang		72,164	---	89,130	+16,966	+89,130
Postsecondary Program for Students with Intellectual Disabilities	D	11,800	11,800	11,800	---	---
Minority Science and Engineering Improvement	D	11,135	9,648	13,000	+1,865	+3,352
Tribally Controlled Postsec Voc/Tech Institutions	D	9,564	8,286	10,000	+436	+1,714
Federal TRIO Programs	D	1,060,000	950,000	1,160,000	+100,000	+210,000
GEAR UP	D	360,000	---	395,000	+35,000	+395,000
Graduate Assistance in Areas of National Need	D	23,047	---	24,047	+1,000	+24,047
Teacher Quality Partnerships	D	43,092	---	53,092	+10,000	+53,092
Child Care Access Means Parents in School	D	50,000	15,134	60,000	+10,000	+44,866
Fund for the Improvement of Postsecondary Ed. (FIPSE)	D	5,000	---	10,000	+5,000	+10,000
Total, Higher Education		2,312,356	1,534,487	2,743,533	+431,177	+1,209,046

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
HOWARD UNIVERSITY						
Academic Program	D	205,788	191,091	219,270	+13,482	+28,179
Endowment Program	D	3,405	3,405	3,405	---	---
Howard University Hospital	D	27,325	27,325	27,325	---	---
Total, Howard University		236,518	221,821	250,000	+13,482	+28,179
COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS PROGRAM	D	435	435	435	---	---
HISTORICALLY BLACK COLLEGE AND UNIVERSITY (HBCU) CAPITAL FINANCING PROGRAM ACCOUNT						
HBCU Federal Administration	D	334	334	334	---	---
HBCU Loan Subsidies	D	40,150	40,150	50,150	+10,000	+10,000
Total, HBCU Capital Financing Program		40,484	40,484	50,484	+10,000	+10,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
INSTITUTE OF EDUCATION SCIENCES (IES)						
Research, Development and Dissemination	D	192,695	187,500	205,400	+12,705	+17,900
Statistics	D	109,500	112,500	117,500	+8,000	+5,000
Regional Educational Laboratories	D	55,423	---	60,400	+4,977	+60,400
Research in Special Education	D	56,000	54,000	61,000	+5,000	+7,000
Special Education Studies and Evaluations	D	10,818	10,818	11,674	+856	+856
Statewide Data Systems	D	32,281	---	35,281	+3,000	+35,281
Assessment:						
National Assessment	D	151,000	149,000	151,000	---	+2,000
National Assessment Governing Board	D	7,745	7,745	7,745	---	---
Subtotal, Assessment		158,745	156,745	158,745	---	+2,000
Total, IES		615,462	521,563	650,000	+34,538	+128,437

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
DEPARTMENTAL MANAGEMENT						
Program Administration:						
Salaries and Expenses	D	430,000	433,500	430,000	---	-3,500
Building Modernization	D	---	13,500	---	---	-13,500
Total, Program administration		430,000	447,000	430,000	---	-17,000
Office for Civil Rights	D	125,000	125,000	130,000	+5,000	+5,000
Office of Inspector General	D	61,143	63,418	63,418	+2,275	---
Total, Departmental management		616,143	635,418	623,418	+7,275	-12,000
Total, Title III, Department of Education		74,970,406	67,615,955	79,501,852	+4,531,446	+11,885,897
Current Year		(52,373,405)	(45,018,954)	(56,904,851)	(+4,531,446)	(+11,885,897)
FY 2021		(22,597,001)	(22,597,001)	(22,597,001)	---	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE IV--RELATED AGENCIES						
COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED	D	8,250	9,400	9,000	+750	-400
(Office of Inspector General)	NA	(1,250)	(1,650)	(1,650)	(+400)	---
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE						
Operating Expenses						
Domestic Volunteer Service Programs:						
Volunteers in Service to America (VISTA)	D	92,364	4,665	95,000	+2,636	+90,335
National Senior Volunteer Corps:						
Foster Grandparents Program	D	110,899	111	118,799	+7,900	+118,688
Senior Companion Program	D	46,863	111	50,863	+4,000	+50,752
Retired Senior Volunteer Program	D	50,355	111	51,855	+1,500	+51,744
Subtotal, Senior Volunteers		208,117	333	221,517	+13,400	+221,184
Subtotal, Domestic Volunteer Service		300,481	4,998	316,517	+16,036	+311,519

