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SENATE

{ REPORT
112-176

DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATION BILL, 2013

JUNE 14, 2012.—Ordered to be printed

Mr. HARKIN, from the Committee on Appropriations,
submitted the following

REPORT

[To accompany S. 3295]

The Committee on Appropriations reports the bill (S. 3295) making appropriations for Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2013, and for other purposes, reports favorably thereon and recommends that the bill do pass.

Amount of budget authority

| | |
|---|-------------------|
| Total of bill as reported to the Senate | \$777,568,714,000 |
| Amount of 2012 appropriations | 741,495,738,000 |
| Amount of 2013 budget estimate | 777,624,610,000 |
| Bill as recommended to Senate compared to— | |
| 2012 appropriations | + 36,072,976,000 |
| 2013 budget estimate | – 55,896,000 |

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LIST OF ABBREVIATIONS

ACL—Administration for Community Living
ADAP—AIDS Drug Assistance Program
AHEC—area health education center
AHRQ—Agency for Healthcare Research and Quality
ALS—amyotrophic lateral sclerosis
AoA—Administration on Aging
AP—Advanced Placement
APH—American Printing House for the Blind
ARRA—American Recovery and Reinvestment Act of 2009
ASH—Assistant Secretary for Health
ASPR—Assistant Secretary for Preparedness and Response
ATSDR—Agency for Toxic Substances and Disease Registry
BARDA—Biomedical Advanced Research and Development Authority
BCA—Budget Control Act of 2011
BLS—Bureau of Labor Statistics
CAN—Cures Acceleration Network
CCAMPIS—Child Care Access Means Parents in School
CCDBG—Child Care and Development Block Grant
CDC—Centers for Disease Control and Prevention
CHAFL—College Housing and Academic Facilities Loans
CHC—community health center
CHGME—Children’s Hospitals Graduate Medical Education
CMHS—Center for Mental Health Services
CMS—Centers for Medicare and Medicaid Services
CNCS—Corporation for National and Community Service
CPB—Corporation for Public Broadcasting
CSAP—Center for Substance Abuse Prevention
CSAT—Center for Substance Abuse Treatment
CSBG—Community Services Block Grant
CSEOA—Community Service Employment for Older Americans
DOD—Department of Defense
DOE—Department of Energy
DOL—Department of Labor
EBSA—Employee Benefits Security Administration
EEOICPA—Energy Employees Occupational Illness Compensation Program Act
ERISA—Employee Retirement Income Security Act of 1974
ESEA—Elementary and Secondary Education Act
ETA—Employment and Training Administration
FDA—Food and Drug Administration
FEMA—Federal Emergency Management Agency
FIC—Fogarty International Center
FIE—Fund for the Improvement of Education
FIPSE—Fund for the Improvement of Postsecondary Education
FMCS—Federal Mediation and Coalition Service

FMSHRC—Federal Mine Safety and Health Review Commission
 FTE—full time equivalent
 FWS—Federal Work Study
 GAANN—Graduate Assistance in Areas of National Need
 GAO—Government Accountability Office
 GEAR UP—Gaining Early Awareness and Readiness for Under-graduate Programs
 HBCUs—Historically Black Colleges and Universities
 HCERA—Health Care and Education Reconciliation Act of 2010
 HCFAC—Health Care Fraud and Abuse Control
 HEA—Higher Education Act
 HELP—Health, Education, Labor and Pensions
 HFFI—Healthy Foods Financing Initiative
 HHS—Health and Human Services
 HITECH—Health Information Technology for Economic and Clinical Health
 HRSA—Health Resources and Services Administration
 IC—Institute and Center
 IDeA—Institutional Development Award
 IDEA—Individuals with Disabilities Education Act
 IES—Institute of Education Sciences
 IMLS—Institute of Museum and Library Services
 IOM—Institute of Medicine
 LEA—local educational agency
 LIHEAP—Low Income Home Energy Assistance Program
 MACPAC—Medicaid and CHIP Payment and Access Commission
 MCH—maternal and child health
 MedPAC—Medicare Payment Advisory Commission
 MIECHV—Maternal, Infant, and Early Childhood Home Visiting
 MSHA—Mine Safety and Health Administration
 NAEP—National Assessment of Educational Progress
 NAGB—National Assessment Governing Board
 NCATS—National Center for Advancing Transitional Sciences
 NCBDDD—National Center on Birth Defects and Developmental Disabilities
 NCES—National Center for Education Statistics
 NCHS—National Center for Health Statistics
 NCI—National Cancer Institute
 NCRR—National Center for Research Resources
 NEI—National Eye Institute
 NHGRI—National Human Genome Research Institute
 NHLBI—National Heart, Lung, and Blood Institute
 NIA—National Institute on Aging
 NIAAA—National Institute on Alcohol Abuse and Alcoholism
 NIAID—National Institute of Allergy and Infectious Disease
 NIAMS—National Institute of Arthritis and Musculoskeletal and Skin Diseases
 NIBIB—National Institute of Biomedical Imaging and Bio-engineering
 NICHD—Eunice Kennedy Shriver National Institute of Child Health and Human Development
 NIDA—National Institute on Drug Abuse
 NIDCD—National Institute on Deafness and Other Communication Disorders

NIDCR—National Institute of Dental and Craniofacial Research
 NIDDK—National Institute of Diabetes and Digestive and Kidney Disease
 NIDRR—National Institute on Disability and Rehabilitation Research
 NIEHS—National Institute of Environmental Health Sciences
 NIGMS—National Institute of General Medical Sciences
 NIH—National Institutes of Health
 NIMH—National Institute on Mental Health
 NIMHD—National Institute on Minority Health and Health Disparities
 NINDS—National Institute of Neurological Disorders and Stroke
 NINR—National Institute of Nursing Research
 NLM—National Library of Medicine
 NLRB—National Labor Relations Board
 NSF—National Science Foundation
 NSIP—Nutrition Services Incentives Program
 NTID—National Technical Institute for the Deaf
 OAR—Office of AIDS Research
 OBSSR—Office of Behavioral and Social Sciences Research
 OCR—Office for Civil Rights
 ODEP—Office of Disability Employment Policy
 OFCCP—Office of Federal Contract Compliance Programs
 OIG—Office of the Inspector General
 OLMS—Office of Labor-Management Standards
 OMB—Office of Management and Budget
 OMH—Office of Minority Health
 OMHA—Office of Medicare Hearings and Appeals
 ONC—Office of the National Coordinator for Health Information Technology
 ORR—Office of Refugee Resettlement
 ORWH—Office of Research on Women’s Health
 OSEP—Office of Special Education Programs
 OSHA—Occupational Safety and Health Administration
 OWCP—Office of Workers’ Compensation Programs
 OWH—Office of Women’s Health
 PAIMI—protection and advocacy for individuals with mental illness
 PATH—Projects for Assistance in Transition From Homelessness
 PBGC—Pension Benefit Guaranty Corporation
 PHS—Public Health Service
 PPACA—Patient Protection and Affordable Care Act
 PPH Fund—Prevention and Public Health Fund
 PRNS—Programs of Regional and National Significance
 PROMISE—Promoting School Readiness of Minors in SSI
 RSA—Rehabilitation Services Administration
 SAMHSA—Substance Abuse and Mental Health Services Administration
 SAPT—Substance abuse prevention and treatment
 SCHIP—State Children’s Health Insurance Program
 SEA—State educational agency
 SEOG—Supplemental Educational Opportunity Grant
 SIG—School Improvement Grants
 SPORE—Specialized Program of Research Excellence

SPRANS—Special Projects of Regional and National Significance
 SSA—Social Security Administration
 SSBG—Social Services Block Grant
 SSI—Supplemental Security Income
 STEM—science, technology, engineering, and mathematics
 TANF—Temporary Assistance for Needy Families
 TB—tuberculosis
 TBI—traumatic brain injury
 TIF—Teacher Incentive Fund
 TRND—Therapeutics for Rare and Neglected Diseases
 UAC—unaccompanied alien children
 UCEDD—University Center for Excellence in Developmental
 Disabilities
 UI—unemployment insurance
 USAID—U.S. Agency for International Development
 USDA—U.S. Department of Agriculture
 USPSTF—U.S. Preventive Services Task Force
 VETS—Veterans’ Employment and Training Services
 VISTA—Volunteers in Service to America
 VR—Vocational Rehabilitation
 WANTO—Women in Apprenticeship and Non-Traditional Occu-
 pations
 WHD—Wage and Hour Division
 WIA—Workforce Investment Act
 WIF—Workforce Innovation Fund
 WISEWOMAN—Well-Integrated Screening and Evaluation for
 Women Across the Nation

SUMMARY OF BUDGET ESTIMATES AND COMMITTEE RECOMMENDATIONS

For fiscal year 2013, the Committee recommends total budget authority of \$777,568,714,000 for the Departments of Labor, Health and Human Services, and Education, and Related Agencies. Of this amount, \$158,772,000,000 is current year discretionary funding, including offsets and \$1,050,000,000 in cap adjustments for healthcare fraud and abuse and for program integrity at the SSA, in accordance with the 302(b) allocation for this bill.

The Committee recommendation reflects a program level of \$166,011,337,000 for fiscal year 2013. (Program level is current year discretionary funding plus additional spending that is offset by savings in mandatory programs and other adjustments to discretionary funding.)

The bill provides discretionary program level funding of \$12,341,781,000 for the Department of Labor, \$70,999,718,000 for the Department of HHS, \$68,520,153,000 for the Department of Education and \$14,149,685,000 for related agencies. The comparable fiscal year 2012 levels were \$12,552,758,000 for Labor, \$69,620,175,000 for HHS, \$68,112,288,000 for Education and \$13,831,731,000 for related agencies.

OVERVIEW

The Labor, HHS, and Education, and Related Agencies appropriations bill constitutes the largest of the non-defense Federal appropriations bills being considered by Congress this year. But even more noteworthy than the size of the bill is the breadth of the critical services that are funded by this legislation, which range from medical research to job training, from home energy assistance to mental health, from student financial assistance to the management of SSA.

Weighing the relative merits of such a wide range of priorities is difficult, especially when funding is tight. The Committee has tried to strike a balance between investing in the future prosperity of the Nation, providing a safety net for people who are most vulnerable in today's struggling economy, and increasing the fiscal accountability and effective use of taxpayer dollars.

Several themes permeate the Committee's recommendation, described below.

FISCAL ACCOUNTABILITY

The Committee recommendation provides funding for several activities that reduce fraud, waste, and abuse of Federal funding.

Healthcare Program Integrity.—Fraud committed against Federal healthcare programs diverts critical resources from services to some of the Nation's most vulnerable populations. The Committee

includes \$610,000,000 for HCFAC activities at CMS, nearly double the fiscal year 2012 level of \$310,378,000. The historical return on investment for the Medicare Integrity program has been about \$14 for every \$1 spent. For fraud and abuse activities throughout Medicare and Medicaid, the Federal Government saves or recovers \$6 for every \$1 spent.

Social Security Program Integrity.—The Committee recommendation includes \$1,024,000,000, an increase of \$268,000,000 over the fiscal year 2012 level, for the SSA to conduct continuing disability reviews and redeterminations of nonmedical eligibility under the SSI program. This investment will save approximately \$8,100,000,000 over 10 years for the Social Security, Medicare, and Medicaid programs, a return on investment of \$8 for every \$1 spent.

Unemployment Insurance Program Integrity.—The Committee recommendation includes \$75,000,000, an increase of \$15,000,000 over the fiscal year 2012 level, to conduct re-employment and eligibility assessments and UI improper payment reviews. This funding will save State UI Trust funds by helping claimants exit the UI program faster and avoid exhausting benefits. The Committee recommendation also includes \$30,000,000 to support intensive reemployment services for UI claimants, which shorten the length of time people receive unemployment insurance, as well as boosted employment and earnings for claimants. No funds were provided in fiscal year 2012 for these services.

Spending on Conferences and Other Administrative Expenses.—The Committee bill includes new provisions intended to prevent excessive spending on conferences and other administrative expenses. The provisions require departments, agencies, boards, and commissions funded in this act to submit quarterly reports to their OIG or senior ethics official on the costs and contracting procedures involved in any conference that costs more than \$20,000. The provisions also limit the amount of Federal funding that may be spent on any single international conference and the number of Federal employees who may attend it. The provisions codify the May 2012 OMB memorandum related to planning for and spending on conferences, travel, real property, and fleet management.

340B User Fee.—The Committee includes a provision to institute a new 0.1 percent user fee on 340B discount drugs. The fee is expected to generate \$6,000,000 in fiscal year 2013, which will be used to implement program integrity work recommended by GAO and mandated by PPACA.

PROMOTING INNOVATION

Just because times are lean doesn't mean that innovation should cease. This bill launches or continues several initiatives that will leverage reform and transform key Federal services.

Pay for Success.—The Committee recommendation creates a new model, called Pay for Success, for financing and delivering effective services under government programs. Federal funding typically pays for services with the expectation, but no absolute guarantee that they will have positive results. Under Pay for Success, the Federal Government will make available funds to pay for defined outcomes, such as employment or graduation. Philanthropic groups

and social impact investors will finance the services and would earn payments if those services lead to the agreed-upon outcomes. The Committee recommendation includes up to \$10,000,000 within WIF, up to \$9,000,000 within the Social Innovation Fund, and up to \$25,000,000 within the PROMISE program for this new approach.

Performance Partnerships for Disconnected Youth.—The Committee recommendation creates a new authority called Performance Partnerships that will provide States and local communities with unprecedented flexibility to achieve defined outcomes for disconnected youth. Up to 13 States and/or local communities will be allowed to combine funding that they receive through various programs within this bill, even if the programs are funded in different departments, for these pilot projects. Grantees will receive waivers to reduce bureaucratic obstacles to the smooth functioning of these performance partnerships; for example, they could be allowed to provide a single set of outcome data to the Departments of Education, HHS, and Labor, rather than slightly different data to each agency.

Investing in Innovation.—The Committee bill creates a new organization in the Department of Education called ARPA-ED that will identify and promote advances in fundamental and applied sciences and engineering that could be translated into new learning technologies; develop, test, and evaluate novel learning technologies and related processes; and accelerate transformational technological advances. Modeled after the Defense Advanced Research Projects Agency, the entity that helped create the Internet, ARPA-ED will be funded as a set-aside of up to \$44,825,000 within the Investing in Innovation [i3] program. The Committee bill provides \$149,417,000 for i3, which provides grants to replicate education programs that have high levels of effectiveness and to develop and test promising new ideas.

First in the World.—The Committee bill includes \$40,000,000 to create the First in the World Initiative in the Department of Education. Modeled after the Investing in Innovation program, the initiative will provide grants to colleges and universities to implement innovative and effective strategies that improve educational outcomes and significantly reduce the net price paid by students.

Strategic Investor.—The Committee bill includes \$20,000,000 to create a Strategic Investor initiative at BARDA. This new program will allow the Federal Government to partner with small biotechnology companies in order to foster and accelerate the generation of novel medical countermeasures and technologies. This initiative will address gaps in the Government's capability to respond to emerging infections, bioterrorism, and other public health threats.

Promise Neighborhoods.—The Committee recommends \$80,000,000—a more than \$20,000,000 increase over the fiscal year 2012 level—for the Promise Neighborhoods program. Inspired by the successful Harlem Children's Zone program, Promise Neighborhoods supports local efforts to establish cradle-to-career services designed to improve educational outcomes for students in distressed neighborhoods.

Accelerating Cures.—The Committee bill includes \$40,000,000, four times the fiscal year 2012 level, for CAN, an NIH initiative to help speed the translation and application of discoveries that have shown signs of success at the laboratory level but have not advanced far enough to attract significant investments from the private sector. CAN will make grants to biotech companies, universities, and patient advocacy groups, and will also help facilitate FDA review for the high-need cures that are funded by this initiative.

Workforce Innovation Fund.—The Committee includes \$49,906,000 to continue WIF, which will help reform the Nation's workforce investment system and improve the delivery of training programs to workers.

Social Innovation Fund.—The Committee recommendation provides \$45,000,000, the same as the fiscal year 2012 level, for the Social Innovation Fund at CNCS. This fund mobilizes public and private resources to expand and evaluate promising, innovative community-based solutions in three areas: economic opportunity, healthy futures, and youth development.

EARLY CHILDHOOD EDUCATION

Quality early childhood education has proven to have lasting effects for low-income children and their families. Investments in early childhood education not only improve outcomes for children and families, but save taxpayer dollars in the long run through lower welfare, special education, and criminal justice costs.

Child Care and Development Block Grant.—The Committee recommendation includes \$2,438,313,000, a \$160,000,000 increase over the fiscal year 2012 level, for the CCDBG. Of this increase, \$90,000,000 is targeted to improving the quality of the early childhood care and education workforce and will support training, education, and other professional development opportunities. The remaining \$70,000,000 will be used to improve low-income families' access to quality child care by increasing the number of families served, subsidy rates, and reimbursement rates to providers.

Head Start.—The Committee recommendation includes \$8,038,544,000, a \$70,000,000 increase over the fiscal year 2012 level, for Head Start. In fiscal year 2012, HHS began implementing new regulations that will require Head Start grantees that do not meet certain performance standards to re-compete for funding. This year, over \$1,200,000,000 in Head Start grants will be re-competed, providing additional assurances that children in Head Start are receiving quality services. The Committee recommendation supports the implementation of this new re-competition process as well as an increase for each existing grantee to help defray rising operational costs.

Race to the Top.—The Committee includes \$600,000,000, a \$51,040,000 increase over the fiscal year 2012 level, for the administration's signature education reform program. A significant portion of fiscal year 2013 funds will be used for Race to the Top—Early Learning Challenge, which will offer additional opportunities to States for enhancing early care and education.

PREVENTION

Nearly three-quarters of all healthcare costs are attributable to chronic diseases, the majority of which are preventable. This bill promotes prevention efforts through discretionary funding as well as through \$1,000,000,000 in mandatory funding that will be transferred from the PPH Fund. The PPH Fund was appropriated in PPACA, but PPACA gives Congress the authority to allocate it through the appropriations process.

Community Transformation Grants.—The Committee recommends dedicating \$280,000,000 of the PPH Fund, an increase of \$54,000,000 over the fiscal year 2012 level, for implementing evidence-based public health interventions to reduce obesity and smoking and make preventive services more accessible.

Childhood Immunizations.—The Committee recommends \$557,870,000 for immunization programs authorized under section 317 of the PHS Act, including a \$190,000,000 transfer from the PPH Fund. This funding is sufficient to purchase an estimated 3.5 million doses of vaccine. Immunization saves \$10.20 in direct medical costs for every child vaccinated.

Smoking Prevention.—Tobacco kills 440,000 people in the Nation each year, costing \$96,000,000,000 per year in medical expenses. The Committee bill provides \$203,117,000, including \$95,000,000 in transfers from the PPH Fund, for the Office of Smoking and Health at CDC. This funding, an increase of \$12,000,000 over the fiscal year 2012 level, will continue the successful media campaign “Tips From a Former Smoker” and expand State quit-lines.

Diabetes Prevention Program [DPP].—The Committee bill includes \$20,000,000, double the fiscal year 2012 level, for replicating the Diabetes Prevention Program, a set of lifestyle interventions that has been proven to reduce the risk of developing diabetes by 58 percent in individuals at high risk. This amount includes \$10,000,000 in transfers from the PPH Fund.

Elder Falls.—One out of three adults age 65 and older falls each year, with 20 to 30 percent of falls resulting in moderate to severe injury. The direct medical costs total \$19,000,000,000 a year. Many of the falls are preventable with lifestyle interventions and appropriate physical supports. In a new initiative, the Committee bill transfers \$10,000,000 from the PPH Fund to CDC and ACL to research and implement evidence-based approaches to preventing elderly falls.

ASSISTING PEOPLE WITH DISABILITIES

Promoting School Readiness for Minors in SSI.—In fiscal year 2012, Congress created PROMISE, an unprecedented interagency effort to improve outcomes for children, and the families of children, receiving SSI benefits. This program will improve services for these transition-aged youth by encouraging State-level innovation and facilitating better coordination that can help young people with disabilities enter and succeed in competitive, integrated employment. In fiscal year 2013, the Committee includes \$11,996,000 and the authority to allocate unspent vocational rehabilitation State grant funds within the Department of Education for this effort, in addition to \$7,200,000 at SSA.

Education for Individuals With Disabilities.—The Committee bill provides \$11,677,855,000, an increase of \$100,000,000 over the fiscal year 2012 level, under section 611 of part B grants to States for educating students with disabilities between the age of 3 and 21. The bill also includes \$462,710,000, an increase of \$20,000,000 over the fiscal year 2012 level, to support statewide systems of coordinated and early intervention services for children with disabilities 2 years old and younger, as well as their families.

Special Education Research.—The bill includes \$59,905,000, an increase of \$10,000,000 over the fiscal year 2012 level, to support research on how children and adults with disabilities learn and how best to meet their learning needs.

Assistive Technology.—The Committee bill provides \$37,500,000, an increase of \$4,664,000 over the fiscal year 2012 level, for State assistive technology programs. These programs support a range of activities to serve people with disabilities, including State financing programs, device reutilization and loan programs, and device demonstrations. The Committee recommendation will ensure all 50 statewide assistive technology programs receive the minimum grant authorized under statute for the first time.

Disability Hearings at the Social Security Administration.—The Committee recommendation includes \$11,735,544,000, a \$290,352,000 increase over the fiscal year 2012 funding level, for SSA's administrative expenses. This increase will support SSA's efforts to eliminate the disability hearings backlog by the end of fiscal year 2013. In 2008, the average processing time for a disability hearing reached an all-time high of 532 days. As of April 2012, the average processing time is 354 days. The Committee recommendation will allow SSA to stay on target to eliminate the backlog and reduce the average processing time to 270 days by the end of fiscal year 2013.

OTHER HIGHLIGHTS OF THE BILL

Pell Grants.—The Committee bill maintains the discretionary portion of the maximum Pell Grant award level at \$4,860 for the 2013–2014 school year. Combined with mandatory funding, the total maximum award will rise by \$85 to \$5,635.

Centers for Medicare and Medicaid Services.—The Committee recommends \$3,156,045,000 for operations of CMS. The fiscal year 2012 level is \$2,608,785,000. Additional funding is needed to continue implementation of PPACA and to accommodate a dramatic increase in the Medicare population, as the baby boom generation ages.

National Institutes of Health.—The bill provides \$30,723,259,000, an increase of \$100,000,000, to fund biomedical research at the 27 Institutes and Centers that comprise the NIH.

Community Health Centers.—The Committee bill includes \$1,566,892,000 for CHCs. Combined with mandatory funding provided in the health reform law, the fiscal year 2013 program level for CHCs is \$3,066,892,000—an increase of \$300,000,000 over the fiscal year 2012 level. The bill includes a statutory provision requiring that all fiscal year 2013 funds be awarded in that fiscal year, rather than delayed for future years, to allow for base grant

adjustments for all existing CHCs and the expansion of the national network of clinics.

Title I (Education for the Disadvantaged).—The Committee bill includes \$14,616,457,000, an increase of \$100,000,000 over the fiscal year 2012 level, for title I grants to local education agencies for improving education for low-income students. These funds support more than 90 percent of the 15,000 school districts across the Nation.

Children’s Hospitals Graduate Medical Education.—The Committee recommendation includes \$265,171,000 for CHGME, the same level as in fiscal year 2012. The Committee rejects the 67 percent cut to this program proposed by the administration.

Low Income Home Energy Assistance.—The Committee recommendation includes \$3,471,672,000, the same as the fiscal year 2012 level, for LIHEAP. The administration proposes a decrease of \$451,672,000.

Community Services Block Grant.—The Committee recommendation includes \$677,358,000, the same as the fiscal year 2012 funding level, for the CSBG. The administration proposes a decrease of \$327,358,000.

AIDS Drug Assistance Program.—The Committee recommends \$963,299,000 for ADAP, an increase of \$30,000,000 over the fiscal year 2012 level.

Food Safety.—The Committee recommendation includes \$43,848,000 for food safety activities at CDC, an increase of \$16,075,000 over the fiscal year 2012 level. This funding will support food-based outbreak investigations and develop new laboratory and epidemiological tools.

National Public Health Institutes.—The Committee recommends \$10,000,000 to create a new initiative to assist other nations in setting up and strengthening NPHIs similar to America’s CDC. NPHIs are science-based organizations that provide leadership and coordination for public health at the national level. Increasing the number of NPHIs worldwide will improve global health and enhance the U.S. capability to detect infectious diseases that could threaten the U.S. population.

Misclassification of Workers.—The Committee recommendation includes an increase of \$14,000,000 at DOL to address the misclassification of workers as independent contractors. Misclassifications deny workers their rights to unemployment benefits, overtime pay, and other benefits, and also reduce revenue to the Unemployment, Social Security, and Medicare trust funds, as well as to the Treasury.

Substance Abuse and Mental Health.—The Committee recommendation includes a combined increase of \$40,000,000 for the Community Mental Health Services Block Grant and the Substance Abuse Prevention and Treatment Block Grant, in recognition of the severe budget cuts taking place to public mental health and substance abuse treatment systems nationwide.

Domestic Violence and Sexual Exploitation.—The Committee recommendation includes a \$5,000,000 increase, for a total of \$137,774,000 for family violence prevention and related services, which include emergency shelters and services for victims of domestic violence. In addition, the Committee recommendation in-

cludes \$5,000,000 for a new program to improve services for child victims of sex trafficking.

TITLE I

DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

TRAINING AND EMPLOYMENT SERVICES

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$3,192,692,000 |
| Budget estimate, 2013 | 3,231,812,000 |
| Committee recommendation | 3,176,063,000 |

The Committee recommends \$3,176,063,000 for the Training and Employment Services account, which provides funding primarily for activities under WIA.

This account is comprised of programs designed to enhance the employment and earnings of economically disadvantaged and dislocated workers, operated through a decentralized system of skill training and related services. Funds provided for fiscal year 2013 will support the program from July 1, 2013, through June 30, 2014. A portion of this account’s funding, \$1,772,000,000, is available on October 1, 2013, for the 2013 program year.

Any reference in this title of the report to the “Secretary” or the “Department” shall be interpreted to mean the Secretary of Labor or the Department of Labor, respectively, unless otherwise noted.

In 1986, the United States entered into a Compact of Free Association with the Federated States of Micronesia and the Republic of the Marshall Islands. In 1994, the United States entered into a similar relationship with the Republic of Palau. The Compacts set forth the bilateral terms for the government, economic, and security relations between the United States and the FAS and the laws approving the Compacts set forth the U.S. policy context and interpretation for Compacts. Section 141 of the Compacts provides that certain FAS citizens “may be admitted to, lawfully engage in occupations, and its territories.” However, the Congress also stated, in section 104(e)(1), that “it is not the intent of Congress to cause any adverse consequences for an affected jurisdiction.”

At present, it is estimated that affected areas of the United States are spending upwards of \$200,000,000 annually for education, healthcare, and other services for FAS migrants, including high-cost treatments such as dialysis and chemotherapy. There is also a high-unemployment rate among the FAS citizens currently located in the affected areas. Employers in the affected areas report that there is a significant need for language and cultural education and job training, which often complicates providing FAS citizens with employment opportunities. The need for job training and technical assistance in the affected areas is critical and would help to alleviate some of the escalating social tensions. The Committee believes the National Security Council Interagency Policy Committee on Freely Associated State Affairs that was established in Senate Report 112–74 would benefit from the input of the Department on employment and training issues. Therefore, the Committee requests the Department become a member of the interagency group

and asks for a report no later than 180 days after enactment of this act on its involvement.

The Committee recognizes that there are opportunities for the further alignment and streamlining of employment and training services. The Committee encourages the Department to continue to work with other Federal agencies to increase administrative efficiencies.

Grants to States

The Committee recommends \$2,603,315,000, the same as the fiscal year 2012 level, for Training and Employment Services Grants to States. The budget request is \$2,600,344,000.

As proposed in the budget request, the Committee retains bill language that allows a local workforce board to transfer up to 30 percent between the adult and dislocated worker assistance State grant programs, if such transfer is approved by the Governor. In addition, a local board may award a contract to an institution of higher education or other eligible training provider if the board determines that it would facilitate the training of multiple individuals in high-demand occupations, if such contract does not limit customer choice.

Adult Employment and Training.—For adult employment and training activities, the Committee recommends \$770,811,000, the same amount provided in fiscal year 2012. The budget request includes \$769,465,000.

This program is funded by formula to States and further distributed to local workforce investment areas. Three types of services for adults are provided through the one-stop system: core services, intensive services, and job training. Core services are available to all adults with no eligibility requirements. Intensive services are provided to unemployed individuals who are not able to find jobs through core services alone. Training services may be available to adults who have been determined unable to obtain or retain employment through intensive services.

Funds made available in this bill support program year 2013 activities that occur from July 1, 2013, through June 30, 2014. The bill provides that \$58,811,000 is available for obligation on July 1, 2013, and that \$712,000,000 is available on October 1, 2013. Both categories of funding are available for obligation through June 30, 2014.

Youth Training.—For youth training programs, the Committee recommends \$824,353,000, the same as both the fiscal year 2012 comparable amount and the budget request.

The purpose of this program is to provide eligible youth with assistance in achieving academic and employment success through improved education and skill competencies, connections to employers, mentoring, training, and supportive services. The program also supports summer employment directly linked to academic and occupational learning, incentives for recognition and achievement, and activities related to leadership development, citizenship, and community service. Funds made available for youth training support program year 2013 activities, which occur from April 1, 2013, through June 30, 2014.

Dislocated Worker Assistance.—For dislocated worker assistance, the Committee recommends \$1,008,151,000, the same as the fiscal year 2012 amount. The budget request includes \$1,006,526,000.

This program is a State-operated effort that provides core and intensive services, training, and support to help permanently separated workers return to productive, unsubsidized employment. In addition, States must use statewide reserve funds for rapid response assistance to help workers affected by mass layoffs and plant closures. States must also use these funds to carry out additional statewide employment and training activities such as providing technical assistance to certain low-performing local areas, evaluating State programs, and assisting with the operation of one-stop delivery systems. States may also use funds for implementing innovative incumbent and dislocated worker training programs.

Funds made available in this bill support program year 2013 activities, which occur from July 1, 2013, through June 30, 2014. The bill provides that \$148,151,000 is available for obligation on July 1, 2013, and that \$860,000,000 is available on October 1, 2013. Both categories of funding are available for obligation through June 30, 2014.

Governor's Reserve Fund

The Committee recommendation modifies current law regarding the amount of WIA State grant funding that may be set aside by Governors. As requested by the administration, the Committee continues bill language authorizing the Governor of a State to reserve not more than 5 percent of the funds allotted to a State through the WIA State grant programs for statewide workforce investment activities. The percentage was lowered from 15 percent to 5 percent in fiscal year 2011, and then maintained at that level in fiscal year 2012. The Committee adds new bill language allowing Governors to reserve up to 10 percent of WIA State grant program funding if half of the total set-aside is used to support on-the-job and incumbent training to improve the skills of workers, avert layoffs, or lead to employment, and is delivered on a local or regional basis for in-demand occupations or industries.

Federally Administered Programs

Dislocated Worker Assistance National Reserve.—The Committee recommends \$224,066,000 for the Dislocated Worker Assistance National Reserve, which is available to the Secretary for activities such as responding to mass layoffs, plant and/or military base closings, and natural disasters that cannot be otherwise anticipated as well as for technical assistance, training, and demonstration projects. This amount is the same as the fiscal year 2012 level. The budget request includes \$223,688,000.

Funds made available in this bill support activities in program year 2013, which occurs from July 1, 2013, through June 30, 2014. The bill provides that \$24,066,000 is available for obligation on July 1, 2013, and that \$200,000,000 is available on October 1, 2013. Both categories of funding are available for obligation through June 30, 2014.

As proposed in the budget request, the Committee continues bill language from previous years authorizing the use of funds under

the dislocated workers program for projects that provide assistance to new entrants in the workforce or incumbent workers and assistance where there have been dislocations across multiple sectors or local areas of a State.

Native American Programs.—The Committee recommends \$47,562,000, the same amount provided in fiscal year 2012, for Native American programs. The budget request is \$52,562,000. These programs are designed to improve the economic well-being of Native Americans (Indians, Eskimos, Aleuts, and Native Hawaiians) through the provision of training, work experience, and other employment-related services and opportunities that are intended to aid the participants in securing permanent, unsubsidized employment.

Migrant and Seasonal Farmworker Programs.—The Committee recommends \$84,291,000, the same as the fiscal year 2012 level and the budget request, for migrant and seasonal farmworkers programs, which serve members of economically disadvantaged families whose principal livelihood is derived from migratory and other forms of seasonal farmwork, fishing, or logging activities. Enrollees and their families are provided with employment, training, and related services intended to prepare them for stable, year-round employment within and outside of the agriculture industry.

The Committee recommendation provides that \$78,104,742 be used for State service area grants. The Committee recommendation also includes bill language directing that \$5,678,222 be used for migrant and seasonal farmworker housing grants, of which not less than 70 percent shall be for permanent housing. The principal purpose of these funds is to continue the network of local farmworker housing organizations working on permanent housing solutions for migrant and seasonal farmworkers. The Committee recommendation also includes \$508,036 to be used for section 167 training, technical assistance, and related activities, including funds for migrant rest center activities.

Women in Apprenticeship.—The Committee recommends \$996,000 for activities authorized under the WANTO Act of 1992. This amount is the same as the fiscal year 2012 level. The budget request eliminates this program. These funds provide for technical assistance to employers and unions to assist them in training, placing, and retraining women in nontraditional jobs and occupations.

YouthBuild.—The Committee recommends \$79,689,000, the same as the fiscal year 2012 level and the budget request, for the YouthBuild program. YouthBuild targets at-risk, high-school dropouts and prepares them with the skills and knowledge they need to succeed in a knowledge-based economy.

Workforce Innovation Fund.—The Committee recommends \$49,906,000, the same as the fiscal year 2012 level, for WIF, a program that provides competitive awards for workforce innovation activities. The Committee recommendation does not set aside \$10,000,000, as requested by the administration, for a new initiative to improve services for disconnected youth.

The Committee recommendation includes new bill language, as requested by the administration, that allows a portion of the funds for WIF to be used for Pay for Success pilots, which will provide performance-based awards to States or local governments and non-

profit organizations providing or arranging services that improve employment and education outcomes for individuals, including those with barriers to employment. The Committee expects that funds for Pay for Success pilots will only be set aside if it has been determined that such pilots could improve outcomes and eligible entities show interest. The Committee also expects to be notified prior to the issuance of any notice related to Pay for Success activity.

The budget request includes \$100,000,000 for WIF through the Department and an additional \$25,000,000 through the Department of Education's VR State Grants and Adult Basic State Grants programs.

The Committee is reluctant to provide an increase for WIF until it can gauge the program's success. The Committee notes that although the program was created in fiscal year 2011, with additional funding appropriated in fiscal year 2012, the Department does not plan to award the first WIF grants before mid- to late June 2012.

WIF grants are intended to test innovative strategies; replicate and expand effective, evidence-based strategies and activities, including sector strategies, career pathways, incumbent worker training, and on-the-job training; and align programs and strengthen the workforce system in a State or region in order to substantially improve the education and employment outcomes for job seekers and workers, youth, and employers. The Committee expects activities for youth will improve services for individuals up to age 24.

WIF awards will be made either to States, in partnership with local workforce investment boards, or to local workforce investment boards or consortia of such boards that serve a regional labor market. Priority will be given to applicants that demonstrate significant alignment, strategic planning, and coordination across the workforce development system and supportive services at the State, regional, or local level, and that support economic development goals and improved employment outcomes for participants, particularly those who are hardest to serve.

The Committee commends ETA for its collaborative work with IMLS to integrate the education, employment, and training services provided by public libraries into the workforce development system. The Committee encourages ETA to continue to invest in building and strengthening partnerships between the one-stop system and public libraries and recommends that the ETA encourage applicants for grants under WIF to collaborate with public libraries.

The budget request includes a general provision that provides the Secretary with the authority to waive statutes and regulations relating to title I of WIA and the Wagner-Peyser Act when the Secretary believes waivers would substantially improve employment and education outcomes. The Committee does not include this general provision.

National Activities

The Committee remains greatly concerned about the low level of literacy and numeracy skills among adult workers. The Committee continues to encourage the Department to work with the Depart-

ment of Education to examine and share best practices to help adults with the lowest literacy levels improve their overall skills and employment opportunities. The Committee requests the Department report on its progress in educating the workforce system on the effectiveness of adult literacy and basic skills programs that have successfully implemented strategies for delivering basic literacy instruction together with occupational training no later than 120 days after enactment of this act. Further, the Committee recommends that these best practices be widely disseminated to maximize outreach to programs that would be able to implement improved approaches.

As proposed in the budget request, the Committee recommends eliminating funding designated for two programs: pilots, demonstrations, and research; and evaluation. These activities will instead be funded through a 0.5 percent tap on the Department's training and employment programs, including WIA, Job Corps, and the Employment Service. The new set-aside approach will ensure that sufficient funding is available to carry out comprehensive research and evaluations, including random assignment studies, and promote greater stability of funding for these efforts.

The ETA will conduct evaluation and applied research activities in consultation with the Department's chief evaluation officer who oversees the evaluation program. Results will inform policy, advance the Department's mission, and improve its performance-based management initiatives.

Pilots, Demonstrations, and Research.—As explained above, the Committee recommends eliminating funding designated for this program. The fiscal year 2012 funding level is \$6,603,000. In recent years, funding levels have been sufficient only to carry out research activities and not pilots and demonstrations.

The Committee directs the Secretary to use the authority in sections 170 and 171 of WIA to set aside up to \$10,000,000 to support technical assistance, research, and demonstration activities by making competitive grants to nonprofit entities with demonstrated effectiveness in aligning education, workforce, and economic development programming to advance the quality and effectiveness of the workforce development system and to support innovative collaborations at the local level that enhance the employment and training opportunities for workers. This recommendation is intended to highlight the need to build capacity in the workforce system in a way that maximizes returns for job seekers, incumbent workers, and employers. Grant awards should support integration of the successful approaches identified in GAO Report 12-97, dated January 19, 2012, to help local workforce boards react swiftly to changing labor market demands and ensure workers have the required skills to meet those demands. Awards should also support capacity building or demonstration projects in local communities to address chronic unemployment and skills mismatches by disseminating information, providing technical assistance, or serving as an intermediary to develop and monitor projects that increase the alignment of education and training investments.

Reintegration of Ex-Offenders.—The Committee recommends \$80,238,000, the same as the fiscal year 2012 level, for the Reintegration of Ex-Offenders program. The budget request includes

\$85,238,000. This program helps prepare and assist ex-offenders return to their communities through pre-release services, mentoring, and case management. The program also provides support, opportunities, education, and training to youth who are involved in court and on probation, in aftercare, or on parole, or who would benefit from alternatives to incarceration or diversion from formal judicial proceedings. Programs are carried out directly through State and local governmental entities and community-based organizations, as well as indirectly through intermediary organizations.

Within the funds provided, the Committee recommendation includes \$20,000,000, the same as fiscal year 2012 and the budget request, for competitive grants to national or regional intermediaries for activities that prepare young ex-offenders and school dropouts for employment. Priority should be given to projects that serve high-crime, high-poverty areas.

Evaluation.—As explained above, the Committee recommends eliminating funding designated for evaluation. The fiscal year 2012 funding level is \$9,563,000.

Workforce Data Quality Initiative.—The Committee recommends \$6,000,000 for the Workforce Data Quality Initiative, the same as the budget request. The comparable fiscal year 2012 level is \$6,463,000. Funds are used to assist States with incorporating comprehensive workforce information into longitudinal data systems being developed in part with the support of funding provided by the Department of Education. The initiative is also intended to help improve the quality and accessibility of performance data being produced by training providers. Twenty-five States have been awarded grants through this program. This funding will expand the initiative to approximately six additional States.

OFFICE OF JOB CORPS

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,702,947,000 |
| Budget estimate, 2013 | 1,650,004,000 |
| Committee recommendation | 1,673,210,000 |

For Job Corps, the Committee recommends \$1,673,210,000.

The recommendation for operations of Job Corps centers is \$1,569,078,000, the same as the fiscal year 2012 level. The budget request includes \$1,545,872,000.

The budget request for operations is based on a new reform effort that will close a small number of chronically low-performing Job Corps centers based on their educational and employment outcomes. Some of these centers have remained in the bottom cohort of center performance rankings for many years and are failing at-risk youth in need of high-quality education and training services. The Committee supports the Department's reform effort and agrees that it is not beneficial to such youth or a wise use of taxpayer dollars to continue to invest in centers that have historically not served students well.

However, even if a few chronically low-performing centers are closed, the Committee does not believe the budget request is sufficient to support several new centers that have opened in recent years and another center that is expected to open during program year 2013. Therefore, the Committee recommends no reduction to funding for operations.

The Committee is very concerned about the Department's mismanagement of Job Corps funds that led to the funding shortfall recently announced for the remainder of program year 2011 and the disruptions it has caused new, current, and transfer students. In order to conduct proper oversight, it is important for the Committee to understand the circumstances that led to the shortfall. Therefore, the Committee requests a detailed report that provides a timeline of when the Department became aware of the shortfall; the specific steps the Department is taking to address it; and a description of the impact on students and services provided to them. The report should also include a description of the impact on the budget for program year 2012 and steps the Department is taking to ensure that students do not face similar disruptions in the coming year. The report shall be submitted to the Committee no later than 30 days after enactment of this act. The Committee expects to be notified in advance of announcements made to Job Corps centers related to funding shortfalls.

The Committee urges the Department to ensure that any center proposed for closure has exhausted all available options to improve, including being placed on a corrective action plan or performance improvement plan. The Committee also expects the Department to use its existing performance measures as the key component for developing its methodology for identifying centers for closure and to adhere to the process for closing a Job Corps center as described in section 159 of WIA, which includes advance announcement to the general public of the proposed closure; establishment of a reasonable comment period for interested parties to submit written comments to the Secretary; and notification to the Members of Congress who represent the district or State in which such center is located.

The Committee strongly encourages the Department to provide Job Corps students enrolled in a closing low-performing center the opportunity to transfer to another higher-performing Job Corps center.

The Committee requests a detailed description of the Department's plan for identifying centers for closure, including a definition of a "low-performing center," the methodology used for identifying those centers, and a timeline for the closure process. The Committee expects to receive this information no later than 180 days after the enactment of this act or at least 30 days prior to any public notice published in the Federal Register.

The Committee recommendation for administrative costs is \$29,132,000, the same as the budget request. The comparable fiscal year 2012 level is \$29,077,000.

The Committee also recommends a total of \$75,000,000 in construction, renovation, and acquisition funds. This amount, which is the same as the budget request, is available from July 1, 2013, to June 30, 2016. The comparable fiscal year 2012 level is \$104,792,000.

As requested by the administration, the Committee again includes bill language allowing the Secretary to transfer up to 15 percent of construction, renovation, and acquisition funds, if necessary, to meet the operational needs of Job Corps centers or to achieve administrative efficiencies.

The Committee notes that the Department recently took disciplinary action against a Job Corps contractor for repeated safety and protocol violations. The Committee believes that the Job Corps program, its students, and the taxpayers would be better served if the Department strengthened its oversight of the program and its contractors.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$448,251,000 |
| Budget estimate, 2013 ..... | ..... |
| Committee recommendation | 448,251,000 |

The Committee recommends \$448,251,000 for the CSEOA program. As in fiscal year 2012, the budget request includes a proposal to transfer the program to ACL in HHS. The Committee again recommends keeping the program in DOL.

CSEOA provides part-time employment in community service activities for unemployed, low-income persons aged 55 and older.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,100,100,000 |
| Budget estimate, 2013 | 1,421,000,000 |
| Committee recommendation | 1,421,000,000 |

The Committee recommends \$1,421,000,000 in mandatory funds for Federal unemployment benefits and allowances.

This program assists trade-impacted workers with services including: training, income support, employment, case management, and assistance with health insurance coverage. The program also includes a wage insurance option for certain workers at least 50 years old. These benefits and services are designed to help trade-impacted participants find a path back into middle-class jobs, improve earnings, and increase credential and education rates.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$4,071,058,000 |
| Budget estimate, 2013 | 3,949,240,000 |
| Committee recommendation | 3,896,993,000 |

The Committee recommends \$3,896,993,000 for this account. The recommendation includes \$3,810,882,000 authorized to be drawn from the Employment Security Administration account of the unemployment trust fund and \$86,111,000 to be provided from the general fund of the Treasury.

The funds in this account are used to provide administrative grants and assistance to State agencies that administer Federal and State unemployment compensation laws and operate the public employment service.

The Committee bill retains language from previous years that enables States to use funds appropriated under this account to assist other States if they are impacted by a major disaster declared by the President and that permits the Secretary to use funds to make payments on behalf of States for the use of the National Directory of New Hires. At the request of one or more States, the Secretary may reallocate funds for States to carry out activities that ben-

efit the administration of unemployment compensation laws of a requesting State.

The Committee recommends a total of \$3,016,209,000, the same as the budget request, for UI activities. The comparable fiscal year 2012 level is \$3,220,438,000. The decrease in funding is due to an expected reduction in UI administrative workload. For UI State operations, the Committee recommends \$3,004,912,000. These funds are available for obligation by States through December 31, 2013. Funds used for automation acquisitions or for competitive grants awarded to States to address worker misclassification, system improvements, or improper payments are available for obligation by States through September 30, 2015.

The Committee recommendation includes \$75,000,000, the same as the budget request, to conduct in-person re-employment and eligibility assessments and UI improper payment reviews and continues bill language allowing the Secretary to provide additional funding to support these activities if funds become available as the result of a decrease in UI workload activity. Congress appropriated no less than \$60,000,000 for this activity in fiscal year 2012. This important program integrity initiative has been shown to help claimants exit the UI program faster and avoid exhausting UI benefits. The Committee intends for a portion of these or other administrative funds to be used for additional technology-based overpayment prevention, detection, and collection activities. The budget request includes a proposal for a discretionary cap adjustment amendment to the Balanced Budget and Emergency Deficit Control Act of 1985, which would provide an adjustment for \$15,000,000 of the \$75,000,000 included in the budget request. The Committee recommendation does not use the cap adjustment, which has yet to be enacted.

The Committee recommendation includes new bill language that provides \$10,000,000, as proposed in the budget request, for an award program designed to incentivize States to improve misclassification efforts. States that are most successful will be able to use these incentive funds to upgrade their misclassification detection and enforcement programs.

The Committee recommendation provides for a contingency reserve amount should the unemployment workload exceed an average weekly insured claims volume of 3,908,000, as proposed in the budget request. This contingency amount would fund the administrative costs of the UI workload over the level of 3,908,000 insured unemployed persons per week at a rate of \$28,600,000 per 100,000 insured unemployed persons, with a pro rata amount granted for amounts of less than 100,000 insured unemployed persons.