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
National and Community Service Programs:						
AmeriCorps State and National Grants	D	425,010	2,224	450,010	+25,000	+447,786
Innovation, Assistance, and Other Activities	D	7,600	---	8,600	+1,000	+8,600
Evaluation	D	4,000	---	4,000	---	+4,000
National Civilian Community Corps (NCCC)(subtitle E)	D	32,000	22,883	33,000	+1,000	+10,117
State Commission Support Grants	D	17,538	---	17,538	---	+17,538
Subtotal, National and Community Service		486,148	25,107	513,148	+27,000	+488,041
Total, Operating expenses		786,629	30,105	829,665	+43,036	+799,560
National Service Trust	D	206,842	10,000	218,691	+11,849	+208,691
Salaries and Expenses	D	83,737	59,300	83,737	---	+24,437
Office of Inspector General	D	5,750	4,258	6,013	+263	+1,755
Total, Corp. for National and Community Service		1,082,958	103,663	1,138,106	+55,148	+1,034,443

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
CORPORATION FOR PUBLIC BROADCASTING:						
FY 2022 (current) with FY 2020 comparable.....	D	445,000	---	495,000	+50,000	+495,000
FY 2021 advance with FY 2019 comparable (NA).....	NA	(445,000)	(445,000)	(445,000)	---	---
Rescission of FY 2021 funds (NA).....	NA	---	(-415,000)	---	---	(+415,000)
Subtotal, FY 2021 program level.....		445,000	30,000	445,000	---	+415,000
FY 2020 advance with FY 2018 comparable (NA).....	NA	(445,000)	(445,000)	(445,000)	---	---
Rescission of FY 2020 funds (NA).....	NA	---	(-415,000)	---	---	(+415,000)
Subtotal, FY 2020 program level.....		445,000	30,000	445,000	---	+415,000
Public television interconnection system (current)	D	20,000	---	20,000	---	+20,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
FEDERAL MEDIATION AND CONCILIATION SERVICE.....	D	46,650	47,200	48,200	+1,550	+1,000
FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION.....	D	17,184	17,184	17,184	---	---
INSTITUTE OF MUSEUM AND LIBRARY SERVICES.....	D	242,000	23,000	257,000	+15,000	+234,000
MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION.....	D	8,480	9,000	8,480	---	-520
MEDICARE PAYMENT ADVISORY COMMISSION.....	TF	12,545	12,645	12,645	+100	---
NATIONAL COUNCIL ON DISABILITY.....	D	3,250	3,450	3,450	+200	---
NATIONAL LABOR RELATIONS BOARD.....	D	274,224	241,550	341,500	+67,276	+99,950
NATIONAL MEDIATION BOARD.....	D	13,800	13,800	15,800	+2,000	+2,000
OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION.....	D	13,225	13,225	13,225	---	---
RAILROAD RETIREMENT BOARD						
Dual Benefits Payments Account.....	D	19,000	16,000	16,000	-3,000	---
Less Income Tax Receipts on Dual Benefits.....	D	-1,000	-1,000	-1,000	---	---
Subtotal, Dual Benefits.....		18,000	15,000	15,000	-3,000	---
Federal Payments to the Railroad Retirement Accounts..	M	150	150	150	---	---
Limitation on Administration.....	TF	123,500	116,225	135,500	+12,000	+19,275
Limitation on the Office of Inspector General.....	TF	11,000	11,000	11,500	+500	+500