For UI national activities, the Committee recommends \$11,297,000, the same as the budget request. The comparable fiscal year 2012 level is \$11,266,000. These funds are directed to activities that benefit the State/Federal UI program including helping States adopt common technology-based solutions to improve efficiency and performance and supporting training and contracting for actuarial support for State trust fund management.

For the Employment Service allotments to States, the Committee recommends \$730,842,000, the same as the budget request. This amount includes \$22,638,000 in general funds together with an au-

thorization to spend \$708,204,000 from the Employment Security Administration account of the unemployment trust fund. The comparable fiscal year 2012 level is \$700,842,000. The Committee includes new bill language requiring that no less than \$30,000,000 be used to provide reemployment services to UI beneficiaries. Congress last appropriated funding for reemployment services in ARRA. A recent study found that reemployment services coupled with re-employment and eligibility assessments not only shorten UI duration, but also boost employment and earnings for UI claimants. The Committee recommendation continues to support States' efforts in providing these critical workforce services to UI claimants.

The Committee also recommends \$20,952,000, the same as the budget request, for Employment Service national activities. The fiscal year 2012 level is \$20,912,000. The administration of the work opportunity tax credit accounts for \$18,520,000 of the recommended amount and the balance is for technical assistance, training, and the Federal share of State Workforce Agencies Retirement System payments.

For carrying out the Department's responsibilities related to foreign labor certification activities, the Committee recommends \$65,517,000, the same as the budget request. The comparable fiscal year 2012 level is \$65,393,000. In addition, 5 percent of the revenue from H-1B fees is available to the Department for costs associated with processing H-1B alien labor certification applications.

For one-stop career centers and labor market information, the Committee recommends \$63,473,000, the same as the fiscal year 2012 level. The budget request provides \$115,720,000 and includes a proposal to co-brand and increase public awareness of the one-stop career center system. The Committee does not recommend funding for this initiative due to funding constraints.

The Committee recommendation includes \$12,000,000 for the ETA, in collaboration with ODEP, to continue to implement their joint plan for improving effective and meaningful participation of persons with disabilities in the workforce. The Committee expects that these funds, in combination with funding available to ODEP, will continue to improve the accessibility and accountability of the public workforce development system for individuals with disabilities. The budget request and fiscal year 2012 level is \$11,976,120.

The Committee recommendation includes new bill language, as proposed in the budget request, authorizing the Secretary to collect fees for costs associated with additional data collection requested by States and local governments, institutions of higher education, or nonprofit organizations under the National Agricultural Workers Survey, and to retain the proceeds to cover such costs.

STATE PAID LEAVE FUND

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | |
| Budget estimate, 2013 | \$5,000,000 |
| Committee recommendation | |

Because of budget constraints, the Committee does not recommend funding to create a new State Paid Leave Fund, which would help States establish paid leave programs.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$171,000,000 |
| Budget estimate, 2013 | |
| Committee recommendation | |

The Committee recommends and the budget requests such sums as are necessary in mandatory funds for this account. The budget estimates that there will be no net costs in fiscal year 2013 because of expected repaid advances to the trust fund. The appropriation is available to provide advances to several accounts for purposes authorized under various Federal and State unemployment compensation laws and the Black Lung Disability Trust Fund, whenever balances in such accounts prove insufficient.

The Committee bill includes language proposed in the budget request to allow the Department additional flexibility to access funds as needed for covered programs.

PROGRAM ADMINISTRATION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$147,081,000 |
| Budget estimate, 2013 | 147,611,000 |
| Committee recommendation | 147,081,000 |

The Committee recommendation of \$147,081,000 for program administration includes \$97,137,000 in general funds and \$49,944,000 from the Employment Security Administration account of the unemployment trust fund.

General funds in this account pay for the Federal staff needed to administer employment and training programs under WIA, OAA, the Trade Act of 1974, WANTO, and the National Apprenticeship Act. Trust funds provide for the Federal administration of employment security functions under title III of the Social Security Act.

EMPLOYEE BENEFITS SECURITY ADMINISTRATION

SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$183,153,000 |
| Budget estimate, 2013 | 183,153,000 |
| Committee recommendation | 183,153,000 |

The Committee recommends \$183,153,000 for EBSA.

EBSA plays a critical role in improving health benefits and retirement security for American workers and their families. EBSA is responsible for the enforcement of title I of ERISA in both civil and criminal areas and for enforcement of sections 8477 and 8478 of the Federal Employees' Retirement Security Act of 1986. EBSA administers an integrated program of regulation, compliance assistance and education, civil and criminal enforcement, and research and analysis.

Benefits under EBSA's jurisdiction consist of approximately \$6,500,000,000,000 in assets covering approximately 150 million participants and beneficiaries. EBSA oversees benefit security for an estimated 718,000 private retirement plans, 2.6 million health plans, and similar numbers of other welfare benefit plans, such as those providing life or disability insurance.

PENSION BENEFIT GUARANTY CORPORATION

PBGC's estimated obligations for fiscal year 2013 include single-employer benefit payments of \$6,534,000,000, multi-employer financial assistance of \$118,000,000, and administrative expenses of \$479,013,000. Administrative expenses are comprised of three activities: (1) pension insurance activities, \$75,943,000; (2) pension plan termination expenses, \$240,611,000; and (3) operational support, \$162,459,000. These expenditures are financed by permanent authority.

The PBGC is a wholly owned Government corporation established by ERISA. The law places it within DOL and makes the Secretary the chair of its board of directors. The corporation receives its income primarily from insurance premiums collected from covered pension plans, assets of terminated pension plans, collection of employer liabilities imposed by the act, and investment earnings. The primary purpose of the corporation is to guarantee the payment of pension plan benefits to participants if covered defined benefit plans fail or go out of existence.

The President's budget proposes to continue authority for a contingency fund for the PBGC that provides additional administrative resources when the number of participants in terminated plans exceeds 100,000. When the trigger is reached, an additional \$9,200,000 becomes available for every 20,000 participants in terminated plans. A trigger also is included for additional investment management fees for plan terminations or asset growth. These additional funds would be available for obligation through September 30, 2014. The Committee bill continues these provisions to ensure that the PBGC can take immediate, uninterrupted action to protect participants' pension benefits. The Committee expects to be notified immediately of the availability of any funds provided by these provisions.

As requested by the President's budget, the Committee bill also continues authority allowing the PBGC additional obligation authority for unforeseen and extraordinary pre-termination expenses, after approval by the Office of Management and Budget and notification of the Committees on Appropriations of the House of Representatives and the Senate.

The Committee is very concerned by findings of the May 2012 PBGC IG Management Advisory report that found errors and inconsistencies in both the multi-employer and single-employer sections that were caused by a lack of quality control or quality review process to ensure the integrity of reported actuarial estimates. The Committee directs the PBGC Board of Directors to designate a capable agency or organization that is independent from the PBGC, such as the SSA, to conduct an annual peer review of the Single-Employer Pension Insurance Modeling System and Multi-Employer Pension Insurance Modeling System, the first of which shall be initiated no later than 3 months after the date of enactment of this act. The Committee also directs PBGC to develop written quality review policies and procedures for all modeling and actuarial work performed by the Policy, Research, and Analysis Department and to conduct a record management review of the Policy, Research and Analysis Department to determine what records must be retained

as Federal records. The PBGC shall, no later than 2 months after the date of enactment, submit to Congress a report, approved by the Board of Directors, setting forth a timetable for addressing the outstanding recommendations of the Office of the Inspector General relating to the Policy, Research and Analysis Department and the Benefits Administration and Payment Department.

PBGC's single-employer program protects nearly 34 million participants in approximately 25,000 defined benefit pension plans. The multi-employer insurance program protects about 10 million participants in roughly 1,500 plans.

WAGE AND HOUR DIVISION
SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$227,061,000 |
| Budget estimate, 2013 | 237,730,000 |
| Committee recommendation | 237,730,000 |

The Committee recommends \$237,730,000 for WHD.

The WHD is responsible for administering and enforcing laws that provide minimum standards for wages and working conditions in the United States. The Fair Labor Standards Act [FLSA], employment rights under the Family and Medical Leave Act, and the Migrant and Seasonal Agricultural Worker Protection Act are several of the important laws the WHD is charged with administering and/or enforcing.

The Committee recommendation includes additional funds over the fiscal year 2012 level to address the misclassification of employees as independent contractors and to provide enhanced enforcement of overtime pay regulations. In addition, as proposed in the budget request, the Committee recommendation includes funds reallocated from the Women's Bureau for WHD efforts on Family and Medical Leave Act issues.

The Committee also supports the President's request to provide additional resources for the WHD to increase its oversight of organizations participating in the special minimum wage program for individuals with disabilities authorized under section 14(c) of the FLSA, in order to protect the rights of workers with disabilities. The Committee also urges the WHD to continue exploring and implementing strategies with ODEP and other Federal agencies to provide additional opportunities for such workers to participate in competitive integrated employment.

OFFICE OF LABOR-MANAGEMENT STANDARDS
SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$41,289,000 |
| Budget estimate, 2013 | 41,771,000 |
| Committee recommendation | 41,289,000 |

The Committee recommends \$41,289,000 for OLMS.

OLMS administers the Labor-Management Reporting and Disclosure Act of 1959 and related laws. These laws establish safeguards for union democracy and financial integrity. They also require public disclosure by unions, union officers, employers, and others. In

addition, the office administers employee protections under federally sponsored transportation programs.

OFFICE OF FEDERAL CONTRACT COMPLIANCE PROGRAMS

SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$105,187,000 |
| Budget estimate, 2013 | 106,415,000 |
| Committee recommendation | 105,187,000 |

The Committee recommends \$105,187,000 for OFCCP.

This office protects workers and potential employees of Federal contractors from employment discrimination prohibited under Executive Order 11246, section 503 of the Rehabilitation Act of 1973, and the Vietnam Era Veterans' Readjustment Assistance Act of 1974.

The Committee notes that almost 2 years ago the Department issued an advance notice of proposed rulemaking regarding regulations for implementing section 503 of the Rehabilitation Act. The Committee strongly supports the administration's plan to issue a final rule by October of this year, as these regulations have not been updated in over 40 years. Changes included in the proposed rule would make important improvements in reducing barriers to employment opportunities for individuals with disabilities. The Committee encourages the Department to make technical assistance available to Federal contractors regarding the rule, and to increase Federal contractor employment opportunities for individuals with disabilities.

OFFICE OF WORKERS' COMPENSATION PROGRAMS

SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$117,840,000 |
| Budget estimate, 2013 | 122,190,000 |
| Committee recommendation | 117,840,000 |

The Committee recommends \$117,840,000 for OWCP. The bill provides authority to expend \$2,120,000 from the special fund established by the Longshore and Harbor Workers' Compensation Act.

OWCP administers four distinct compensation programs: the Federal Employees' Compensation Act, the Longshore and Harbor Workers' Compensation Act, the Black Lung Benefits programs, and the Energy Employees Occupational Illness Compensation Program. In addition, OWCP houses the Division of Information Technology Management and Services.

SPECIAL BENEFITS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$350,000,000 |
| Budget estimate, 2013 | 396,000,000 |
| Committee recommendation | 396,000,000 |

The Committee recommends \$396,000,000 for this account. This mandatory appropriation, which is administered by OWCP, primarily provides benefits under the Federal Employees' Compensation Act [FECA].

The Committee recommends continuation of appropriations language to provide authority to require disclosure of Social Security account numbers by individuals filing claims under FECA or the Longshore and Harbor Workers' Compensation Act and its extensions.

The Committee recommends continuation of appropriations language that provides authority to use FECA funds to reimburse a new employer for a portion of the salary of a newly re-employed injured Federal worker. FECA funds will be used to reimburse new employers during the first 3 years of employment, not to exceed 75 percent of salary in the worker's first year, and declining thereafter.

The Committee recommendation also continues language that allows carryover of unobligated balances to be used in the following year and that provides authority to draw such sums as are needed after August 15 to pay current beneficiaries. Such funds are charged to the subsequent year appropriation.

The Committee also recommends continuation of appropriations language to provide authority to deposit into the special benefits account of the employees' compensation fund those funds that the Postal Service, the Tennessee Valley Authority, and other entities are required to pay to cover their fair share of the costs of administering the claims filed by their employees under FECA. Finally, the Committee continues to allow use of fair share collections to fund capital investment projects and specific initiatives to strengthen compensation fund control and oversight.

SPECIAL BENEFITS FOR DISABLED COAL MINERS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$182,227,000 |
| Budget estimate, 2013 | 163,220,000 |
| Committee recommendation | 163,220,000 |

The Committee recommends a mandatory appropriation of \$123,220,000 in fiscal year 2013 for special benefits for disabled coal miners. This is in addition to the \$40,000,000 appropriated last year as an advance for the first quarter of fiscal year 2013, for a total program level of \$163,220,000 in fiscal year 2013. The decrease in this account below the fiscal year 2012 level reflects a declining beneficiary population.

These mandatory funds are used to provide monthly benefits to coal miners disabled by black lung disease and their widows and certain other dependents, as well as to pay related administrative costs.

The Committee also recommends an advance appropriation of \$35,000,000 for the first quarter of fiscal year 2014. This amount is the same as the budget request. These funds will ensure uninterrupted benefit payments to coal miners, their widows, and dependents.

DIVISION OF ENERGY EMPLOYEES OCCUPATIONAL ILLNESS
COMPENSATION
SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$52,147,000 |
| Budget estimate, 2013 | 54,962,000 |
| Committee recommendation | 54,962,000 |

The Committee recommends \$54,962,000 for the Division of Energy Employees Occupational Illness Compensation. This is a mandatory appropriation.

The Division administers EEIOCPA, which provides benefits to eligible employees and former employees of DOE, its contractors and subcontractors, or to certain survivors of such individuals. The mission also includes delivering benefits to certain beneficiaries of the Radiation Exposure Compensation Act. The Division is part of OWCP.

In fiscal year 2013, the volume of incoming claims under part B of EEOICPA is estimated at about 7,300 from DOE employees or survivors, and private companies under contract with DOE, 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.

Under part E, approximately 6,400 new claims will be received during fiscal year 2013. Under this authority, the Department provides benefits to eligible DOE contractor employees who were found to have work-related occupational illnesses due to exposure to a toxic substance at a DOE facility, or to the employees' survivors.

BLACK LUNG DISABILITY TRUST FUND

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$301,415,000 |
| Budget estimate, 2013 | 308,849,000 |
| Committee recommendation | 308,849,000 |

The Committee bill provides an estimated \$308,849,000 for this mandatory appropriations account. This estimate is comprised of \$58,806,000 for administrative expenses and an estimated \$250,043,000 for benefit payment and interest costs.

The Committee bill continues to provide indefinite authority for the Black Lung Disability Trust Fund to provide for benefit payments. In addition, the bill provides for transfers from the trust fund for administrative expenses for the following DOL agencies: up to \$32,906,000 for the part C costs of the Division of Coal Mine Workers' Compensation Programs, up to \$25,217,000 for Departmental Management, Salaries and Expenses, and up to \$327,000 for Departmental Management, Inspector General. The bill also allows a transfer of up to \$356,000 for the Department of the Treasury.

The trust fund pays all black lung compensation/medical and survivor benefit expenses when no responsible mine operation can be assigned liability for such benefits or when coal mine employment ceased prior to 1970, as well as all administrative costs that are incurred in administering the benefits program and operating the trust fund.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION
SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$564,788,000 |
| Budget estimate, 2013 | 565,468,000 |
| Committee recommendation | 565,468,000 |

The Committee recommends \$565,468,000 for OSHA, which is responsible for enforcing the Occupational Safety and Health Act of 1970 in the Nation's workplaces.

The Committee continues bill language to allow OSHA to retain up to \$200,000 per fiscal year of tuition fees for training institute courses to be used for occupational safety and health training and education grants in the private sector.

The Committee bill retains language that continues to effectively exempt farms employing 10 or fewer people from the provisions of the act with the exception of those farms having a temporary labor camp. The bill also retains language exempting small firms in industry classifications having a lost workday injury rate less than the national average from general schedule safety inspections.

The Committee supports the important mission carried out by OSHA. BLS data reveal that on average during calendar year 2010 one worker died of a work-related injury every 2 hours. Millions more were seriously hurt or contracted a fatal illness or disease in their workplace. These deaths and injuries take a massive toll on our economy and society, decreasing productivity and increasing the costs of medical care.

GAO recently reported that between 1981 and 2010, the time it took OSHA to develop and issue safety and health standards ranged widely, from 15 months to 19 years, and averaged more than 7 years. OSHA's rulemaking on silica illustrates some of the challenges identified by GAO.

According to CDC, as many as 1.7 million workers are exposed to dangerous levels of silica in the workplace each year; researchers estimate that 3,600 to 7,300 of them develop silicosis and approximately 200 workers die of this condition each year. Despite the mandate in Executive Order 12866 that the Office of Information and Regulatory Affairs [OIRA] complete its review of any proposed rule within 90 days (with a possible extension of another 30 days), the silica rule has languished at OIRA for more than 15 months. Therefore, the Committee directs the Department to issue a notice of proposed rulemaking on silica not later than 30 days after the end of fiscal year 2012.

The Committee recommends \$104,196,000, the same amount as the budget request, for grants to States under section 203(g) of the Occupational Safety and Health Act. These funds primarily are provided to States that have taken responsibility for administering their own occupational safety and health programs for the private sector and/or the public sector. State plans must be at least as effective as the Federal program and are monitored by OSHA. The Committee bill continues language that allows OSHA to provide grants of up to 50 percent for the costs of State plans approved by the agency. The Committee believes that, given the continuing fiscal pressures facing State budgets, OSHA should continue its practice of allowing States an extra year to match the appropriation

provided by this bill for support of their State plans, and also should extend the period of expenditure for these funds for an additional quarter.

The Committee also believes that OSHA’s worker safety and health training and education programs, including the grant program that supports such training, are a critical part of a comprehensive approach to worker protection. Under the program, grants are made to various types of organizations representing employers and labor organizations for direct training of workers on occupational safety and health. The Committee recommendation includes \$11,000,000 for the OSHA Susan Harwood Training Grant Program. The budget request and the fiscal year 2012 level are both \$10,709,000.

MINE SAFETY AND HEALTH ADMINISTRATION
SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$372,523,000 |
| Budget estimate, 2013 | 371,896,000 |
| Committee recommendation | 376,270,000 |

The Committee recommendation includes \$376,270,000 for MSHA.

MSHA insures the safety and health of the Nation’s miners by conducting inspections and special investigations of mine operations, promulgating mandatory safety and health standards, cooperating with the States in developing effective State programs, and improving training in conjunction with States and the mining industry.

The Committee bill continues language authorizing MSHA to use up to \$2,000,000 for mine rescue and recovery activities. It also retains the provision allowing the Secretary to use any funds available to the Department to provide for the costs of mine rescue and survival operations in the event of a major disaster. In order to prepare properly for an actual emergency, the Committee also directs MSHA to continue to devote resources toward a competitive grant activity for effective emergency response and recovery training in various types of mine conditions.

In addition, bill language is included to allow the National Mine Health and Safety Academy to collect not more than \$750,000 for room, board, tuition, and the sale of training materials to be available for mine safety and health education and training activities. Bill language also allows MSHA to retain up to \$2,499,000 from fees collected for the approval and certification of equipment, materials, and explosives for use in mines, and to utilize such sums for such activities. The Committee bill also provides new authority requested in the President’s budget to allow MSHA to establish, collect, and retain fees for services related to the analysis of rock dust samples.

The Committee continues to place a high priority on reducing the backlog of contested safety and health violations. This bill includes \$2,233,000 more than the budget request to expand that effort. In recent years, some mine operators have challenged an increasing share of their mine safety violations, preventing enhanced accountability provisions from taking effect. As in last year’s act, the bill

provides the authority to transfer a portion of these funds to support related activities in the Office of the Solicitor. The Committee notes that this effort has resulted in the targeted backlog being reduced by over 80 percent in just less than 2 years.

The Committee notes that the current respirable coal dust regulation dates back to 1980 and does not reflect changes in technology or work schedules of miners that have occurred in the decades since it was promulgated. In October 2010, MSHA published a proposed rule on this issue. Congress included language in last year’s appropriations act that prohibited the issuance of a final rule on the issue until GAO issues a report related to the rulemaking or until after 240 days have passed after enactment of the act. In either case, MSHA is expected to promulgate the rule before the end of fiscal year 2012. In addition, the statement of the managers accompanying the act clarifies that MSHA could “address any compliance assistance or training needs” before beginning to implement the rule.

The timely issuance of a final rule will help in the effort to end black lung disease in the Nation’s miners. Within this account, the Committee provides resources needed to support the rule’s continued implementation in fiscal year 2013.

As requested by the administration, the Committee includes new bill language allowing the Secretary to reallocate up to \$3,000,000 within MSHA’s program lines. The Committee expects to be notified prior to any such reallocation. The Committee also expects that any reallocations will not prevent MSHA from addressing important issues that are proposed in the budget request or identified in this report. In addition to items identified previously, the list of priority items include: effective implementation of corrective actions related to the Upper Big Branch internal review; purchase of additional continuous personal dust monitors; adequate support for MSHA’s instructional capacity for training of mine safety and health inspectors and other mine safety professionals; and continuation of the spot inspection initiative related to respirable coal dust.

BUREAU OF LABOR STATISTICS
SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$609,071,000 |
| Budget estimate, 2013 | 618,207,000 |
| Committee recommendation | 619,043,000 |

The Committee recommends \$619,043,000 for BLS. This amount includes \$67,176,000 from the Employment Security Administration account of the unemployment trust fund and \$551,867,000 in Federal funds. The Committee retains bill language providing that up to \$1,500,000 may be used to support the Mass Layoff Statistics Program.

The BLS is the principal fact-finding agency in the Federal Government in the broad field of labor economics.

The Committee recognizes that the Nation requires current, accurate, detailed labor statistics for Federal and non-Federal data users. The Nation also requires Government programs to be administered as cost-effectively as possible. However, the current ability

of the cooperative statistics system to meet those needs is in question. Any weaknesses of this system could reduce the ability of State and local regions to effectively plan for recovery, anticipate industry demand for workforce needs, and meet other labor market information challenges.

Therefore, the Committee directs the Secretary to commission a study of and report on a comprehensive assessment of the proper purpose, structure, methods, and operations of the Federal-State cooperative statistics system, particularly regarding the appropriate roles and responsibilities of the BLS, the ETA, the State labor market information agencies, and the system's relationship with the Census Bureau, the NCES, State workforce agencies, State education agencies, and private vendors.

The Committee believes the National Academies of Science (Committee on National Statistics) and the National Academy of Public Administration are very well-qualified to produce such a report. The Committee requests the release of an interim report within 12 months of the enactment of this act and a final report within 24 months of the enactment of this act. The interim report shall contain, at minimum, a rigorous assessment of the Current Employment Statistics Program [CES], including an evaluation of the accuracies of past and present methods for producing initial State and metro area CES estimates, identification of the methods most likely to produce accurate initial estimates, and recommendations for appropriate BLS and State roles and responsibilities in preparing such accurate estimates. The report also should consider recommendations for how to improve the collection of this large volume of information, including through the use of technology; coordinate the Federal and State data systems to provide timely, accurate, and geographically detailed information on employment, education and training, occupations, and worker skills, as well as ease of access and technical assistance; and improve responsiveness to the data needs of labor market participants and policymakers at the Federal, State, and local levels.

The Committee directs the Secretary to use such sums as may be necessary for this study, allocated equally from funds available to the Secretary, BLS, ETA, and the States. The State contribution should be made through a set-aside from BLS cooperative system grants to States.

The Committee commends the BLS for its roughly 4-decade commitment to gather, extrapolate, and disseminate critical information about the experiences of youth, women, and men in the labor market through the National Longitudinal Surveys [NLS]. These data have informed the development of public policy and provided the basis for both historic and predictive analysis of market trends across decades and generations related to job creation, employment training, joblessness, education, housing, health, and the economy. The Committee recognizes that these longitudinal surveys serve as an essential national data source for long-term and ongoing analysis of the economic health of America and are an invaluable resource for Congress, as well as the public and private sectors, especially during times of economic uncertainty. As such, the Committee continues to support the NLS and recommends that the frequency of NLS data collection should not be less than biennially.

The Committee recommendation includes sufficient funds to initiate a pilot input price index that would track price changes as establishments shift from domestic to foreign sources. Within this pilot project, the Committee directs BLS to develop a competitiveness audit that would compare the price of selected imports with comparable domestically produced goods and services.

Within available resources, the Committee encourages BLS to prioritize work on the Contingent Work Supplement to the Current Population Survey.

OFFICE OF DISABILITY EMPLOYMENT POLICY

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$38,879,000 |
| Budget estimate, 2013 | 38,953,000 |
| Committee recommendation | 38,953,000 |

The Committee recommends \$38,953,000 for ODEP. The Committee intends that at least 80 percent of these funds shall be used to design and implement research and technical assistance grants and contracts to develop policy that reduces barriers to competitive, integrated employment for youth and adults with disabilities.

The mission of ODEP is to provide leadership, develop policy and initiatives, and award grants furthering the objective of eliminating physical and programmatic barriers to the training and employment of people with disabilities. The Committee strongly supports each of the components of ODEP’s mission and, in particular, urges the Secretary to ensure that ODEP carries out its leadership role with respect to governmentwide policies related to the training and employment of individuals with disabilities. The Committee believes that ODEP should put a high priority on providing support and technical assistance to Federal agencies for the implementation of Executive Order 13548 regarding hiring of persons with disabilities. The Committee also encourages ODEP to provide any support necessary for OFCCP to provide technical assistance to Federal contractors in meeting their obligations under section 503 of the Rehabilitation Act.

The Committee looks forward to the findings from the government-wide review involving ODEP that is intended to lead to better program outcomes for individuals with disabilities through improved coordination and alignment of disability programs, including better sharing of data, goal setting, and measuring of progress.

The Committee recommendation includes \$12,000,000 for ODEP, in collaboration with the ETA, to continue to implement their joint plan for improving effective and meaningful participation of persons with disabilities in the workforce. The Committee expects that these funds, in combination with funding available to the ETA, will continue to improve the accessibility and accountability of the public workforce development system for individuals with disabilities.

DEPARTMENTAL MANAGEMENT

SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$362,999,000 |
| Budget estimate, 2013 | 348,927,000 |
| Committee recommendation | 348,927,000 |

The Committee recommendation includes \$348,927,000 for the departmental management account. An amount of \$326,000 is available by transfer from the Black Lung Disability Trust Fund.

The primary goal of the Department is to protect and promote the interests of American workers. The departmental management appropriation pays the salaries and related expenses of staff responsible for formulating and overseeing the implementation of departmental policy and management activities in support of that goal. In addition, this appropriation includes a variety of operating programs and activities that are not involved in departmental management functions, but for which other appropriations for salaries and expenses are not suitable.

The Committee recommendation includes \$12,000,000 within the legal services activity to continue support of the Department's efforts to reduce the backlog of mine safety cases before FMSHRC. Additionally, up to \$2,000,000 provided to MSHA are available by transfer to legal services to support an increased capacity of the Commission to process caseloads pending before it. The Committee notes that this effort has resulted in the targeted backlog being reduced by over 80 percent in fewer than 2 years. The Committee also continues to expect the Department to make every effort to support the timely processing of contested citations, particularly for operators that have the highest proportion of significant and substantial citations or other evidence of unacceptable health and safety records, as well as other efforts that reduce the number of contested citations.

The Committee recommendation includes \$94,984,000 for the Bureau of International Labor Affairs [ILAB]. These funds are available to help improve working conditions and labor standards for workers around the world and carry out ILAB's statutory mandates and international responsibilities. The Committee bill continues language from last year's act regarding the authority to fund microfinance activities, and funding levels for programs to combat exploitative child labor and model worker rights programs in countries with which the United States has trade preference programs or free trade agreements. The Committee expects ILAB to maintain its current effort on programs to combat exploitative child labor.

The bill continues to provide an extra quarter for obligation of \$66,500,000 of ILAB's appropriation as requested in the budget.

The Committee recommendation provides \$9,000,000, the same amount as the budget request, for program evaluation and allows these funds to be available for obligation through September 30, 2014. The Committee bill also continues the authority of the Secretary to transfer these funds to any other account in the Department for evaluation purposes. The Committee bill includes requested authority to use up to 0.5 percent of certain Department appropriations for evaluation activities identified by the chief evaluation officer. The bill language differs slightly from last year's bill by including the Training and Employment Services in the list of accounts covered by this authority, as proposed in the budget request. The Committee expects to be notified of the planned uses of funds derived from this authority.

The Committee recommendation provides \$9,081,000 for the Women's Bureau as proposed in the budget request. While this

amount is less than last year's level of \$11,559,000, the Committee expects that additional resources provided to the WHD will allow the Department to strengthen its activities related to family and medical leave issues. In addition, funds available to the Bureau will enable it to undertake critical work, including in collaboration with other Federal agencies, in addressing the pay gap. The Committee continues bill language allowing the Bureau to award grants.

The Committee is aware that, on April 10, 2012, the Department announced a significant change in the manner in which sensitive economic data are released to the news media and public. Members of Congress, the news media, and public interest groups have raised substantial concerns regarding this proposed policy change. The Committee understands that the Department and news organizations have been discussing significant modifications to the proposal, and that the Department has delayed implementation of all aspects that do not deal with the process of issuing credentials. The Committee directs the Department to collaborate with the news media in developing a revised policy that responds to the reasonable concerns of both the Department and the news media.

The Committee directs the Department to issue a report to both the House and Senate Committees on Appropriations no later than 30 days after enactment of this act outlining all the Department's considerations, processes, and decision points related to the Department's concerns about the prior policy and justification of the initial April 10, 2012 policy. This report also shall include a statement of any concerns the Bureau of Labor Statistics may have regarding the Department's policy.

VETERANS EMPLOYMENT AND TRAINING

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$264,437,000 |
| Budget estimate, 2013 | 258,870,000 |
| Committee recommendation | 262,821,000 |

The Committee recommends \$262,821,000 for VETS, including \$38,185,000 in general revenue funding and \$224,636,000 to be expended from the Employment Security Administration account of the unemployment trust fund.

This account provides resources for VETS to maximize employment opportunities for veterans and transitioning servicemembers, including protecting their employment rights. VETS carries out its mission through a combination of grants to States, competitive grants, and Federal enforcement and oversight.

The Committee provides \$14,000,000 for the transition assistance program [TAP]. The budget request proposes \$12,000,000 and the fiscal year 2012 funding level is \$8,983,000. The additional resources provided above the budget request are needed to meet updated projections developed after the President's budget was proposed. The budget request assumes that 160,000 transitioning servicemembers will use TAP in fiscal year 2013, while the latest projections put the figure at approximately 201,000 members.

The Committee recognizes the valuable work of VETS in providing assistance to veterans seeking employment through the Jobs for Veterans State Grants Program. Under this program, grants are used to fund Disabled Veterans' Outreach Program [DVOP]

specialists and Local Veterans' Employment Representatives [LVERs]. However, the Committee recognizes that the current funding formula for DVOPs and LVERs poses challenges for larger rural States because it is strictly population-based and does not take service delivery area into account. As a result, the very few DVOPs and LVERs in these States have too much area to cover to provide personalized assistance to veterans or to build relationships with local employers. Therefore, the Committee provides funds above the budget request to be used to address the service challenges of such States and directs the Department to use the additional funds to establish innovative access points and/or service arrangements to help build the capacity of DVOPs and LVERs with larger service delivery areas and proportions of rural population. In addition, the Committee urges VETS to use any funds available from fiscal year 2012's end-of-year reallocation process to begin this effort.

INFORMATION TECHNOLOGY MODERNIZATION

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$19,814,000 |
| Budget estimate, 2013 | 21,852,000 |
| Committee recommendation | 19,814,000 |

The Committee recommends \$19,814,000 for the IT Modernization account.

Funds available in this account are used for two primary activities. The first is departmental support systems for which \$7,985,000 is provided. These funds help align IT investments with the Department's strategic objectives. The second budget activity, for which \$11,829,000 is provided, assists the Department in consolidating and optimizing common IT infrastructure services, protecting privacy, and improving timely and efficient services to the public.

OFFICE OF THE INSPECTOR GENERAL

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$83,688,000 |
| Budget estimate, 2013 | 85,108,000 |
| Committee recommendation | 83,688,000 |

The Committee recommends \$83,688,000 for the DOL OIG. The bill includes \$77,790,000 in general funds and authority to transfer \$5,898,000 from the Employment Security Administration account of the unemployment trust fund. In addition, an amount of \$327,000 is available by transfer from the Black Lung Disability Trust Fund.

OIG was created to protect the integrity of departmental programs as well as the welfare of beneficiaries served by those programs. Through a comprehensive program of audits, investigations, inspections, and program evaluations, OIG attempts to reduce the incidence of fraud, waste abuse, and mismanagement, and to promote economy, efficiency, and effectiveness.

GENERAL PROVISIONS

General provision bill language is included to:

Limit the use of Job Corps funding for compensation of an individual that is not a Federal employee at a rate not to exceed Executive Level II (section 101).

Provide for general transfer authority (section 102).

Prohibit funding for the procurement of goods and services utilizing forced or indentured child labor in industries and host countries already identified by the Labor Department in accordance with Executive Order 13126 (section 103).

Require that funds available under section 414(c) of the American Competitiveness and Workforce Improvement Act of 1998 may only be used for competitive grants for training in occupations and industries for which employers are using H-1B visas to hire foreign workers (section 104).

Limit the use of ETA funds by a recipient or subrecipient for compensation of an individual at a rate not to exceed Executive Level II (section 105).

Prohibit the Secretary from taking any action to alter the procedure for redesignating local areas under subtitle B of title I of WIA (section 106).

Provide the ETA with authority to transfer funds provided for technical assistance services to grantees to program administration when it is determined that those services will be more efficiently performed by Federal employees (section 107).

Allow up to 0.5 percent of discretionary appropriations provided in this act for all DOL 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 (section 108).

Allow the Secretary to reserve up to 3 percent of funds available under section 272(b) of the Trade Act of 1974 to conduct evaluations and provide technical assistance relating to the activities carried out under the Community College and Career Training Grant program (section 109).

Prohibit funding to promulgate, administer, enforce, or otherwise implement the final rules entitled "Wage Methodology for the Temporary Non-Agricultural Employment H-2B Program" (76 Fed. Reg. 3452 (January 19, 2011)) and "Temporary Non-Agricultural Employment of H-2B Aliens in the United States" (77 Fed. Reg. 10038 (February 21, 2012)) (section 110).

Transfer the claims function under several Federal statutes currently performed by GAO to DOL (section 111).

TITLE II

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The administration request for HHS reflects a proposal to increase program evaluation transfers under section 241 of the PHS Act from 2.5 percent to 3.2 percent. Through these transfers, PHS agencies contribute a percentage of their budget authority to fund program evaluation activities throughout the Department. The percentage is specified in section 205 of the title II general provisions.

The Committee rejects the proposed increase to 3.2 percent because of concern about the effect of this proposal on PHS Act agencies that are used as a source of evaluation transfers, most notably NIH. Increasing the total amount of funding that is available for transfers makes it easier to provide increases to selected programs that fund evaluation activities or to supplant discretionary budget authority. For example, the administration proposes in fiscal year 2013 to begin funding the Minority HIV/AIDS Initiative entirely with program evaluation transfers; that program is currently funded with budget authority. But to programs that are the source of the transfers, an increase in the evaluation tap, as proposed by the administration, would be a de facto funding cut. With regard to NIH, which the administration proposes to level fund at \$30,623,259,000, increasing the tap to 3.2 percent would result in a net reduction of more than \$200,000,000. For this reason, the Committee maintains the evaluation transfer amount at 2.5 percent, the same level as in fiscal year 2012.

Any references in this title of the report to the “Secretary” or the “Department” shall be interpreted to mean the Secretary of HHS or the Department of HHS, respectively, unless otherwise noted.

HEALTH RESOURCES AND SERVICES ADMINISTRATION

The Committee recommendation provides \$6,517,188,000 in this bill for HRSA, including \$25,000,000 in transfers under section 241 of the PHS Act. In addition, the Committee recommends \$25,000,000 in transfers from the PPH Fund.

The total program level for HRSA in fiscal year 2013 is \$6,542,188,000.

The fiscal year 2012 comparable program level is \$6,510,035,000 and the budget request is \$6,382,146,000. The budget request includes \$60,000,000 in transfers under section 241 of the PHS Act and \$10,000,000 in transfers from the PPH Fund.

HRSA activities support programs to provide healthcare services for mothers and infants; the underserved, elderly, and homeless; rural residents; and disadvantaged minorities. This agency supports cooperative programs in community health, AIDS care, healthcare provider training, and healthcare delivery systems and facilities.

BUREAU OF PRIMARY HEALTH CARE

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,585,064,000 |
| Budget estimate, 2013 | 1,579,975,000 |
| Committee recommendation | 1,585,064,000 |

The Committee recommendation for the activities of the Bureau of Primary Health Care is \$1,585,064,000.

Community Health Centers

The Committee provides \$1,566,892,000 in this bill, the same as the fiscal year 2012 level, for the community health centers program. The budget request is \$1,561,803,000.

Combined with the \$1,500,000,000 in mandatory funding appropriated for fiscal year 2013 in PPACA, the Committee's recommended program level totals \$3,066,892,000.

This group of programs includes community health centers, migrant health centers, healthcare for the homeless, and public housing health service grants. The Committee continues to support the ongoing effort to increase the number of people who have access to medical services at health centers.

The administration proposes obligating only \$1,220,000,000 of the fiscal year 2013 mandatory funding for this program in fiscal year 2013, leaving \$280,000,000 to be awarded in later years. The Committee feels strongly that the congressional intent of the PPACA funding for community health centers was to enable individuals possessing affordable health insurance for the first time in 2014 to have as many entry points to the healthcare system as possible. For that reason, the Committee includes a new statutory provision requiring HRSA to award all fiscal year 2013 funds by September 30, 2013. Such awards shall include \$48,000,000 in base grant adjustments to ensure that existing centers are surviving and thriving, even as new centers come online.

Within the amount provided, the Committee provides up to \$94,893,000 under the Federal Tort Claims Act [FTCA], available until expended. These funds are used to pay judgments and settlements, occasional witness fees and expenses, and related administrative costs. The Committee intends FTCA coverage funded through this bill to be inclusive of all providers, activities, and services included within the health centers' federally approved scope of project.

Health Care for the Homeless [HCH].—The Committee is aware of HRSA's intention to issue guidelines on permanent supportive housing. The Committee remains strongly supportive of HCH programs providing comprehensive healthcare services to residents of permanent supportive housing or other housing programs that are targeted to homeless populations but do not limit tenant length of stay.

Hepatitis Data Collection.—The Committee commends HRSA for initiating data collection on hepatitis B and C testing and chronic hepatitis diagnoses in the Bureau of Primary Care Uniform Data Sets. The Committee requests a status report on the new hepatitis data to demonstrate disease burden and diagnosis rates among community health center providers in the fiscal year 2014 budget justification.

Native Hawaiian Health Care.—The Committee includes sufficient funding in the community health centers program to support healthcare activities funded under the Native Hawaiian Health Care Program, which is specifically cited in the bill. The Committee expects that not less than the fiscal year 2012 level be provided for these activities in fiscal year 2013.

Free Clinics Medical Malpractice Coverage

The Committee provides \$40,000 for payments of claims under the FTCA to be made available for free clinic health professionals as authorized by section 224(o) of the PHS Act. The fiscal year 2012 comparable level and the budget request both include \$40,000 for this program. This appropriation extends FTCA coverage to medical volunteers in free clinics in order to expand access to healthcare services to low-income individuals in medically underserved areas.

National Hansen’s Disease Program

The Committee includes \$16,045,000 for the National Hansen’s Disease Program. This amount is the same as the fiscal year 2012 comparable level and the budget request. The program consists of inpatient, outpatient, and long-term care and training and research in Baton Rouge, Louisiana; a residential facility at Carville, Louisiana; and 11 outpatient clinic sites in the continental United States and Puerto Rico.

National Hansen’s Disease Program Buildings and Facilities

The Committee provides \$127,000 for the repair and maintenance of buildings at the Gillis W. Long Hansen’s Disease Center. This amount is the same as the fiscal year 2012 comparable level and the budget request.

Payment to Hawaii for Hansen’s Disease Treatment

The Committee provides \$1,960,000, the same amount as the fiscal year 2012 level and the budget request, for Hansen’s disease services. Payments are made to the State of Hawaii for the medical care and treatment of persons with Hansen’s disease in hospital and clinic facilities at Kalaupapa, Molokai, and Honolulu. Expenses above the level of appropriated funds are borne by the State of Hawaii.

BUREAU OF HEALTH PROFESSIONS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$725,684,000 |
| Budget estimate, 2013 | 557,187,000 |
| Committee recommendation | 727,862,000 |

The Committee recommendation for the activities of the Bureau of Health Professions is \$727,862,000. The budget estimate includes \$35,000,000 in transfers available under section 241 of the PHS Act; the Committee recommendation does not include those transfers. In addition, the Committee recommends transferring \$25,000,000 to the Bureau from the PPH Fund.

The total program level assumed in this bill for the Bureau is \$752,862,000.

The Bureau of Health Professions provides policy leadership and grant support for health professions workforce development. The mission of the Bureau is to identify shortage areas while working to make them obsolete. Its programs are intended to ensure that the Nation has the right clinicians, with the right skills, working where they are needed.

Training for Diversity

Centers of Excellence

The Committee provides \$22,909,000, the same as the fiscal year 2012 comparable level and the budget request, for the Centers of Excellence Program.

Institutions that are designated as centers of excellence are private institutions whose mission is to train disadvantaged minority health professionals for service in underserved areas. Funds are used for the recruitment and retention of students, faculty training, and institutional improvements.

Health Careers Opportunity Program

The Committee does not provide funding for the Health Careers Opportunity Program. The fiscal year 2012 comparable level is \$14,822,000. The budget request eliminates funding for this program.

The purpose of this program is to create an educational pipeline to increase the number of individuals from educationally or economically disadvantaged backgrounds who enter the health and allied health professions. The program provides activities for disadvantaged students through formal academic and research training and programming and student enhancement services.

The Committee notes that the Department of Education provides academic and other support services to students from disadvantaged backgrounds. Federally funded health workforce development programs will also continue to promote training of individuals from disadvantaged backgrounds. In addition, all grantees under the Primary Care Training and Enhancement program must have recruitment and retention strategies in place to increase the representation of disadvantaged minority trainees.

Faculty Loan Repayment

The Committee provides \$1,243,000 for the Faculty Loan Repayment Program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program provides for the repayment of education loans for individuals from disadvantaged backgrounds who are health professions students or graduates, and who have agreed to serve for at least 2 years as a faculty member of a health professions school.

Scholarships for Disadvantaged Students

The Committee provides \$47,452,000 for the Scholarships for Disadvantaged Students Program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program provides grants to health professions schools for student scholarships to individuals who are from disadvantaged backgrounds and are enrolled as full-time students in such schools.

Primary Care Training and Enhancement

The Committee provides \$48,962,000 for Primary Care Training and Enhancement programs. The fiscal year 2012 comparable level is \$38,962,000 and the budget request is \$50,962,000.

This program supports the expansion of training in internal medicine, family medicine, pediatrics, and physician assistance. Funds may be used for developing training programs or providing direct financial assistance to students and residents. The Committee once again urges HRSA to prioritize the training of physician assistants and includes bill language allowing HRSA to determine the funding amount for this activity.

The Committee is troubled that the HRSA guidance for this program currently prevents schools from applying for a grant unless they are fully accredited. Training programs cannot gain full accreditation until they are already up and running. By restricting the grant competition to training programs with full accreditation, HRSA is precluding one of two major goals of this grant program—increasing the number of new primary care training programs. The Committee directs HRSA to change its guidance in fiscal year 2013 to allow funds to be used to develop a training program and apply for accreditation.

Pediatric Loan Repayment

The Committee does not include funding, requested in the President's budget, to create a new loan repayment program for pediatricians authorized in section 523 of PPACA. The budget request includes \$5,000,000 for this initiative.

Training in Oral Health Care

The Committee recommends \$32,392,000 for Training in Oral Health Care programs, the same as the fiscal year 2012 comparable level and the budget request.

These programs support a variety of training opportunities in the field of oral health. Funds may be used to expand training in general dentistry, pediatric dentistry, public health dentistry, dental hygiene, and other oral health programs. Funds may be used to plan and operate training programs, as well as to provide financial assistance to students and residents.

The Committee notes that there are over 200 dental faculty vacancies in the United States. Therefore, the Committee intends that the general and the pediatric dentistry loan repayment programs should receive \$8,000,000 each.

Interdisciplinary, Community-Based Linkages

Area Health Education Centers

The Committee provides \$27,220,000, the same as the fiscal year 2012 comparable level, for AHECs. The budget request eliminates funding for this program.

AHECs link university health science centers with community health service delivery systems to provide training sites for students, faculty, and practitioners. The program supports three types of projects: core grants to plan and implement programs; special initiative funding for schools that have previously received AHEC grants; and model programs to extend AHEC programs with 50 percent Federal funding.

The Committee recognizes the importance of community health workers in addressing the health needs of individuals who may not have access to regular healthcare services. The AHEC community training model provides a uniquely appropriate opportunity to bring the training of community health workers to scale. HRSA is encouraged to provide technical assistance on and disseminate best practices for training community health workers to existing AHECs.

Mental and Behavioral Health

The Committee provides \$2,892,000, the same as the fiscal year 2012 comparable level, for Mental and Behavioral Health programs. The budget request for fiscal year 2013 is \$7,892,000, including \$5,000,000 in transfers available under section 241 of the PHS Act.

These programs provide grants to higher education institutions and accredited training programs to recruit and train professionals and faculty in the fields of social work, psychology, psychiatry, marriage and family therapy, substance abuse prevention and treatment, and other areas of mental and behavioral health.

Graduate Psychology Education grants train psychology graduate students to provide supervised behavioral and mental health services to underserved populations. With significant numbers of returning war veterans and a rapidly growing generation of elderly, the Nation's mental health infrastructure is certain to experience increased strain for years to come as individuals and their families increasingly turn to behavioral healthcare professionals in local communities. The Committee supports efforts to help integrate psychology trainees at Federally Qualified Health Centers to provide behavioral and mental health services to underserved populations, particularly those in rural America.

Geriatric Education

The Committee provides \$30,629,000 for geriatric education programs. This amount is the same as the fiscal year 2012 comparable level and the budget request.