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
SOCIAL SECURITY ADMINISTRATION						
Payments to Social Security Trust Funds	M	11,000	11,000	11,000	---	---
Supplemental Security Income Program						
Federal Benefit Payments	M	55,716,000	56,982,000	56,982,000	+1,266,000	---
Beneficiary Services	M	126,000	45,000	45,000	-81,000	---
Research and Demonstration	M	101,000	101,000	101,000	---	---
Administration	D	4,923,203	4,404,000	4,510,540	-412,663	+106,540
Subtotal, SSI program level		60,866,203	61,532,000	61,638,540	+772,337	+106,540
Less funds advanced in prior year	M	-19,500,000	-19,700,000	-19,700,000	-200,000	---
Subtotal, regular SSI current year		41,366,203	41,832,000	41,938,540	+572,337	+106,540
New advance, 1st quarter, FY 2021	M	19,700,000	19,900,000	19,900,000	+200,000	---
Total, SSI program		61,066,203	61,732,000	61,838,540	+772,337	+106,540

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Limitation on Administrative Expenses						
OASI/DI Trust Funds	TF	5,119,748	5,507,400	5,642,498	+522,750	+135,098
HI/SMI Trust Funds	TF	2,321,594	2,451,200	2,508,507	+186,913	+57,307
Social Security Advisory Board	TF	2,400	2,400	2,400	---	---
SSI	TF	3,615,203	3,099,000	3,205,540	-409,663	+106,540
Subtotal, regular LAE		11,058,945	11,060,000	11,358,945	+300,000	+298,945
User Fees:						
SSI User Fee activities	D	134,000	130,000	130,000	-4,000	---
CBO adjustment	D	-5,000	---	---	+5,000	---
SSPA User Fee Activities	D	1,000	1,000	1,000	---	---
CBO adjustment	D	-1,000	-1,000	-1,000	---	---
Subtotal, User fees		129,000	130,000	130,000	+1,000	---
Subtotal, Limitation on administrative expenses		11,187,945	11,190,000	11,488,945	+301,000	+298,945

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Program Integrity:						
OASDI Trust Funds	TF	375,000	277,000	277,000	-98,000	---
SSI	TF	1,308,000	1,305,000	1,305,000	-3,000	---
Subtotal, Program integrity funding		1,683,000	1,582,000	1,582,000	-101,000	---
Base Program Integrity		(273,000)	(273,000)	(273,000)	---	---
Total, Limitation on Administrative Expenses (less Base program integrity)		1,410,000	1,309,000	1,309,000	-101,000	---
Total, Limitation on Administrative Expenses		12,870,945	12,772,000	13,070,945	+200,000	+298,945
Total, Limitation on Administrative Expenses (less user fees)		12,741,945	12,642,000	12,940,945	+199,000	+298,945

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Office of Inspector General						
Federal Funds	D	30,000	30,000	30,000	---	---
Trust Funds	TF	75,500	75,500	75,500	---	---
Total, Office of Inspector General		105,500	105,500	105,500	---	---
Adjustment: Trust fund transfers from general revenues	TF	-4,923,203	-4,404,000	-4,510,540	+412,663	-106,540
Total, Social Security Administration		69,130,445	70,216,500	70,515,445	+1,385,000	+298,945
Federal funds		61,236,203	61,903,000	62,009,540	+773,337	+106,540
Current year		(41,536,203)	(42,003,000)	(42,109,540)	(+573,337)	(+106,540)
New advances, 1st quarter, FY 2021		(19,700,000)	(19,900,000)	(19,900,000)	(+200,000)	---
Trust funds		7,894,242	8,313,500	8,505,905	+611,663	+192,405
Total, Title IV, Related Agencies		71,470,661	70,852,992	73,057,185	+1,586,524	+2,204,193
Federal Funds		63,429,374	62,399,622	64,391,635	+962,261	+1,992,013
Current Year		(43,284,374)	(42,499,622)	(43,996,635)	(+712,261)	(+1,497,013)
FY 2021 Advance		(19,700,000)	(19,900,000)	(19,900,000)	(+200,000)	---
FY 2022 Advance		(445,000)	---	(495,000)	(+50,000)	(+495,000)
Trust Funds		8,041,287	8,453,370	8,665,550	+624,263	+212,180