Geriatric programs include: geriatric education centers, the Geriatric Academic Career Awards program, and the Geriatric Training for Physicians, Dentists, and Behavioral and Mental Health Professionals program.

The Committee commends HRSA for recognizing the immediacy of the eldercare workforce crisis by identifying "enhancing geriatric/elder care training and expertise" as a top priority in the fiscal year 2013 budget justification. The Nation's health professions must be prepared to meet the unique and often complex health needs of America's older adults. This is especially critical in primary care settings. The Committee requests that HRSA provide a

report detailing how geriatric training content is being integrated into primary care training in HRSA-supported institutions.

Health Professions Workforce Information and Analysis

The Committee recommends \$7,782,000 for health professions workforce information and analysis. The fiscal year 2012 comparable level is \$2,782,000. The budget request does not include new budget authority but proposes \$10,000,000 in transfers available under section 241 of the PHS Act.

The program provides for the collection and analysis of targeted information on the Nation's healthcare workforce, research on high-priority workforce questions, the development of analytic and research infrastructure, and program evaluation and assessment.

Public Health and Preventive Medicine Training Programs

The Committee provides \$35,111,000 for public health and preventive medicine training programs, including \$10,111,000 in budget authority and \$25,000,000 in transfers from the PPH Fund. The fiscal year 2012 comparable level is \$8,111,000 in budget authority and \$25,000,000 in funding from the PPH Fund. The budget request includes \$9,609,000 in budget authority and \$10,000,000 from the PPH Fund.

The Committee recommendation includes \$5,420,000 for preventive medicine residencies and \$5,000,000 for integrative medicine residencies. The fiscal year 2012 level for integrative medicine residencies is \$3,000,000. The increase provided in the Committee recommendation is intended to expand the national technical assistance and evaluation activities.

These programs support awards to schools of medicine, osteopathic medicine, and public health to provide for residency training programs in preventive medicine and public health, and for financial assistance to trainees enrolled in such programs.

Nursing Workforce Development Programs

The Committee provides \$231,099,000, the same amount as the fiscal year 2012 level, for nursing workforce development programs. The budget request is \$231,099,000 in budget authority and an additional \$20,000,000 in transfers available under section 241 of the PHS Act.

The Committee recommendation includes the following programs at the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| Advanced Education Nursing | 63,925 | 63,925 | 63,925 |
| Advanced Education Nursing—Section 241 transfer | | 20,000 | ..... |
| Nurse Education, Practice, and Retention | 39,182 | 39,182 | 39,182 |
| Nursing Workforce Diversity | 15,819 | 15,819 | 15,819 |
| Nurse Loan Repayment and Scholarship Program | 83,135 | 83,135 | 83,135 |
| Nurse Faculty Loan Program | 24,553 | 24,553 | 24,553 |
| Comprehensive Geriatric Education | 4,485 | 4,485 | 4,485 |

Within funds available for the Nursing Education and Retention program, the Committee intends that no less than \$5,000,000 be awarded to nurse-managed health centers.

The Committee is concerned that many nursing education and training programs are unable to guarantee required clinical placements to students who have completed the appropriate classroom work. These individuals remain full-time students longer than otherwise necessary, accumulating more student loan debt, while they await placement for their required clinical rotation. The Committee directs HRSA to prioritize applications for nursing education and training programs that provide incoming freshman students with a guarantee of high-quality clinical placements in hospitals, nursing homes, visiting nurse programs, and other care settings during their junior and senior years of study.

Children’s Hospitals Graduate Medical Education

The Committee provides \$265,171,000, the same as the fiscal year 2012 level, for the CHGME program. The budget request is \$88,000,000.

The program provides support for graduate medical education training programs in both ambulatory and in-patient settings within freestanding children’s teaching hospitals. CHGME payments are determined by a per-resident formula that includes an amount for direct training costs added to a payment for indirect costs. Payments support training of resident physicians as defined by Medicare in both ambulatory and inpatient settings.

The Committee recognizes the program’s contributions to the future pediatric workforce and children’s healthcare. The 56 freestanding children’s hospitals receiving CHGME funding train 40 percent of all general pediatric residents and 43 percent of all pediatric specialty residents.

National Practitioner Data Bank

The Committee provides \$28,016,000 for the National Practitioner Data Bank. This amount is the same as the fiscal year 2012 comparable level and the budget request. As in previous years, bill language is included to ensure that user fees are collected to cover all costs of processing requests and providing such information to data bank users.

The National Practitioner Data Bank collects certain adverse information, medical malpractice payment history, and information related to healthcare fraud and abuse. The data bank is open to healthcare agencies and organizations that make licensing and employment decisions.

MATERNAL AND CHILD HEALTH BUREAU

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$853,355,000 |
| Budget estimate, 2013 | 854,807,000 |
| Committee recommendation | 854,807,000 |

The Committee recommendation for the MCH Bureau is \$854,807,000.

The mission of the Bureau is to improve the physical and mental health, safety, and well-being of the Nation’s women, infants, chil-

dren, adolescents, and their families. This population includes fathers and children with special healthcare needs.

Maternal and Child Health Block Grant

The Committee provides \$640,098,000, the same as the budget request, for the MCH block grant. The fiscal year 2012 comparable level is \$638,646,000.

The MCH block grant program provides a flexible source of funding that allows States to target their most urgent maternal and child health needs. The program supports a broad range of activities including providing prenatal care, well child services, and immunizations; reducing infant mortality; preventing injury and violence; expanding access to oral healthcare; addressing racial and ethnic disparities; and providing comprehensive care through clinics, home visits, and school-based health programs.

The Committee includes bill language requiring that the State grant portion of the block grant be funded at no less than \$556,333,000. The fiscal year 2012 comparable level is \$549,729,000 and the budget request is \$551,181,000.

The Committee includes bill language identifying \$62,634,000 for the Title V SPRANS set-aside. Within that total, the Committee recommendation includes sufficient funding to continue the set-asides for oral health, epilepsy, sickle cell anemia, and fetal alcohol syndrome at no less than fiscal year 2012 levels.

Healthy Homes Activities.—The Committee is encouraged by recent meetings between HRSA and CDC to expand healthy homes activities within maternal and child health programs that have a home visiting focus. The Committee urges HRSA and CDC to continue to work collaboratively on this effort and requests an update on progress within 90 days of enactment of this act.

Perinatal Hepatitis B.—The Committee is concerned by high rates of mother-to-child transmission of hepatitis B in the United States. Given the large number of at-risk women being seen in HRSA-funded health settings, the Committee requests a report within 6 months of enactment of this act that includes best practices for how to eliminate perinatal hepatitis B transmission.

Pregnancy Risk Prevention.—The Committee strongly supports efforts to provide women and healthcare providers with information about prenatal exposures to medications, chemicals, radiation, infections, and other substances. Access to this information can reduce the incidence of preventable birth defects, prematurity, or complications of pregnancy that limit quality of life and increase costs in our healthcare system.

Vision and Eye Health.—The Committee is concerned that 1 in 4 school-aged children has a vision problem significant enough to affect learning. Many serious ocular conditions in children are treatable if diagnosed at an early stage. The Committee encourages HRSA to continue to support the development of a public health infrastructure to promote a comprehensive continuum of vision care for children through strong partnerships, sound science, and targeted policy initiatives.

Sickle Cell Anemia

The Committee provides \$4,665,000 for the sickle cell anemia demonstration program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program provides grants and contracts to help coordinate service delivery for individuals with sickle cell disease, including genetic counseling and testing; training of health professionals; and coordination of education, treatment, and continuity of care programs for individuals with sickle cell disease.

Traumatic Brain Injury

The Committee provides \$9,760,000 for the Traumatic Brain Injury program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The program supports implementation and planning grants to States for coordination and improvement of services to individuals and families with traumatic brain injuries. Such services can include: pre-hospital care, emergency department care, hospital care, rehabilitation, transitional services, education, employment, long-term support, and protection and advocacy services.

The Committee includes no less than the fiscal year 2012 funding level for protection and advocacy services, as authorized under section 1305 of Public Law 106–310.

Autism and Other Developmental Disorders

The Committee provides \$47,142,000 for the Autism and Other Developmental Disorders initiative. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The program supports surveillance, early detection, education, and intervention activities on autism and other developmental disorders, as authorized in the Combating Autism Act of 2006.

The Committee directs HRSA to fund research on evidence-based practices for interventions for individuals with autism and other developmental disabilities, for development of guidelines for those interventions, and for information dissemination at no less than fiscal year 2012 levels.

Newborn Screening for Heritable Disorders

The Committee provides \$9,834,000 for the newborn heritable disorders screening program, as described in section 1109 of the Newborn Screening Saves Lives Act of 2008. The fiscal year 2012 comparable level and the budget request are also \$9,834,000.

This program provides funding to improve States' ability to provide newborn and child screening for heritable disorders. Newborn screening provides early identification and follow-up for treatment of infants affected by certain genetic, metabolic, hormonal, and/or functional conditions.

The Committee encourages HRSA to collaborate with and support non-governmental entities that help educate and support States as they consider expanding their screening panels. The Committee believes that this activity is beneficial to the existing efforts of HRSA.

Healthy Start

The Committee provides \$103,532,000 for the Healthy Start infant mortality initiative. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The primary purpose of Healthy Start is to reduce infant mortality by 50 percent and generally improve maternal and infant health in at-risk communities. Grants are awarded to State and local health departments and nonprofit organizations to conduct an infant mortality review, develop a package of innovative health and social services for pregnant women and infants, and evaluate these efforts.

The Committee continues to encourage HRSA to support efforts to evaluate and address racial disparities in stillbirth and sudden unexpected infant deaths.

The Committee expects HRSA to give full and fair consideration to all applicants, including grantees with expiring or recently expired project periods.

Universal Newborn Hearing Screening and Early Intervention

The Committee provides \$18,660,000 for universal newborn hearing screening and early intervention activities. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program awards grants to 53 States and territories that support statewide systems of newborn hearing screening, audiologic diagnostic testing before 3 months of age, and enrollment in early intervention programs before the age of 6 months.

Emergency Medical Services for Children

The Committee provides \$21,116,000 for the Emergency Medical Services for Children [EMSC] program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The EMSC program makes funding available to every State EMS office to improve emergency care for children and to pay for research and dissemination of best practices.

The Committee is particularly concerned by the low availability of pediatric emergency medical services in rural and remote areas and urges HRSA to give priority to applicants who propose a focus on populations in these areas. To the extent possible, HRSA should work with other Federal agencies that have an interest in expanding emergency systems in rural and remote areas.

HIV/AIDS BUREAU

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$2,392,178,000 |
| Budget estimate, 2013 | 2,471,772,000 |
| Committee recommendation | 2,422,178,000 |

The Committee recommendation includes \$2,422,178,000 for the HIV/AIDS Bureau, including \$25,000,000 in transfers under section 241 of the PHS Act.

The mission of the Bureau is to address the unmet care and treatment needs of persons living with HIV/AIDS who are uninsured or underinsured. The Bureau administers the Ryan White Care Act, which provides a wide range of community-based serv-

ices, including primary and home healthcare, case management, substance abuse treatment, mental health services, and nutritional services.

Emergency Assistance

The Committee provides \$666,071,000, the same as the fiscal year 2012 level, for emergency assistance grants to eligible metropolitan areas disproportionately affected by the HIV/AIDS epidemic. The budget request is \$671,258,000.

Grants are provided to metropolitan areas meeting certain criteria. Two-thirds of the funds are awarded by formula, and the remainder is awarded through supplemental competitive grants.

Comprehensive Care Programs

The Committee provides \$1,390,827,000 for HIV healthcare and support services. The fiscal year 2012 comparable level is \$1,360,827,000 and the budget request is \$1,422,341,000.

Funds are awarded to States to support HIV service delivery consortia, the provision of home- and community-based care services for individuals with HIV disease, continuation of health insurance coverage for low-income persons with HIV disease, and support for State AIDS drug assistance programs.

The Committee includes bill language providing \$963,299,000 for AIDS medications in ADAP. The fiscal year 2012 comparable level is \$933,299,000 and the budget request is \$1,000,000,000. The Committee intends that the increase provided for ADAP be awarded according the statutory formula. The Committee encourages HRSA to engage in a process with States to determine the best allocation for the past emergency funds based upon the growth of the program and cost containment measures in place as of January 1, 2013.

Early Intervention Services

The Committee provides \$215,086,000, the same as the fiscal year 2012 level, for early intervention grants. The budget request is \$235,564,000.

Funds are awarded competitively to primary healthcare providers to enhance healthcare services available to people at risk of HIV and AIDS. Funds are used for comprehensive primary care, including counseling, testing, diagnostic, and therapeutic services.

Children, Youth, Women, and Families

The Committee provides \$77,167,000, the same as the fiscal year 2012 level, for grants for coordinated services and access to research for women, infants, children, and youth. The budget request is \$69,582,000.

Funds are awarded to community health centers, family planning agencies, comprehensive hemophilia centers, county and municipal health departments, and other nonprofit community-based programs that provide comprehensive primary healthcare services to populations with or at risk for HIV.

AIDS Dental Services

The Committee provides \$13,485,000 for AIDS Dental Services. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program provides grants to dental schools, dental hygiene schools, and postdoctoral dental education programs to assist with the cost of providing unreimbursed oral healthcare to patients with HIV.

AIDS Education and Training Centers

The Committee provides \$34,542,000 for the AIDS Education and Training Centers [AETCs]. This amount is the same as the fiscal year 2012 comparable level and the budget request.

AETCs train healthcare practitioners, faculty, and students who care for AIDS patients outside of the traditional health professions education venues and support curriculum development on the diagnosis and treatment of HIV infection for health professions schools and training organizations.

HEALTH CARE SYSTEMS BUREAU

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$82,534,000 |
| Budget estimate, 2013 | 82,534,000 |
| Committee recommendation | 82,534,000 |

The Committee recommendation for the Health Care Systems Bureau is \$82,534,000.

The Health Care Systems Bureau protects the public health and improves the health of individuals through efforts to support and enhance the systems by which healthcare is delivered in America.

Organ Donation and Transplantation

The Committee provides \$24,015,000 for organ donation and transplantation activities. This amount is the same as the fiscal year 2012 comparable level and the budget request.

Funds support a scientific registry of organ transplant recipients and the National Organ Procurement and Transplantation Network to match donors and potential recipients of organs. A portion of the appropriated funds may be used to educate the public and health professionals about organ donations and transplants and to support agency staff providing clearinghouse and technical assistance functions.

The Committee encourages the Division of Transplantation and the United Network for Organ Sharing to continue their dialogue with experts regarding the methodology used to determine lung transplantation eligibility for pulmonary hypertension patients.

National Cord Blood Inventory

The Committee provides \$11,887,000 for the National Cord Blood Inventory. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The purpose of this program is to provide funds to cord blood banks to build an inventory of the highest-quality cord blood units for transplantation.

C.W. Bill Young Cell Transplantation Program

The Committee provides \$23,330,000 for the C.W. Bill Young Cell Transplantation Program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The Committee continues to strongly support cell transplantation through the use of cord blood, bone marrow, peripheral blood stem cells, and other sources of adult stem cells that may be available in the future. The Committee appreciates HRSA's efforts to increase the diversity of the registry and the program's research efforts to improve the availability, efficiency, safety, and cost of transplants and the effectiveness of program operations.

Office of Pharmacy Affairs

The Committee provides \$4,472,000 for the Office of Pharmacy Affairs. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The Office of Pharmacy Affairs administers the 340B Drug Pricing program, which requires drug manufacturers to provide discounts or rebates to a set of programs and hospitals that serve a disproportionate share of low-income patients.

The Committee remains strongly committed to the Office's plans to develop a transparent system to verify the accuracy of the 340B ceiling price. Therefore, the Committee includes a statutory provision, requested by the administration, to allow a nominal cost recovery fee to fund the implementation of program integrity provisions recommended by the Inspector General and included in PPACA. The fee will be set at 0.1 percent for covered entities and is expected to generate \$6,000,000 in fiscal year 2013. The Committee expects HRSA to report the expected and actual amounts generated by the fee in HRSA's annual budget justification.

Audit Procedure.—The Committee commends HRSA for conducting audits of covered entities and recertifying eligibility for all program participants in an effort to ensure 340B program integrity. The Committee is aware that HRSA recently published a program notice that referenced an audit protocol to be made public at a later date. Given that the audit process is well underway, the Committee urges HRSA to make public information on the general audit process, including areas of review, as soon as possible and consider suspending audits until this information is publicly available.

Poison Control Centers

The Committee provides \$18,830,000 for poison control center activities. This is the same amount as the fiscal year 2012 comparable level and the budget request.

The Poison Control Centers program currently supports a mix of grantees. Most serve States; a few serve multistate regions; and, in a handful of cases, more than one grantee serves a single State.

The Committee notes that poisoning is now the leading cause of injury death, with rates higher than that of car accidents. Treatment guidance for over 70 percent of poison exposures can be provided over the phone. Providing services over the phone reduces emergency department visits, ambulance use, and hospital admissions, resulting in a savings of \$7 for every \$1 spent on poison con-

trol centers. For that reason, the Committee is strongly supportive of ensuring that all citizens have access to poison control hotlines.

RURAL HEALTH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$138,172,000 |
| Budget estimate, 2013 | 122,232,000 |
| Committee recommendation | 144,072,000 |

The Committee recommendation for rural health programs is \$144,072,000.

The Office of Rural Health Policy [ORHP] administers HHS rural health programs, coordinates activities related to rural healthcare within HHS, and analyzes the possible effects of policy on 62 million residents of rural communities. ORHP advises the Secretary on the effects of Medicare and Medicaid on rural citizens' access to care, the viability of rural hospitals, and the availability of physicians and other health professionals.

Rural Healthcare Services Outreach Grants

The Committee provides \$57,553,000 for rural health outreach grants. The fiscal year 2012 comparable level and the budget request are \$55,553,000. This program supports projects that demonstrate new and innovative models of outreach in rural areas, such as integration and coordination of health services.

The Committee recommendation includes \$2,000,000 to replicate successful models of oral healthcare delivery. Such models should focus on diverting care from emergency rooms, disease management, and prevention of early childhood caries.

Rural Health Research

The Committee provides \$9,866,000 for the Rural Health Research program. This amount is the same as the fiscal year 2012 comparable level and the budget request.

Funds are used for rural health research centers, the National Advisory Committee on Rural Health, and a reference and information service. Supported activities focus on improving the delivery of health services to rural communities and populations.

Rural Hospital Flexibility Grants

The Committee provides \$41,040,000, the same as the fiscal year 2012 level, for rural hospital flexibility grants. The budget request is \$26,200,000.

Under this program, HRSA works with States to provide support and technical assistance to critical access hospitals to focus on quality and performance improvement and to integrate emergency medical services.

The Committee commends HRSA for its work on telehealth and electronic health records in rural hospitals, with a focus on mental healthcare for veterans. The Committee understands that the grant cycle is completed, and has modified the bill language to give HRSA flexibility to determine future needs in this area.

Rural Access to Emergency Devices

The Committee provides \$5,000,000 for rural access to emergency devices. The fiscal year 2012 comparable level is \$1,100,000. The budget request eliminates funding for this program.

Funding is used to purchase automated external defibrillators, place them in public areas where cardiac arrests are likely to occur, and train lay rescuers and first responders in their use.

State Offices of Rural Health

The Committee provides \$10,036,000 for State Offices of Rural Health. This amount is the same as the fiscal year 2012 comparable level and the budget request.

These offices help States strengthen rural healthcare delivery systems by enabling them to coordinate care and improve support and outreach in rural areas.

Black Lung Clinics

The Committee provides \$7,140,000 for black lung clinics. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program funds clinics that treat respiratory and pulmonary diseases of active and retired coal miners, steel mill workers, agricultural workers, and others with occupationally related respiratory and pulmonary impairments. These clinics reduce the incidence of high-cost inpatient treatment for these conditions.

Radiation and Exposure Screening and Education Program

The Committee provides \$1,935,000 for activities authorized by the Radiation Exposure Compensation Act. This amount is the same as the fiscal year 2012 comparable level and the budget request.

This program provides grants for the education, prevention, and early detection of radiogenic cancers and diseases resulting from exposure to uranium during mining and milling at nuclear test sites.

Telehealth

The Committee provides \$11,502,000 for telehealth activities. This amount is the same as the fiscal year 2012 comparable level and the budget request.

The Telehealth program promotes the effective use of technologies to improve access to health services for people who are isolated from healthcare and to provide distance education for health professionals.

FAMILY PLANNING

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$293,870,000 |
| Budget estimate, 2013 | 296,838,000 |
| Committee recommendation | 293,870,000 |

The Committee provides \$293,870,000 for the title X family planning program.

The title X program supports preventive and primary healthcare services at clinics nationwide through four key functions: (1) pro-

viding individuals with comprehensive family planning and related preventive health services, including all FDA-approved methods of contraception; (2) training for family planning clinic personnel; (3) data collection and research aimed at improving the delivery of services; and (4) information dissemination and community-based education and outreach activities.

Comprehensive Services.—The Committee is aware that title X clinics have been denied designation as National Health Service Corps sites, under the reasoning that they do not provide referral to comprehensive primary care services. However, the Committee notes that all title X grantees are required to certify that they provide, or provide referral to, a full range of primary care services. If HRSA is sufficiently satisfied that a title X clinic provides “comprehensive primary care services”, the Committee believes that that should satisfy the identical requirement in other HRSA programs. The Committee directs HRSA to align the definition of “comprehensive primary care services” in title X and the National Health Service Corps. In addition, the Committee directs the Secretary to provide guidance to title X-only funded grantees about how to meet the requirements to receive assignment of National Health Service Corps personnel.

Program Guidance.—The Committee supports efforts to review and update the title X program guidance and administrative directives. In particular, the Committee requests that the guidance clarify that title X funds may be used for clinic training on and implementation of information technology systems, including electronic medical records. The Secretary is encouraged to complete the guideline revisions in 2012 to enable the publicly supported family planning network to sufficiently prepare for the changing healthcare delivery system.

PROGRAM MANAGEMENT

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$159,894,000 |
| Budget estimate, 2013 | 162,517,000 |
| Committee recommendation | 162,517,000 |

The Committee provides \$162,517,000 for program management activities.

HEALTH EDUCATION ASSISTANCE LOANS PROGRAM

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | \$2,807,000 |
| Budget estimate, 2013 | 2,807,000 |
| Committee recommendation | 2,807,000 |

The Committee recommends \$2,807,000 for the Health Education Assistance Loan [HEAL] program.

The Committee includes a general provision (section 522) to transfer the administration of the HEAL program to the Department of Education, as requested by the administration.

VACCINE INJURY COMPENSATION PROGRAM TRUST FUND

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$241,477,000 |
| Budget estimate, 2013 | 241,477,000 |
| Committee recommendation | 241,477,000 |

The Committee provides that \$241,477,000 be released from the vaccine injury compensation trust fund in fiscal year 2013. Of that amount, \$6,477,000 is for administrative costs.

The National Vaccine Injury Compensation program provides compensation for individuals with vaccine-associated injuries or deaths. Funds are awarded to reimburse medical expenses, lost earnings, pain and suffering, legal expenses, and death benefits. The vaccine injury compensation trust fund is funded by excise taxes on certain childhood vaccines.

CENTERS FOR DISEASE CONTROL AND PREVENTION

The Committee recommendation provides \$6,140,413,000 in this bill for CDC, including \$371,357,000 in transfers under section 241 of the PHS Act and \$55,358,000 in mandatory funds under the terms of EEOICPA. In addition, the Committee recommends \$858,000,000 in transfers from the PPH Fund.

The total program level for CDC in fiscal year 2013 is \$6,998,413,000.

The fiscal year 2012 comparable program level is \$6,937,385,000 and the budget request is \$6,715,419,000. The budget request includes \$667,503,000 in transfers under section 241 of the PHS Act and \$903,210,000 in transfers from the PPH Fund.

The activities of CDC focus on several major priorities: providing core public health functions; responding to urgent health threats; monitoring the Nation’s health using sound scientific methods; building the Nation’s health infrastructure; assuring the Nation’s preparedness for emerging infectious diseases and potential pandemics; and providing leadership in the implementation of nationwide prevention strategies that are conducive to good health.

IMMUNIZATION AND RESPIRATORY DISEASES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$588,947,000 |
| Budget estimate, 2013 | 597,620,000 |
| Committee recommendation | 588,947,000 |

The Committee recommendation for the activities of the National Center for Immunization and Respiratory Diseases is \$588,947,000; this amount includes \$12,864,000 in transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$190,000,000 to the Center from the PPH Fund.

The total program level recommended for the Center is \$778,947,000.

The mission of the National Center for Immunization and Respiratory Diseases is the prevention of disease, disability, and death through immunization and by control of respiratory and related diseases.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| Section 317 Immunization Program | 367,870 | 426,839 | 367,870 |
| Immunization Program—PPH Fund | 190,000 | 72,460 | 190,000 |
| Program Implementation and Accountability | 62,302 | 62,887 | 62,302 |

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|--------------------------------|-----------------------------|-----------------------------|
| National Immunization Survey—Section 241 transfer (non-add) ... | 12,864 | 13,765 | 12,864 |
| Influenza Planning and Response | 158,775 | 107,894 | 158,775 |
| Influenza Planning and Response—Transfer from Public Law 111-32 .. | ..... | 51,049 | ..... |

Healthcare Workers.—The Committee is aware that healthcare workers are at high risk during seasonal influenza epidemics and periodic influenza pandemics. Yet, this is when their work is most needed. The Committee recommends that CDC work in partnership with CMS to ensure that all healthcare workers receive the annual influenza vaccination.

Immunization Infrastructure.—The Committee strongly supports investments in strengthening the systems around immunization delivery, and encourages CDC to develop further strategies to (1) modernize immunization information systems; (2) prepare public health departments for changes in the healthcare delivery system, including new billing procedures related to privately insured patients; and (3) strengthen the evidence base to inform immunization policy and program monitoring.

Immunization Registries.—The Committee remains concerned about the low rate of adult immunizations. The Committee urges CDC to continue supporting States that wish to establish and expand their use of immunization registries, with a particular focus on improving information sharing about patients' vaccination histories across different providers and generating reminders to providers and patients about recommended vaccinations, especially for adults.

Section 317 Immunization Program.—The Committee recognizes that high rates of childhood immunization coverage are important for reducing child mortality and saving costs over a lifetime. For every \$1 spent on the childhood series of vaccines, \$10.20 is saved. Therefore, the Committee transfers \$190,000,000 from the PPH Fund for the section 317 immunization program. The additional funding will allow more recommended immunizations to be available through the existing network of private and public immunization providers, and support and expand the network as needed.

The Committee requests an updated report on the section 317 program no later than February 1, 2013, to reflect fiscal year 2014 cost estimates for the program, optimum funding to support State and local operations, and a discussion of the evolving role of the program as expanded coverage for vaccination becomes more available from private and public sources.

Vaccine Adverse Event Reporting System [VAERS].—The Committee understands that a strong vaccine safety monitoring system is essential to ensure that our Nation's vaccines are safe, and to ensure the success of the national immunization program and a low incidence of vaccine-preventable diseases. VAERS, a national spontaneous reporting system co-administered by CDC and FDA, requires healthcare providers and vaccine manufacturers to voluntarily report certain vaccine adverse events to VAERS, accepts voluntary reports from the public, and requires this information be made available to the public. The Committee directs CDC and FDA

to communicate with physicians about the importance of reporting vaccine adverse events, regardless of whether those events are already part of the Vaccine Injury Table.

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

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,099,934,000 |
| Budget estimate, 2013 | 1,145,678,000 |
| Committee recommendation | 1,101,934,000 |

The Committee recommendation for the activities of the National Center for HIV, Viral Hepatitis, Sexually Transmitted Diseases [STDs], and TB Prevention is \$1,101,934,000. In addition, the Committee recommends transferring \$10,000,000 to the Center from the PPH Fund.

The total program level recommended for the Center is \$1,111,934,000.

Established in 1994, the Center brings together the CDC's work on HIV/AIDS, viral hepatitis, STDs, and TB, with the exception of the Global AIDS program, which is housed in the Center on Global Health.

The Committee includes a modified version of a provision requested by the administration to give flexibility for CDC and the States to support cross-program coordination activities with 10 percent of the HIV prevention, TB, STI, and viral hepatitis funding streams. The Committee provision limits the flexibility to HIV prevention and TB funds for two reasons: first, there is a drastically smaller amount of funding available in viral hepatitis; and second, the Committee believes that STI funding is already authorized to support cross-cutting activities across a variety of sexually transmitted infections.

The Committee recommends funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Domestic HIV/AIDS Prevention and Research (total) | 786,176 | 826,407 | 786,176 |
| HIV Prevention by Health Departments | 392,636 | 402,447 | 392,636 |
| National Programs to Improve HIV Program Effectiveness | 363,702 | 384,026 | 363,702 |
| School Health—HIV | 29,838 | 39,934 | 29,838 |
| Viral Hepatitis | 19,672 | 29,694 | 19,672 |
| Viral Hepatitis Screening—PPH Fund | 10,000 | ..... | 10,000 |
| Sexually Transmitted Infections | 153,788 | 153,886 | 155,788 |
| Tuberculosis | 140,298 | 135,691 | 140,298 |

Within funds provided for national activities in HIV prevention, the Committee intends that CDC spend no less than last year's level on surveillance activities.

The Committee urges CDC to use the additional flexibility provided by the Committee in health department prevention funding to increase testing rates across the country.

Division of Viral Hepatitis.—The Committee intends that funding be used to continue CDC's viral hepatitis screening and testing initiatives, in support of the HHS goal to identify 65 percent to 75 percent of chronically infected persons who do not know their status. The Committee acknowledges the need to build an evidence

base of effectiveness, and encourages the Division to ensure that outcomes continuously inform activities undertaken in the field. The Committee encourages CDC to focus on best practices that can be replicated in various jurisdictions with varying levels of resources.

Hepatitis Screening Guidelines.—The Committee notes that hepatitis B and hepatitis C testing guidelines are not aligned across HHS operating divisions, and expects CDC to work expeditiously with ASH, AHRQ, and the USPSTF to develop consistent national testing guidelines by January 1, 2013, to improve testing rates. In particular, hepatitis B guidelines should focus on the dramatic health disparity impacting the U.S. Asian and Pacific Islander populations and hepatitis C guidelines should address the prevalence of the disease in the baby boomer population.

Infertility Prevention Program.—The Committee bill provides a \$2,000,000 increase in the Infertility Prevention Program. Chlamydia is the most commonly reported STD in the United States, yet remains under-reported due to a lack of symptoms in most cases. It is entirely curable with simple antibiotics. Left untreated, chlamydia damages reproductive organs and can lead to infertility, ectopic pregnancies, and increased risk of acquiring HIV. Routine screening is critical for preventing the spread of this silent disease. The Committee strongly supports the partnership between State departments of public health and clinics that have a strong focus on reproductive health.

Rapid Testing.—The Committee notes that the use of rapid tests significantly increases the percentage of persons with newly identified HIV who receive their testing results. The Committee encourages CDC to continue expanding the use of rapid HIV tests.

EMERGING AND ZOOONOTIC INFECTIOUS DISEASES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$252,476,000 |
| Budget estimate, 2013 | 279,477,000 |
| Committee recommendation | 269,274,000 |

The Committee recommendation for the activities of the National Center for Emerging and Zoonotic Diseases is \$269,274,000. In addition, the Committee recommends transferring \$51,750,000 to the Center from the PPH Fund.

The total program level recommended for the Center is \$321,024,000.

The National Center for Emerging and Zoonotic Infectious Diseases aims to detect, prevent, and control infectious diseases from spreading, whether they are naturally occurring, unintentional, or the result of terrorism.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--------------------------------|-----------------------------|--------------------------|--------------------------|
| Vector-Borne Diseases | 23,083 | ..... | 23,083 |
| Lyme Disease | 8,717 | ..... | 8,717 |
| Food Safety | 27,113 | 43,848 | 43,848 |
| Prion Disease | 4,969 | ..... | 4,969 |
| Chronic Fatigue Syndrome | 4,707 | ..... | 4,707 |

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|--------------------------------|-----------------------------|-----------------------------|
| Emerging Infectious Diseases | 123,359 | 182,232 | 123,359 |
| Epidemiology and Laboratory Capacity Program—PPH Fund | 40,000 | 40,000 | 40,000 |
| National Healthcare Safety Network | 14,840 | 27,468 | 14,840 |
| Healthcare-Associated Infections—PPH Fund | 11,750 | 11,750 | 11,750 |
| Quarantine | 25,866 | 25,929 | 25,929 |

Antibiotic Resistance.—The Committee commends CDC's antimicrobial stewardship efforts, such as the GetSmart program, but remains concerned about the lack of available data on both resistance trends and antibiotic use in the United States for both humans and animals. The Committee requests a report from CDC, in coordination with its partners on the Interagency Task Force on Antimicrobial Resistance, regarding the type and scope of data collected in the United States on antibiotic consumption and resistance trends. The report should compare this level of data with the level and scope of data collected around the world and the benefits or drawbacks of collecting such data. In addition, the report should identify what statutory and other obstacles exist in the United States that might prevent the collection of more comprehensive data.

Emerging Infection Surveillance.—The Committee urges CDC to create strong partnership opportunities between this Center and the Center on Global Health in order to coordinate better the Nation's surveillance of emerging infections and monitoring activities at home and abroad.

Food Safety.—The Committee remains strongly supportive of CDC's system of surveillance and outbreak response on food-borne illness. The Committee is very concerned about changes in private lab testing that reduce the ability of State labs to identify quickly the fingerprint of a particular outbreak. The Committee intends that the recommended funding increase be used to support upgrades to PulseNet and develop new laboratory tools. In addition, CDC should enhance and integrate surveillance of disease, improve outbreak and response timeliness, and help address deficits in local capacity to prevent and stop illness. The Committee supports the expansion of the number of Foodborne Diseases Centers for Outbreak Response Enhancement [FoodCORE] and Food Safety Centers of Excellence. These centers will serve a critical role through the development and dissemination of best practices and tools for food safety surveillance and outbreak response.

CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$756,377,000 |
| Budget estimate, 2013 | 633,019,000 |
| Committee recommendation | 798,445,000 |

The Committee recommendation for the activities of the National Center for Chronic Disease Prevention and Health Promotion is \$798,445,000. In addition, the Committee recommends transferring \$457,050,000 to the Center from the PPH Fund.

The total program level assumed in this bill for the Center is \$1,255,495,000.

The mission of the National Center for Chronic Disease Prevention is to provide national leadership in promoting health and well-being through prevention and control of chronic diseases. Nearly one-half of all American adults have at least one chronic illness; such diseases account for nearly 70 percent of all U.S. deaths and three-quarters of all healthcare costs in the United States.

The budget proposes a consolidation of five programs within the Center including: arthritis; comprehensive cancer; heart disease and stroke; diabetes; and nutrition, physical activity, and obesity. This consolidation proposal is the latest in a series of efforts by the administration and this Committee to coordinate better the obesity-related chronic disease prevention programs in the Center. The Committee rejects the proposed consolidation, not because the need to improve coordination has gone away but because budget constraints make it impossible to achieve without cutting funding to numerous States. Yet, the Committee remains concerned by the lack of coordination in the four State grant programs that address obesity-related chronic disease: Diabetes; Heart Disease and Stroke; Community Health Promotion; and Nutrition, Physical Activity, and Obesity.

The Committee is aware that the target populations for these four State grant programs, and the interventions recommended by these four programs, are identical. Therefore, the Committee recommends that CDC provide flexibility to States to use up to 5 percent of their funds in any of these four grant programs to address cross-cutting issues among them. The Committee intends this flexibility be used to support activities that align the goals, eligibility, evaluation, and performance metrics of these programs.

Within the total provided for the National Center for Chronic Disease Prevention and Health Promotion, the following amounts are available for the following categories of funding:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Chronic Disease Block Grant | | 378,607 | ..... |
| Office of Smoking and Health—PPH Fund | 83,000 | 89,000 | 95,000 |
| Office of Smoking and Health | 108,077 | 108,117 | 108,117 |
| Environmental Health Lab (non-add) | 1,963 | ..... | 1,963 |
| Nutrition, Physical Activity, and Obesity | 33,998 | ..... | 43,998 |
| Nutrition, Physical Activity, and Obesity—PPH Fund | 10,000 | ..... | ..... |
| School Health | 13,522 | ..... | 13,522 |
| Food Allergies (non-add) | 487 | ..... | 487 |
| Community Health Promotion | 6,106 | ..... | 6,106 |
| Glaucoma | 3,319 | ..... | 3,319 |
| Visual Screening Education | 508 | ..... | 508 |
| Alzheimer's Disease | 1,802 | ..... | 11,802 |
| Inflammatory Bowel Disease | 677 | ..... | 677 |
| Interstitial Cystitis | 651 | ..... | 651 |
| Excessive Alcohol Use | 2,440 | ..... | 2,440 |
| Chronic Kidney Disease | 2,081 | ..... | 2,081 |
| Prevention Research Centers | 17,900 | ..... | 17,900 |
| Prevention Research Centers—PPH Fund | 10,000 | ..... | 10,000 |
| Prevention Research Centers—Section 241 transfer ..... | ..... | 25,000 | ..... |
| Heart Disease and Stroke | 54,975 | ..... | 54,975 |
| Diabetes | 64,434 | ..... | 64,434 |
| Cancer Prevention and Control—PPH Fund ..... | ..... | 260,871 | ..... |
| Cancer Prevention and Control (total) | 348,304 | 62,794 | 346,332 |
| Breast and Cervical Cancer | 204,779 | ..... | 204,779 |

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|--------------------------------|-----------------------------|-----------------------------|
| WISEWOMAN (non-add) | 20,629 | ..... | 20,629 |
| Breast Cancer Awareness for Young Women | 4,881 | ..... | 4,881 |
| Cancer Registries | 50,014 | ..... | 50,014 |
| Colorectal Cancer | 42,830 | ..... | 42,830 |
| Comprehensive Cancer | 20,199 | ..... | 20,199 |
| Johanna's Law | 4,972 | ..... | 3,000 |
| Ovarian Cancer | 4,882 | ..... | 4,882 |
| Prostate Cancer | 13,114 | ..... | 13,114 |
| Skin Cancer | 2,138 | ..... | 2,138 |
| Cancer Survivorship Resource Center | 495 | ..... | 495 |
| Oral Health | 14,644 | 14,653 | 18,644 |
| Safe Motherhood/Infant Health | 43,803 | 43,848 | 43,803 |
| Arthritis | 13,001 | ..... | 13,001 |
| Epilepsy | 7,757 | ..... | 7,757 |
| National Lupus Patient Registry | 4,438 | ..... | 2,000 |
| Racial and Ethnic Approaches to Community Health | 13,940 | ..... | 23,940 |
| Racial and Ethnic Approaches to Community Health—PPH Fund | 40,000 | ..... | 40,000 |
| Community Transformation Grants—PPH Fund | 226,000 | 146,340 | 280,000 |
| Diabetes Prevention Program ..... | ..... | ..... | 10,000 |
| Diabetes Prevention Program—PPH Fund | 10,000 | ..... | 10,000 |
| Million Hearts Initiative—PPH Fund ..... | ..... | 5,000 | 5,000 |
| Workplace Wellness—PPH Fund | 10,000 | 4,000 | 10,000 |
| Let's Move—PPH Fund | 5,000 | 4,000 | ..... |
| Breastfeeding Promotion and Support Grants—PPH Fund | 7,050 | 2,500 | 7,050 |

Alzheimer's and Healthy Aging.—The Committee commends the Healthy Brain Initiative [HBI] for its leadership in bringing attention to the public health crisis of Alzheimer's disease and for its work on cognitive impairment surveillance in 38 States. The Committee notes that developing a population-based surveillance system with longitudinal follow-up is a key recommendation in the National Public Health Road Map to Maintaining Cognitive Health. The increase provided in the Committee recommendation is intended to further develop this system and to develop effective public health messages to promote cognitive health in older adults, as recommended in the recent progress report on the HBI.

Cancer Registries.—The Committee commends CDC for its work to improve the ability of the cancer registries to support enhanced access for researchers and the early capture of particularly aggressive cancers.

Cardiomyopathy.—The Committee is aware of CDC estimates that sudden cardiac arrest [SCA] is the leading cause of death on school property, with one student athlete falling victim to SCA every 3 to 4 days. The risk of SCA is highest among those with undiagnosed cardiomyopathy. The Committee is pleased with the information that CDC has developed for schools, coaches, and parents on prevention of concussion in student athletes, and encourages CDC to augment this effort with information about how to identify children with cardiomyopathy and how to respond appropriately and quickly to SCA. CDC is further encouraged to disseminate this information through the CDC Web site and the Division on Adolescent School Health.

Chronic Kidney Disease [CKD].—The Committee continues to support early detection of CKD, particularly among high-incidence minority populations. The Committee urges CDC to continue early

detection activities and the CKD Health Evaluation and Risk Information Sharing project.

Chronic Obstructive Pulmonary Disease [COPD].—The Committee applauds CDC for partnering with NHLBI to develop a national action plan to address COPD. The Committee is pleased to note that CDC is updating its COPD surveillance summary, maximizing use of the currently available research data.

Community Transformation Grants [CTG].—The Committee commends CDC for the recent announcement of a community grant competition within the CTG program. The funding announcement for this competition assumed that funds would be awarded for a 2-year period and the budget request did not anticipate another funding announcement in fiscal year 2013. The Committee recommendation includes an additional \$54,000,000 above the fiscal year 2012 level for CTG. The Committee directs CDC to award this funding in another round of community grants in fiscal year 2013.

Diabetes in Native Americans/Native Hawaiians.—The Committee commends CDC for its focus on the high incidence of diabetes and kidney disease among Native American, Alaska Native, Native Hawaiian, and Filipino populations. The Committee strongly supports the Native Diabetes Wellness Program.

Glaucoma.—The Committee continues to believe that education and screening programs for glaucoma and other age-related eye diseases are a low-cost means of preventing and reducing the risk of blindness, especially in minority populations.

Heart Disease and Stroke.—The Committee is pleased that the Center is developing a cardiovascular disease surveillance system and continues to provide support for the Sodium Reduction Communities program. The Committee recommends \$5,000,000 in transfers from the PPH Fund to support the Million Hearts initiative.

Lupus.—The Committee applauds the completed development of five lupus patient registries across the country meant to identify reliable epidemiological and burden of illness data on lupus. The Committee recommendation is sufficient to conduct cohort studies of registry patients to study further long-term outcomes, socioeconomic burdens, and mortality associated with the disease. Studies should be designed to follow an established, population-based cohort with lupus to determine over time the treatment, healthcare access, and natural history (severity, morbidity, mortality, etc.) of cohort members and the factors (including genetic and other biological factors such as antibody levels) associated with these outcomes.

Maternal Mortality Reviews.—State-based maternal mortality reviews identify deaths, review associated factors, and take action to institute changes to decrease pregnancy-related mortality. A uniform pregnancy mortality dataset tool, which includes an electronic comprehensive case abstraction form, would ensure that the information needed for review and action would be consistent for public health purposes. The Committee encourages CDC, in consultation with relevant State and national stakeholders, to develop a uniform pregnancy mortality dataset tool for guidance to States on data collection, review, and analysis, and make such a tool available to State maternal mortality review committees.

Obesity.—The Committee is aware of the importance of diet and nutrition in reducing obesity rates among targeted populations, from school-aged children to seniors. Critical to the success of this effort is training individuals how to prepare foods that are healthful, flavorful, and delivered in the most cost-effective manner. In accomplishing these objectives, the Committee encourages CDC to support strategies that engage institutions with demonstrated culinary training expertise in the areas of ingredient selection, culinary technique, flavor development, and menu development across a wide range of volume food service operations, including institutional foodservice. The Committee encourages the Center to support strategies that engage such institutions throughout its nutrition and health promotion programs.

Office on Smoking and Health [OSH].—The Committee includes \$203,177,000 for OSH, including \$95,000,000 in transfers from the PPH Fund. While much progress has been made in reducing tobacco use, the Committee continues to believe that tobacco prevention and cessation must be a priority. As noted in the U.S. Surgeon General Report issued in March, tobacco use remains a “pediatric epidemic”; more than 3.6 million middle and high school children actively smoke, with an additional 1.4 million trying their first cigarette each year. Funding from OSH is particularly important in fiscal year 2013 because, despite clear evidence of cost-effectiveness, States have cut funding for tobacco prevention programs by a total of 36 percent in the last 4 years.

The Committee is pleased with the initial reported results of the OSH media campaign. In the first 2 weeks of this campaign, calls to State quitlines more than doubled and the number of hits to www.smokefree.gov, the Government’s Web site offering quit assistance, more than tripled. In addition, previous experience from State and local media campaigns promoting quitlines shows at least 5 to 6 smokers try to quit on their own for every one person who calls a quitline. The Committee expects OSH to commit at least the same amount in fiscal year 2013 for a media campaign and quitlines as it did in fiscal year 2012.

The Committee commends the Environmental Health Laboratory for its ongoing work on tobacco products, including its successful partnership with the FDA in implementing the Family Smoking Prevention and Tobacco Control Act. The Committee expects OSH to transfer the same amount it did in fiscal year 2012 to the Environmental Health Laboratory. The Committee notes that this transfer is to be provided to the lab in a manner that supplements and in no way replaces existing funding for tobacco-related activities.

Oral Health.—The Committee is greatly encouraged by pilot programs across the country demonstrating new disease management interventions, public health media campaigns, and prevention strategies that can reduce the rate of dental caries. The Committee intends that no less than \$150,000 be available for CDC to engage in planning and technical assistance to improve and expand joint public-private media campaigns at the national, State, and local levels. This may include an oral health literacy program in response to a report from the IOM which noted that “individuals and many healthcare professionals remain unaware of the risk factors

and preventive approaches for many oral diseases, and they do not fully appreciate how oral health affects well being.”

In addition, the Committee has included sufficient funding for CDC to convene a conference examining innovative strategies to address early childhood caries [ECC] and to update the agency’s previous work on an ECC consensus statement. Through this conference, CDC in collaboration with leading researchers, clinicians, payors, and consumer groups will identify the most recent science and research advancing ECC disease management.

Johanna’s Law.—The Committee recognizes that fiscal year 2012 was the fifth year of Federal funding for the gynecological awareness campaign authorized in Johanna’s Law. Over the last 5 years, CDC has developed and distributed gynecologic cancer-specific fact sheets, Web sites, public service announcements and other public education materials. The Committee recommendation includes \$1,500,000 for an evaluation of Johanna’s Law to determine the effectiveness of this awareness campaign on gynecological cancer detection rates.