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
RECAP						
Mandatory, total in bill		869,814,362	900,377,448	902,077,448	+32,263,086	+1,700,000
Less advances for subsequent years		-161,845,797	-164,017,075	-164,017,075	-2,171,278	---
Plus advances provided in prior years		158,462,759	161,845,797	161,845,797	+3,383,038	---
Total, mandatory, current year		866,431,324	898,206,170	899,906,170	+33,474,846	+1,700,000
Discretionary, total in bill		189,378,959	166,511,153	203,946,000	+14,567,041	+37,434,847
Less advances for subsequent years		-24,814,001	-24,282,859	-24,864,001	-50,000	-581,142
Plus advances provided in prior years		24,814,001	24,814,001	24,814,001	---	---
Subtotal, discretionary, current year		189,378,959	167,042,295	203,896,000	+14,517,041	+36,853,705
Discretionary Scorekeeping adjustments:						
Average Weekly Insured Unemployment (AWIU) Contingent	TF	10,000	25,000	25,000	+15,000	---
Medicare Eligible Accruals (permanent,indefinite)1/	D	30,041	30,000	30,000	-41	---
Surplus property (Department of Labor)	CH	2,000	2,000	2,000	---	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Dislocated Workers assistance National Reserve (rescission)	D	-53,000	-86,142	---	+53,000	+86,142
Foreign Labor Certification Processing (DOL)	TF	8,250	---	---	-8,250	---
H-1B (rescission)	CH	-8,250	---	---	+8,250	---
Nonrecurring expenses fund (rescission)	D	-400,000	-400,000	---	+400,000	+400,000
CMS program management reclassification (sec. 235)		---	3,000	---	---	-3,000
Childrens Health Insurance Program performance bonus (rescission)	CH	---	-10,052,881	-7,715,000	-7,715,000	+2,337,881
Childrens Health Insurance Program Annual Allotment to States (rescission)	CH	-2,061,000	-5,298,763	-4,000,000	-1,939,000	+1,298,763
Child Enrollment contingency fund (rescission)	CH	-5,654,000	-4,396,000	---	+5,654,000	+4,396,000
Student loan medical deferment	CH	5,000	---	---	-5,000	---
Pell unobligated balances (rescission)	D	-600,000	-2,000,000	---	+600,000	+2,000,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019 AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in Thousands)

		FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Pell: Increase maximum award	CH	39,000	---	52,000	+13,000	+52,000
Pell mandatory funds (rescission)	CH	-39,000	---	-52,000	-13,000	-52,000
SSA proposed fee for issuance of new Social Security charge		---	-68,000	---	---	+68,000
SSI User Fee Collection	D	-134,000	-130,000	-130,000	+4,000	---
CBO adjustment	D	5,000	-1,000	-1,000	-6,000	---
SSA SSPA User Fee Collection	D	-1,000	-1,000	-1,000	---	---
CBO adjustment	D	1,000	1,000	1,000	---	---
Traditional Medicare program	D	305,000	---	---	-305,000	---
CNCS National Service Trust unobligated balances (rescission)	D	-150,000	-40,000	---	+150,000	+40,000
Corporation for Public Broadcasting FY2020 advance (rescission)	D	---	-415,000	---	---	+415,000
21ST Century Cures Act adjustment (PL 114-255)	D	-711,000	-492,000	-492,000	+219,000	---
Total, discretionary		179,973,000	143,722,509	191,615,000	+11,642,000	+47,892,491
Grand Total, current year		1,046,404,324	1,041,928,679	1,091,521,170	+45,116,846	+49,592,491

MINORITY VIEWS

[TO BE PROVIDED]