In addition, the Committee is concerned that the mortality rate for ovarian cancer has remained relatively unchanged over the last 40 years, while overall U.S. cancer mortality rates have declined dramatically. The Committee recommendation for Johanna’s Law includes \$1,500,000 for a review of the state of the science on ovarian cancer, to be submitted no later than 1 year after enactment of this act. The review should be conducted by a workgroup of both public and private sector stakeholders, and it should identify a national plan of action for improved prevention efforts, detection methods, care and treatment for the full continuum of life, and basic and public health research. The report and plan that follow should include at least: an evaluation and summary of the existing state of the science; an assessment of existing government initiatives; and an identification of and recommendations for other public and private sector efforts that would help the Nation make progress in reducing the incidence and mortality of ovarian cancer.

The Committee understands that women with the BRCA1 and BRCA2 genetic mutations are at elevated risk for both breast and ovarian cancers. Therefore, the Committee encourages CDC to explore ways in which the risk of ovarian cancer can be integrated into the larger public health system in cancer prevention and treatment, particularly in public health programs aimed at women at risk for breast cancer.

Racial and Ethnic Approaches to Community Health [REACH].—The Committee is aware of the tremendous success of the REACH program. From 2001 to 2009, physical activity rates among minority populations in REACH communities increased from 7 to 12 percent, compared to a U.S. average in the general population of 2 to 5 percent. These outcomes are all the more impressive considering the high rates of obesity and obesity-related illness in REACH communities. The Committee strongly supports the REACH model of partnering with communities that are underserved and often disadvantaged, both to identify health disparities of concern to the community and then to implement community-based, evidence-based, and culturally competent approaches to reduce or eliminate those disparities.

Preterm Birth.—The Committee commends CDC for funding State-based perinatal collaboratives that focus on improving birth outcomes using known prevention strategies such as reducing early elective deliveries.

Sleep Disorders.—Evidence is growing that chronic circadian disruptions and disorders can cause significant safety and health issues such as increased risk of cardiovascular disease, breast cancer, diabetes, obesity, motor vehicle crashes, and difficulty adhering to school and work schedules. CDC is encouraged to continue current surveillance efforts on sleep patterns that assist researchers in this area.

Well-Integrated Screening and Evaluation for Women Across the Nation.—The Committee once again includes bill language requiring CDC to make competitively awarded grants under section 1509 of the PHS Act available to not less than 21 States, tribes, or tribal organizations. WISEWOMAN helps uninsured and under-insured low-income women avoid heart disease and stroke by providing preventive health services; referrals to local healthcare providers, as needed; and lifestyle counseling and interventions tailored to identify risk factors to promote lasting, healthy behavior change.

NATIONAL CENTER ON BIRTH DEFECTS, DEVELOPMENTAL
DISABILITIES, DISABILITY AND HEALTH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$137,287,000 |
| Budget estimate, 2013 | 18,476,000 |
| Committee recommendation | 134,500,000 |

The Committee recommendation for the activities of the National Center on Birth Defects and Developmental Disabilities [NCBDDD] is \$134,500,000. The budget request transfers an additional \$107,089,000 from the PPH Fund; the Committee rejects that proposed transfer.

This Center improves the health of children and adults by preventing birth defects, developmental disabilities, and complications of heredity blood disorders and by promoting optimal child development and health and wellness among children and adults living with disabilities.

For the second consecutive fiscal year, the budget request includes a proposal to consolidate 14 programs in the Center into a broadly defined program on disability and health. For the second time, the Committee rejects the consolidation proposal. The Committee notes with dismay that the proposal was submitted to Congress without the accompanying information that the fiscal year 2012 statement of the managers specifically stated would be a requirement for consideration of any such proposal in fiscal year 2013. The Committee reiterates that no consolidation will be considered without an assessment of the needs of the populations currently served and an analysis of the impact of a consolidation on those populations.

Within the total provided, the following amounts are provided for the following categories of funding:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|--------------------------------|-----------------------------|-----------------------------|
| Child Health and Development—PPH Fund | | 49,957 | ..... |
| Child Health and Development/Birth Defects and Developmental Dis- abilities (total) | 61,966 | 8,653 | 60,161 |
| Birth Defects | 20,192 | ..... | 18,387 |
| Fetal Death (non-add) | 806 | ..... | 806 |
| Fetal Alcohol Syndrome | 9,862 | ..... | 9,862 |
| Folic acid | 2,779 | ..... | 2,779 |
| Infant health | 7,868 | ..... | 7,868 |
| Autism | 21,265 | ..... | 21,265 |
| Autism—PPH Fund | | 21,340 | ..... |
| Health and Development with Disabilities—PPH Fund | | 43,841 | ..... |
| Health and Development with Disabilities/Human Development and Dis- ability (total) | 56,574 | 7,360 | 57,585 |
| Disability and health | 17,779 | ..... | 17,779 |
| Limb loss | 2,820 | ..... | 2,820 |
| Tourette Syndrome | 1,698 | ..... | 1,698 |
| Early Hearing Detection and Intervention | 10,630 | ..... | 10,630 |
| Muscular Dystrophy | 5,828 | ..... | 5,828 |
| Paralysis Resource Center | 6,700 | ..... | 6,700 |
| Attention-Deficit Hyperactivity Disorder | 1,715 | ..... | 1,715 |
| Fragile X | 1,681 | ..... | 1,681 |
| Spina Bifida | 5,734 | ..... | 5,734 |
| Congenital Heart Failure | 1,989 | ..... | 3,000 |
| Public Health Approach to Blood Disorders—PPH Fund | | 13,291 | ..... |
| Blood Disorders (total) | 18,747 | 2,463 | 16,754 |
| Public Health Approach to Blood Disorders ..... |  | ..... | 10,754 |
| Hemophilia | 16,633 | ..... | ..... |
| Hemophilia Treatment Centers ..... |  | ..... | 6,000 |
| Thalassemia | 1,856 | ..... | ..... |

Cerebral Palsy [CP].—The Committee commends CDC for releasing the first multisite, population-based study on the CP population in the country. In addition to updating prevalence estimates, this report provided estimates of co-occurring developmental disabilities, gross motor function, and walking ability among children with CP. The Committee encourages the CDC to update these figures regularly.

Fragile X—Fragile X-Associated Disorders [FXD].—The Committee encourages CDC to continue to focus its efforts on data collection to identify and define the population impacted by FXD and the public health impact of these conditions. CDC is further encouraged to support epidemiological research, surveillance, screening, and the promotion of early interventions and supports.

Hemophilia Treatment Centers [HTCs].—The Committee intends that funds provided for HTCs be used to continue surveillance and research at an expanded number of hemophilia treatment centers.

Public Health Approach to Blood Disorders.—The Committee includes sufficient funding to continue and expand work on bleeding and clotting disorders, as well as hemoglobinopathies. The Committee remains supportive of the blood safety surveillance program focused on thalassemia. Because thalassemia patients are transfused every 2 weeks and thus are the largest users of red blood cells, closely monitoring their health effectively protects all transfused patients, whether due to surgery, childbirth, trauma, or any other cause.

Spina Bifida.—The Committee intends the funding provided for the National Spina Bifida Program [NSBP] to be used to support

the continuation of a data collection initiative to improve the efficacy and quality of care. Further, the Committee intends the NSBP to serve as a model for programs assisting other individuals living with similar complex conditions.

Tourette Syndrome.—The Committee intends that CDC continue to educate health professionals, educators, and the general public about Tourette syndrome and to expand the scientific knowledge base on prevalence, risk factors, and co-morbidities of this disorder.

PUBLIC HEALTH SCIENTIFIC SERVICES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$391,741,000 |
| Budget estimate, 2013 | 415,069,000 |
| Committee recommendation | 391,741,000 |

The Committee recommendation for Public Health Scientific Services is \$391,741,000; this amount includes \$247,769,000 in transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$70,000,000 to these activities from the PPH Fund.

The total program level assumed in this bill for these services is \$461,741,000.

This funding supports the work of all of the CDC Centers by compiling statistical information to inform public health policy. In particular, these activities assure the accuracy and reliability of laboratory tests; apply digital information technology to help detect and manage diseases, injuries, and syndromes; and develop and inform the public health community on sound public health surveillance, laboratory protocols, and epidemiological practices.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Health Statistics—Section 241 transfer | 138,683 | 161,833 | 138,683 |
| Health Surveillance—PPH Fund | 35,000 | 35,000 | 35,000 |
| State/Local Lab Sustainability—PPH Fund ..... | ..... | 20,000 | ..... |
| Community Guide—PPH Fund | 10,000 | 10,000 | 10,000 |
| Public Health Workforce and Career Development | 35,929 | 35,695 | 35,929 |
| Public Health Workforce Capacity—PPH Fund | 25,000 | 25,000 | 25,000 |

The Committee requests that CDC include in the fiscal year 2014 congressional budget justification a listing of all internal laboratories with a description of their responsibilities and their annual funding and staffing levels. The laboratories should be categorized by biosafety level.

Seminal Surveys.—The Committee continues to support strong data quality and accessibility within the ongoing seminal health surveys, in particular the National Health Interview Survey and National Health and Nutrition Examination Survey.

Sexual and Gender Identity Inclusion in Health Data Collection.—The Committee recognizes the steps CDC has taken to include questions relating to sexual orientation in the National Health Interview Survey. The Committee remains supportive of inclusion of gender identity questions. The Committee urges CDC to

ensure that milestones established in the July 2011 national data progression plan are met.

Vital Statistics.—The Committee recommendation includes sufficient funding to collect 12 months of vital statistics data within the calendar year.

ENVIRONMENTAL HEALTH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$104,998,000 |
| Budget estimate, 2013 | 103,672,000 |
| Committee recommendation | 114,667,000 |

The Committee recommendation for the National Center for Environmental Health is \$114,667,000. In addition, the Committee recommends transferring \$35,000,000 to the Center from the PPH Fund.

The total program level assumed in the bill for this Center is \$149,667,000.

The National Center for Environmental Health addresses emerging pathogens and environmental toxins that pose significant challenges to public health. The Center conducts surveillance and data collection to determine which substances in the environment are getting into people and to what degree. The Center also determines whether these substances are harmful to humans and at what level of exposure.

The Committee recommendation includes funding for the following activities:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| Environmental Health Laboratory | 42,383 | 42,394 | 42,383 |
| Newborn Screening Quality Assurance Program (non-add) | 6,825 | ..... | 6,825 |
| Newborn Screening for Severe Combined Immunodeficiency Diseases (non-add) | 965 | ..... | 965 |
| Environmental Health Activities (total) | 35,322 | 33,962 | 36,986 |
| Environmental Health Activities | 12,160 | ..... | 12,160 |
| Safe Water | 7,109 | ..... | 7,109 |
| Volcanic Emissions | 197 | ..... | 197 |
| Amyotrophic Lateral Sclerosis Registry | 5,869 | ..... | 5,869 |
| Climate Change | 7,359 | 4,875 | 4,875 |
| Built Environment and Health Initiative | 2,628 | ..... | 6,776 |
| Environmental and Health Outcome Tracking Network—PPH Fund | 35,000 | 29,000 | 35,000 |
| Asthma | 25,298 | ..... | 25,298 |
| Healthy Homes/Childhood Lead Poisoning | 1,995 | ..... | 10,000 |
| Healthy Home and Community Environments ..... | ..... | 27,316 | ..... |

ALS.—The Committee commends the Center for launching a tool within the ALS registry to promote clinical trial enrollment and for exploring the addition of a biorepository. The Committee encourages CDC to work with stakeholders and researchers to help raise awareness of the registry in both the patient community and the research community, and to ensure that the registry collects information that is useful for ALS research and treatment development. The Committee further encourages CDC to work with CMS to explore how the registry may help improve care and promote standards of care for those living with the disease as well as other opportunities to advance ALS research.

Asthma.—The budget request again proposes to consolidate CDC’s National Asthma Control program with the Healthy Homes/ Childhood Lead Poisoning program. The Committee notes that this proposal contains few details on how the consolidated program would bridge the different models and settings currently employed by the two individual programs. For that reason, the Committee again rejects the administration’s proposal. The Committee directs CDC to continue its support of the asthma program, its approach to asthma control, its community partners, and its successful interventions.

Blood Lead Reference Value.—The Committee applauds CDC for doing away with the use of the “blood lead level of concern” methodology. The Committee encourages CDC to raise awareness of the new blood lead reference value. The Committee is interested in the potential for point-of-care screening devices, particularly in at-risk communities.

Healthy Homes and Lead Poisoning Prevention Program.—The Committee recommendation includes sufficient funding for national surveillance efforts that can better target HUD lead poisoning prevention efforts, technical assistance to local public health officials, and national leadership on the science of lead poisoning.

National Environmental Public Health Tracking Network.—The Committee commends CDC for providing technical support to States and cities that have demonstrated interest in conducting public health tracking activities with their own resources.

INJURY PREVENTION AND CONTROL

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$137,693,000 |
| Budget estimate, 2013 | 137,754,000 |
| Committee recommendation | 137,693,000 |

The Committee recommendation for the National Center for Injury Prevention and Control is \$137,693,000. In addition, the Committee recommends transferring \$3,000,000 to the Center from the PPH Fund.

The total program level assumed in this bill for the Center is \$140,693,000.

CDC is the lead Federal agency for injury prevention and control. Programs are designed to prevent premature death and disability and reduce human suffering and medical costs caused by fires and burns, poisoning, drowning, violence, and traffic accidents. The national injury control program at CDC encompasses nonoccupational injury and applied research in acute care and rehabilitation of the injured.

The Committee recommendation includes funding for the following activities:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| Intentional Injury (total) | 93,282 | 93,317 | 93,282 |
| Domestic Violence and Sexual Violence | 31,042 | ..... | 31,042 |
| Child Maltreatment (non-add) | 6,959 | ..... | 6,959 |
| Youth Violence Prevention | 14,968 | ..... | 14,968 |
| Domestic Violence Community Projects | 5,411 | ..... | 5,411 |
| Rape Prevention | 39,389 | ..... | 39,389 |

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| All Other Intentional Injury | 2,472 | ..... | 2,472 |
| Unintentional Injury (total) | 30,966 | 30,988 | 30,966 |
| Traumatic Brain Injury | 6,026 | ..... | 6,026 |
| All Other Unintentional Injury | 24,940 | ..... | 24,940 |
| Elderly Falls (non-add) | 1,958 | ..... | 1,958 |
| Elderly Falls—PPH Fund ..... | ..... | ..... | 3,000 |
| Injury Control Research Centers | 9,974 | 9,977 | 9,974 |
| National Violent Death Reporting System | 3,471 | 3,472 | 3,471 |

Falls Prevention Interventions.—The Committee includes \$3,000,000 from the PPH Fund to expand older adult falls prevention activities at CDC, in coordination with ACL. The Committee intends that CDC use the funding to conduct research to evaluate and disseminate the most effective fall prevention interventions and that ACL use the funding provided that agency to conduct outreach and demonstration programs to expand the implementation of effective interventions.

OCCUPATIONAL SAFETY AND HEALTH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$292,588,000 |
| Budget estimate, 2013 | 249,364,000 |
| Committee recommendation | 292,588,000 |

The Committee recommendation for occupational safety and health programs is \$292,588,000; this amount includes \$110,724,000 in transfers available under section 241 of the PHS Act, the same as was transferred in fiscal year 2012. The budget request assumes \$249,364,000 in transfers.

CDC's National Institute for Occupational Safety and Health [NIOSH] is the only Federal agency responsible for conducting research and making recommendations for the prevention of work-related illness and injury. The NIOSH mission is implemented by conducting scientific research (both applied and basic) and translating the knowledge gained into products and services that impact workers in settings from corporate offices to construction sites to coal mines.

The Committee recommendation includes funding for the following activities at the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Education and Research Centers | 24,268 | ..... | 24,268 |
| Personal Protective Technology | 16,791 | ..... | 16,791 |
| Personal Protective Technology—Section 241 transfer ..... | ..... | 16,880 | ..... |
| Healthier Workforce Center | 5,016 | ..... | 5,016 |
| Healthier Workforce Center—Section 241 transfer ..... | ..... | 5,026 | ..... |
| National Occupational Research Agenda | 111,366 | 91,724 | 111,366 |
| Section 241 transfer (non-add) | 110,724 | 91,724 | 110,724 |
| Mining Research | 52,363 | ..... | 52,363 |
| Mining Research—Section 241 transfer ..... | ..... | 52,687 | ..... |
| Other Occupational Safety and Health Research—Section 241 Transfer ..... | ..... | 83,047 | ..... |
| Other Occupational Safety and Health Research | 82,784 | ..... | 82,784 |
| Miners Choice (non-add) | 646 | ..... | 646 |
| National Mesothelioma Registry and Tissue Bank (non-add) | 1,020 | ..... | 1,020 |

Education and Research Centers.—The Committee directs CDC to spend no less than last year for this program.

Mining Research.—The Committee requests that the fiscal year 2014 congressional budget justification include a 5-year history of mining research funding and FTE by type of mine research, in particular the proportion of resources dedicated to coal and metal/nonmetal research.

Other Occupational Safety and Health Research.—The Committee requests that the fiscal year 2014 congressional budget justification include a 5-year history of the funding and FTE supported by this program, broken down by industry and location.

Regional Proximity to Industry.—The Committee strongly supports NIOSH's regional distribution of research facilities. NIOSH is a leader in applied research and the Committee believes that interaction with a wide variety of industries is key to NIOSH's success. The Committee requests a staffing plan for all facilities owned and leased by NIOSH over the coming 5 fiscal years, to be submitted no later than March 1, 2013. The plan should include on-site contractors, any notable projections for retirement, and site-specific plans for recruitment.

National Occupational Research Agenda.—The Committee directs CDC to spend no less than last year for the Agriculture, Forestry, and Fishing Program within the National Occupational Research Agenda.

ENERGY EMPLOYEES OCCUPATIONAL INJURY COMPENSATION
ACT

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$55,358,000 |
| Budget estimate, 2013 | 55,358,000 |
| Committee recommendation | 55,358,000 |

The Committee recommendation for EEOICPA is \$55,358,000. This mandatory funding supports NIOSH scientists who reconstruct radiation dose levels to inform compensation decisions.

GLOBAL HEALTH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$347,594,000 |
| Budget estimate, 2013 | 362,889,000 |
| Committee recommendation | 362,594,000 |

The Committee recommends \$362,594,000 for global health-related activities at CDC.

The Center for Global Health leads international programs and coordinates CDC's global efforts with the goal of promoting health and preventing disease in the United States and abroad. The Center has a particular focus on ensuring rapid detection and response to emerging health threats.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Global AIDS Program | 117,118 | 117,156 | 117,118 |
| Global Immunization Program (total) | 160,287 | 175,417 | 160,287 |
| Polio Eradication | 111,286 | 126,365 | 111,286 |
| Measles and Other Vaccine Preventable Diseases | 49,001 | 49,052 | 49,001 |

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|--------------------------------|-----------------------------|-----------------------------|
| Global Disease Detection and Emergency Response | 41,601 | 41,659 | 46,601 |
| Global Disease Detection Centers (non-add) | 35,604 | 35,604 | 40,604 |
| Parasitic Diseases and Malaria | 19,367 | 19,417 | 19,367 |
| Global Public Health Capacity Development | 9,221 | 9,240 | 9,221 |
| National Public Health Institutes | | | 10,000 |

National Public Health Institutes [NPHIs].—In many countries around the world, public health functions are spread across the ministries of health. Laboratory work, surveillance, outbreak response, and budget are often disconnected and fragmented, making public health efforts less efficient and less effective. This fragmentation is a barrier to collaboration among nations on preventing the spread of infectious disease and setting common health research goals. NPHIs are science-based organizations that bring together the public health functions of a government. They use evidence to inform health practice and policies, determine the effectiveness of health investments and practices, and provide a locus of coordination for donor resources in developing nations.

The Committee is aware that the International Association of National Public Health Institutes has begun to transfer its technical assistance functions to CDC, making CDC the global leader on building NHPI capacity around the world.

In recognition of the leadership role that CDC plays in global public health, the Committee has included a new initiative to support the creation of NPHIs in developing countries. The Committee has provided \$10,000,000 to be available over a 2-year period for CDC to work in at least five countries. The Committee expects CDC's engagement to be time-limited, extending from 3 to 5 years. The Committee further expects this initiative to engage countries in all regions of the world; however, the Committee understands that any country engaged must show a high level of commitment to reorganize its ministry of health in this manner.

PUBLIC HEALTH PREPAREDNESS AND RESPONSE

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,299,479,000 |
| Budget estimate, 2013 | 1,228,360,000 |
| Committee recommendation | 1,299,479,000 |

The Committee recommendation for the Office of Public Health Preparedness and Response [OPHR] is \$1,299,479,000.

The Committee does not support transferring any balances from Public Law 111–32, the Supplemental Appropriations Act, 2009, in fiscal year 2013. In fiscal year 2012, \$30,000,000 was transferred from such balances for an additional amount for the Strategic National Stockpile and the budget request proposes transferring an additional \$46,776,000. The Committee feels strongly that additional transfers would impair the HHS flu plan that the supplemental appropriations bill was designed to implement.

The mission of OPHR is to build and strengthen national preparedness for public health emergencies including natural, biological, chemical, radiological, and nuclear incidents. OPHR administers national response programs and assets, as well as grants to

States and localities to enhance preparedness efforts across the country.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| State and Local Preparedness and Response Capability (total) | 657,418 | 641,917 | 657,418 |
| Public Health Emergency Preparedness Cooperative Agreement | 641,671 | ..... | 641,671 |
| Academic Centers for Public Health Preparedness | 7,980 | ..... | 7,980 |
| All Other State and Local Capacity | 7,767 | ..... | 7,767 |
| CDC Preparedness and Response Capability (total) | 138,269 | 146,999 | 138,269 |
| Upgrading CDC Capacity | 109,467 | ..... | 109,467 |
| BioSense | 20,727 | ..... | 20,727 |
| Real-time Lab Reporting | 8,075 | ..... | 8,075 |
| Strategic National Stockpile | 503,792 | 439,444 | 503,792 |
| Strategic National Stockpile Transfer from Public Law 111-32 | 30,000 | 46,776 | ..... |

Public Health Emergency Preparedness Cooperative Agreement.—The Committee directs that CDC award no less than last year's level through the cooperative agreement with State and local public health departments.

CDC-WIDE ACTIVITIES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$617,913,000 |
| Budget estimate, 2013 | 487,648,000 |
| Committee recommendation | 593,193,000 |

The Committee provides \$593,193,000 for public health leadership and support activities at CDC. In addition, the Committee includes \$41,200,000 in transfers from the PPH Fund, the same as was transferred in fiscal year 2012 and the budget request.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| Preventive Health and Health Services Block Grant | 79,545 | ..... | 79,545 |
| Business Services Support | 394,682 | 368,529 | 383,529 |
| Buildings and Facilities | 24,946 | ..... | 11,000 |
| Public Health Leadership and Support | 118,740 | 119,119 | 119,119 |
| National Prevention Strategy—PPH Fund | 1,000 | 1,000 | 1,000 |
| Public Health Infrastructure—PPH Fund | 40,200 | 40,200 | 40,200 |

The Committee is pleased with the progress CDC made on improving its congressional budget justification in fiscal year 2013 and appreciates the detailed information on programs, grant awards, and staffing levels. The Committee continues to urge CDC to give a clear accounting of how funds are being spent in this annual budget document. The budget justification should not only be an accounting of how funds will be spent in the coming year, but also how funds have been spent in the past. Therefore, the Committee directs that the fiscal year 2014 justification include information on programs as they existed in fiscal year 2013, as well as any new structure the budget may propose for the funding in fiscal year 2014. The Committee expects progress on transparency to continue as CDC seeks additional funding flexibility.

Chief Disability and Health Officer.—The Committee commends CDC for appointing a chief disability and health officer, as well as establishing a disability and health work group that recently prepared its 1-year progress report. The Committee encourages CDC to continue to support and strengthen public health research activities focused on people with disabilities. Specifically, CDC is encouraged to: recognize disability as a key determinant in national surveys and surveillance systems; address health disparities among people with disabilities; enhance health promotion and prevention and access to healthcare for people with disabilities; foster knowledge translation and communication efforts to bring persons with disabilities reliable health information; develop new disability research initiatives through partnerships across CDC centers and other Federal agencies; and develop public and private partnerships to support and advance disability issues.

Extramural Research.—In last year's Senate report, the Committee requested a report from CDC by March 1 of each year that details the breakdown of intramural and extramural funding for each program. CDC has yet to produce such a report. The Committee directs CDC to comply with this request either in a stand-alone report or in the annual budget justification.

Preventive Health and Health Services Block Grant.—The committee recommends \$79,545,000, the same as the fiscal year 2012 level, for the Preventive Health and Health Services Block Grant. The budget request eliminates all funding for this program.

Repairs and Improvements.—The Committee is dismayed by the lack of clear information about CDC's building repair needs. The Committee directs CDC to devise a system to categorize needed repairs into security, life/safety repairs, condition index, and other repairs. CDC is further directed to print the number of repairs in the annual congressional budget justification each year, with cost estimates. The Committee understands that such a list is ever-changing and suggests that CDC print an "as of" date in the justification.

Working Capital Fund [WCF].—The Committee is pleased with the progress CDC has made to set up and create a strong auditing system for a new WCF. The Committee hopes to see the WCF begin operations in fiscal year 2014 to achieve greater cost efficiencies across the administrative operations of the agency.

The WCF is a revolving fund that pays for consolidated business services for CDC. The Centers of CDC will pay into the fund according to the amount of services they use. CDC is in the process of setting up an audited and transparent system, in which the Center directors participate in decisionmaking, to determine those amounts.

NATIONAL INSTITUTES OF HEALTH

The Committee provides \$30,731,459,000 for NIH activities within the jurisdiction of this bill, including \$8,200,000 in transfers available under section 241 of the PHS Act. The budget request is \$30,631,459,000, the same as the fiscal year 2012 level.

The Committee notes that the net amount for NIH in the budget request would actually be a cut of more than \$200,000,000 below the fiscal year 2012 level following implementation of the administration's proposal to increase the program evaluation tap on PHS

agencies from 2.5 percent to 3.2 percent. As explained in the introduction to the HHS title in this report, the Committee rejects that proposed increase and maintains the tap at 2.5 percent.

The Institute and Center appropriation levels listed below for fiscal year 2012 reflect the transfers announced by HHS in April to increase funding for Alzheimer's disease research.

Recommended funding levels for some ICs are slightly below the fiscal year 2012 levels, or increase less than others, due to small reallocations or changes in scientific opportunity reflected in the administration's budget request. For example, the Committee agrees with the administration that all of the funding for public access activities and the National Center for Biotechnology Information should be provided directly to NLM beginning in fiscal year 2013 instead of partly through direct funding to NLM and partly through contributions from other ICs. This change accounts for the relatively large apparent increase for NLM and some minor reductions to other ICs. In addition, as in prior years, the recommended levels for the ICs reflect a redistribution of funding for AIDS research, as some ICs increase their work in this area and others do less.

Other than these reallocations, funding for most of the ICs is increased over the fiscal year 2012 levels by the same percentage.

NATIONAL CANCER INSTITUTE

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$5,067,396,000 |
| Budget estimate, 2013 | 5,068,864,000 |
| Committee recommendation | 5,084,227,000 |

The Committee recommends an appropriation of \$5,084,227,000 for NCI. Of this amount, \$8,000,000 is available for repairs and improvements to the NCI facility in Frederick, Maryland.

Angiogenesis.—The Committee commends NCI for planning a scientific workshop to explore the effect of medication, diet, and lifestyle on angiogenic levels. The Committee encourages NIH to use this workshop to engage with the Trans-Institute Angiogenesis Research Program on implementing a vigorous agenda that examines current angiogenesis therapies in order to improve outcomes. The Committee also encourages NCI to examine angiogenic levels in the body prior, during, and after treatments. In addition, all relevant Institutes are urged to coordinate efforts to study the correlation of platelet proteomes to angiogenesis with the goal of developing a health marker.

Breast Cancer.—The Committee remains concerned about the toll of triple negative breast cancer and urges NCI to collaborate with ORWH, NIMHD, OMH, and OWH to help improve treatment and survival rates.

Cancer Disparities.—The Committee urges NCI to fund basic, translational, and clinical research on cancer disparities in regions of the country that have a high predominance of economically disadvantaged African Americans. Specifically, the Committee urges further research on novel immune therapeutics intervention in cancer areas relevant to human papilloma virus and genomics etiologies in cancer areas relevant to smoking and obesity.

Liver Cancer.—The Committee recognizes NCI's efforts in the area of liver cancer, but encourages a stronger effort to include

funding of a specialized program of research excellence on this disease as well as liver cancer program projects focusing on pathogenesis, detection, and/or therapeutics.

Lung Cancer.—The Committee commends NCI for its National Lung Screening Trial and urges the Institute and partner agencies to move forward in translating these findings into public health recommendations. The Committee requests an update in the fiscal year 2014 congressional budget justification about the benefits of screening among high-risk groups including women, African-American men, and those with other co-morbidities.

Melanoma.—The Committee continues to encourage NCI to support research directed at the biology of tumor initiation including UV radiation as a carcinogen, the immunologic and addictive effects of UV radiation, host risk factors, and risk reduction strategies. Research into the relative utility of novel early detection strategies is encouraged, including leveraging recent advances in imaging technology. Despite two recent drug approvals for advanced melanoma, cures are rare. Research strategies with curative potential that build on these advances should be supported, including examining mechanisms of drug resistance to molecularly targeted therapies such as BRAF gene inhibitors. The Committee also urges more research on treatment strategies for the 50 percent of patients without BRAF mutations, as well as on predictive biomarkers that correlate with immune response to ipilimumab. Finally, the Committee urges NCI to promote collaborations between industry, the extramural program, and foundations that will accelerate translational and clinical research.

Minority Communities.—The Committee continues to remain concerned at the disproportionately high rate at which minority populations suffer from virtually every form of cancer. The Committee requests that NCI and NIMHD prepare a joint report on efforts to end this disparity and effective ways to communicate with minorities on this important issue.

Neuroblastoma.—The Committee encourages NCI to expand its research portfolio on this deadly pediatric cancer, including the development of new treatment options for children suffering from central nervous system [CNS] relapses. The Committee requests an update on this research, including the potential utilization of chimeric antibody immunotherapy for CNS-relapsed neuroblastoma, in the fiscal year 2014 congressional budget justification.

Pancreatic Cancer.—While survival rates for many types of cancer have steadily improved, the rate for pancreatic cancer has remained in the single digits for over 40 years. With the number of new cases of pancreatic cancer projected to increase 55 percent between 2010 and 2030, the Committee urges NCI to create a comprehensive, long-term research strategy for this disease that focuses on increasing survival. The plan should not be simply a summary of recent and ongoing research activities. Rather, it should set out concrete goals for the future. The Committee requests an update in the fiscal year 2014 congressional budget justification on the steps NCI is taking to create such a plan.

Pediatric Cancer.—The Committee continues to urge NCI to devote more of its funding specifically for research on pediatric cancer, including pediatric low-grade astrocytoma. The Committee re-

quests an update in the fiscal year 2014 congressional budget justification, including efforts that could result in more effective, less toxic treatments.

Robotic Biorepository Technology.—In order to determine the genetic differences in the development, progression, and response to treatment of individuals with cancer, biospecimens (e.g. blood, urine, tumor tissue) must be collected and evaluated. Under some circumstances, high throughput, robotic instruments for the processing and storage of biospecimens can improve the efficiency and consistency of handling and distribution of these samples. In an effort to adequately address the increasing demand for these specimens, an automated approach should be considered when appropriate. Robotic biorepositories may also allow researchers to expand the collection of tissue specimens. A related goal is to ensure an adequate supply of high-quality human biospecimens from multi-ethnic communities for research to understand and overcome cancer health disparities. The Committee encourages NCI to explore the applicability of robotic biospecimen collection technologies and the establishment of regional robotic biorepositories in an effort to advance cancer research.

Shared Medical Decisionmaking.—The Committee encourages NCI's collaboration with OBSRR to study shared medical decision-making and to identify ways to improve communications between healthcare providers and their patients.

Tumor Lysis Syndrome [TLS].—The Committee understands that identifying high-risk patients, taking preventive measures, and closely monitoring patients are all key in fighting TLS, a life-threatening oncologic emergency that is frequently encountered during and/or after the treatment of a variety of cancers. The Committee encourages NCI to convene an expert panel or working group to evaluate current risk assessment models, recommend a standardized assessment tool, and develop a plan of action to validate and disseminate the tools in clinical practice.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$3,076,115,000 |
| Budget estimate, 2013 | 3,076,067,000 |
| Committee recommendation | 3,085,390,000 |

The Committee recommendation includes \$3,085,390,000 for NHLBI.

Asthma.—The Committee continues to urge NHLBI to increase research on and awareness of asthma, and to collaborate with the FDA, NIAID, NICHD, NIMHD, and OMH in this regard.

Basic Behavioral Research Translation.—NHLBI is encouraged to speed the translation of basic research results in the behavioral and social sciences to clinical or other applications.

Cardiovascular Disease.—The Committee continues to believe that research on heart disease, stroke, and other forms of cardiovascular disease should be a top priority for NIH. Given promising cardiovascular scientific opportunities and projected escalating costs and prevalence, the Committee strongly urges NHLBI to boost funding for its cardiovascular portfolio to further support studies that will build on past accomplishments and enhance prevention and treatment efforts. In particular, the Institute should

aggressively focus on and expand current cardiovascular research and actively invest in novel areas, including initiatives highlighted in its Division of Cardiovascular Diseases Strategic Plan.

Chronic Obstructive Pulmonary Disease [COPD].—The Committee applauds NHLBI for its plans to host a forum of stakeholders and representatives from Federal agencies to share information about current activities related to COPD and discuss the development of a national action plan to address this disease, the third highest cause of death in the United States. The Committee requests an update in the fiscal year 2014 congressional budget justification.

Jackson Heart Study.—The Committee recognizes that the Jackson Heart Study in Jackson, Mississippi, as authorized in the PHS Act, is the largest investigation of cardiovascular disease in the African-American population. The Committee acknowledges the continued need for comprehensive research at NHLBI and NIMHD to address this disease in African Americans and the important implications for such research to all persons threatened by cardiovascular disease.

Lymphangiomyomatosis [LAM].—The Committee remains very interested in efforts to find a cure for LAM, a progressive and often fatal lung disease in women. The Committee supports both intramural and extramural means of expanding research on LAM and urges NHLBI to use all available mechanisms as appropriate, including Translational Program Project Grants, to stimulate a broad range of clinical and basic research. The Committee commends NIH for supporting multicenter LAM trials and encourages additional support of such trials.

Marfan Syndrome.—The Committee commends NHLBI for its leadership of the Genetically Triggered Thoracic Aortic Aneurysms and Cardiovascular Conditions Registry [GenTac]. The Committee encourages the Institute to use GenTac to advance research on surgical outcomes for Marfan syndrome patients who undergo different procedures to repair compromised aortas and valves.

Pediatric Cardiomyopathy.—The Committee commends NHLBI for its commitment to pediatric cardiomyopathy research and urges the Institute to maintain support of the Pediatric Cardiomyopathy Registry and Pediatric Cardiomyopathy Specimen Repository. The Committee encourages NHLBI to establish a pediatric cardiomyopathy task force that will focus on defining standards of care, identifying gaps in basic and clinical research, developing a research agenda, and working towards better genetic screening methods.

Pulmonary Fibrosis.—The Committee supports ongoing efforts to study pulmonary fibrosis and notes the promising strategy of researching fibrosis across organs. The Committee encourages NHLBI to develop a strategy for enhancing research on this disease.

Scleroderma.—The Committee encourages NHLBI to support additional research on the impact of connective tissue diseases, such as scleroderma, on the pulmonary system.

Sickle Cell Trait.—The Committee commends NHLBI for its efforts to develop a research agenda on sickle cell trait and its relation to exertion-related illness and other conditions. The Committee

encourages the Institute to reach out to medical societies in hematology and sports medicine, as well as athletic associations, to collaboratively develop and undertake research that can inform current policies related to sickle cell trait screening and participation in athletic activities.

Sleep Disorders.—The Committee applauds NIH’s Sleep Disorders Research Plan, published by the National Center on Sleep Disorders Research. The Committee urges the Institute to work with other ICs to implement the plan’s recommendations for improving sleep research and training, and for advancing multi-Institute collaborations.

Stem Cell Biology.—The Committee encourages NHLBI to support additional research in the development of blood stem cells from induced pluripotent stem [iPS] cells and to address barriers to the clinical translation of iPS cell technology.

NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$410,322,000 |
| Budget estimate, 2013 | 408,212,000 |
| Committee recommendation | 409,449,000 |

The Committee recommendation includes \$409,449,000 for NIDCR.

Temporomandibular Disorders [TMD].—The Committee recognizes the advances that have been made as a result of NIDCR funding toward understanding the pain associated with TMD and encourages the Institute to continue basic and clinical research in this area. The Committee also encourages NIDCR to collaborate with other ICs regarding the etiology and pathogenesis of TMD as well as the co-morbid chronic pain conditions and disorders that solely or predominately affect women. An under-researched aspect of these disorders is the jaw joint. NIDCR should work with NIAMS and NIBIB to develop research opportunities in the area of joint pain and dysfunction. Topics that need further research include: the kinematics and biomechanics of the jaw in normal and disease states; the development of biomarkers in bone, muscle, and cartilage that are predictive of temporomandibular disease progression; the interactions of the temporomandibular joint musculoskeletal system with the nervous system; and the development of non-invasive measures of temporomandibular joint bone, cartilage, and muscle structure, degradation, and repair. The Committee urges NIDCR, NIAMS, NIBIB, and other relevant ICs to organize a workshop to assess the state of the science and identify research gaps and future scientific directions to advance understanding of the temporomandibular joint.

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,795,348,000 |
| Budget estimate, 2013 | 1,792,107,000 |
| Committee recommendation | 1,797,539,000 |

The Committee recommendation includes \$1,797,539,000 in this bill for NIDDK.

Burden of Digestive Diseases.—Due to advancements in diagnosis and greater understanding of many digestive conditions, the Com-

mittee requests that NIDDK update its report on the burden of digestive diseases in the United States to provide more accurate information on the current economic and health impacts of these conditions.

Chronic Pelvic Pain.—Interstitial cystitis often coexists with several poorly understood and neglected chronic pain conditions. The Committee applauds the progress made by the Institute to understand the overlapping nature of these disorders through the Multidisciplinary Approach to the Study of Chronic Pelvic Pain [MAPP] Research Network. NIDDK is encouraged to continue its focus on understanding co-morbidity in the second phase of the MAPP project.

Diabetes Prevention.—The Committee applauds NIDDK for its continued efforts to build on the successes of the Diabetes Prevention Program and encourages the use of additional resources to improve prevention and treatment of diabetes in order to bring the Nation closer to a cure.

Fecal Incontinence.—The Committee commends NIDDK for its launch of the Bowel Control Awareness Campaign and recognizes that fecal incontinence significantly hinders the work and social lives of those affected. The Committee prioritizes research addressing this condition to improve patient quality of life and to meet the research goals indicated in the NIDDK report “Opportunities and Challenges in Digestive Diseases Research: Recommendations of the National Commission on Digestive Diseases.”

Functional Gastrointestinal Disorders [FGIDs].—The Committee understands that FGIDs can dramatically impact children’s social and educational development, and encourages NIDDK to work with NICHD to support research addressing FGIDs in children.

Inflammatory Bowel Disease.—The Committee commends NIH for its support of the Human Microbiome Project and notes the significance of this groundbreaking research in advancing the understanding of inflammatory bowel disease and its impact on pediatric patients. The Committee requests an update on this program in the fiscal year 2014 congressional budget justification.

Interstitial Cystitis.—The Committee continues to encourage a focus on research and treatment relating to interstitial cystitis, which impacts individuals of all ages. The Committee encourages the inclusion of research focused on this disease in children as a part of these activities.

Polycystic Kidney Disease [PKD].—The Committee continues to urge NIDDK to collaborate with other Institutes and leverage discoveries from its portfolio of PKD grants for the purpose of developing a comprehensive strategic plan for PKD and other related neoplastic diseases. For example, the Committee understands that Pioglitazone, a drug that may have potential for treating PKD, is being studied in Parkinson’s patients and is partially funded through NINDS.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,624,830,000 |
| Budget estimate, 2013 | 1,624,707,000 |
| Committee recommendation | 1,629,631,000 |

The Committee recommendation includes \$1,629,631,000 for NINDS.

ALS.—The Committee is aware that basic research on ALS and a reservoir of pre-approved FDA drugs may provide the basis for drug development that could offer meaningful therapy for those with the disease. The Committee encourages NINDS to support clinical trials on ALS that are scientifically well-founded and have the opportunity to advance to “bedside” quickly.

Dystonia.—The Committee recognizes the advancements that dystonia research has contributed towards an understanding of neuromuscular disorders and neurotrauma and encourages NINDS to continue to prioritize dystonia research.

Epilepsy.—The Committee applauds the establishment and work of the Interagency Collaborative to Advance Research in Epilepsy, led by NINDS, as a means to focus Federal agencies and voluntary organizations on epilepsy research. The Committee also commends NINDS for announcing the next conference on curing epilepsy, to be held in March 2013, and for starting a new initiative to develop ways to manage epilepsy with no seizures and no therapeutic side effects. These new grants, the EUREKA grants and the Epilepsy Centers without Walls grants, are supporting creative and collaborative research that could lead to advances in prevention, diagnosis, or treatment of epilepsy and related co-morbidities. Additionally, the Committee commends NINDS for supporting the Partners Against Mortality in Epilepsy conference on sudden unexplained death in epilepsy. Finally, the Committee urges NINDS to heed the recommendations of the 2012 IOM report “Epilepsy Across the Spectrum: Promoting Health and Understanding”.

Headache Disorders.—The Committee encourages NINDS to put a higher priority on the causes of headache disorders as well as innovative treatments.

Network for Excellence in Neuroscience Clinical Trials.—The Committee encourages NINDS to continue supporting the Network for Excellence in Neuroscience Clinical Trials [NeuroNEXT] program. The Committee urges NIH to increase the efficiency of clinical trials conducted through NeuroNext, facilitate patient recruitment and retention, and increase the quality of the neuroscience trials. The Committee also encourages NIH to work with other stakeholders to develop surrogate endpoints to more efficiently determine the success of a study.

Spinal Muscular Atrophy [SMA] Translational Research.—The Committee commends NINDS for supporting SMA therapy development projects through its Cooperative Program for Translational Research. This collaborative program has proven highly successful in accelerating the development of SMA therapies for testing in the clinic and facilitating the submittal of investigational new drug applications to the FDA. The Committee urges NINDS to use this approach as a model as it shifts its investment in SMA to the best opportunities based on current science, and to use the Cooperative Program for Translational Research to continue to advance and broaden the SMA drug pipeline. The Committee also applauds NINDS for its work on validating SMA biomarkers through the NeuroNEXT initiative.

Stroke.—The Committee remains concerned that NIH spends only 1 percent of its budget on stroke research and strongly urges NINDS to expand its stroke portfolio. The Committee commends the leadership of NINDS in the decade-long work of the Stroke Progress Review Group and requests another status report, in the fiscal year 2014 congressional budget justification, on its Phase 2 stroke planning process to advance the most promising areas in prevention, treatment, and recovery research.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$4,486,473,000 |
| Budget estimate, 2013 | 4,495,307,000 |
| Committee recommendation | 4,508,932,000 |

The Committee recommendation includes \$4,508,932,000 for NIAID.

Antibacterial Resistance.—The Committee applauds NIAID’s decision to target antibiotic-resistant bacterial infections as the initial priority for the expansion of its clinical trials networks beyond HIV/AIDS. To further support research on antibacterial resistance, new antibacterial drugs, and new diagnostics, the Committee recommends that NIAID form a blue ribbon panel of experts including representatives from infectious diseases professional societies, the pharmaceutical and diagnostics industries, and others to create an antibacterial resistance strategic plan to assist in prioritizing research critical in this area.

Anti-Malarial Medications.—The Committee encourages NIAID to increase its support for public-private partnerships focused on developing anti-malarial medications and for research and development of alternatives to artemisinin combination therapies in response to the rapidly emerging threat of artemisinin resistance.

Food Allergies.—The Committee is pleased with the support and clinical advancement of promising food allergy research at NIAID and NIDDK. NIH is currently evaluating potential immunotherapy protocols for clinical implementation in children and adults with food allergy. The Committee encourages NIAID to continue its public-private partnerships in support of clinical immunological, immunomodulator, and mechanistic studies, with private donors and foundations as components of ongoing clinical trials.

Hepatitis B.—The Committee is pleased with the emergence of new and improved drugs to treat hepatitis B and the role that NIAID continues to play in this effort. However, drugs are effective in only half of the population, and for those patients that can take these medications there is still only a 50 percent reduction in mortality over a 10-year period. The Committee urges a more aggressive effort in this area.

Microbicides.—The Committee encourages NIAID to continue coordination with USAID, the State Department, and others to advance antiretroviral [ARV]-based microbicide development efforts, with the goals of enabling regulatory approval of the first safe and effective microbicide for women and supporting product development and efficacy trials of alternative ARV-based microbicides.

Neglected Tropical Diseases [NTDs].—The Committee urges NIAID to continue its investment in neglected tropical disease and malaria research, including translational research for NTDs, and to

work with other agencies as a part of the Global Health Initiative to foster research and ensure that basic discoveries are translated into solutions.

Nontuberculous Mycobacterial [NTM] Disease.—The Committee urges NIAID to intensify research into NTM infections so that more effective interventions can be developed for patients.

Regional Biocontainment Laboratories [RBLs].—NIAID established 13 RBLs in response to the NIAID Strategic Plan for Bio-defense Research in 2002. Since their creation, the RBLs have not received any additional Federal funding from NIAID specifically for facility operations. The Committee asks NIAID to provide a report by June 1, 2013, that details NIAID’s plans for the RBLs. The report shall include, at a minimum, projected Federal funding needs, program goals, and a long-term plan for the RBLs.

Specimen Collection.—Collecting specimens is critical to research and development of diagnostic tests or other activities intended to advance the treatment, detection, identification, prevention, or control of antimicrobial-resistant infections. The Committee urges NIAID, in conjunction with CDC, ASPR, and the FDA, to consult with representatives from diagnostics and pharmaceutical companies, academia, and professional societies to explore the most effective way to provide samples, including the feasibility of creating a biorepository of prospectively collected specimens.

TB.—The Committee strongly urges NIAID to expand its research into the development of new TB diagnostic tests, drugs, and vaccines, particularly regarding drug-resistant TB and totally drug-resistant TB.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$2,427,742,000 |
| Budget estimate, 2013 | 2,378,835,000 |
| Committee recommendation | 2,387,112,000 |

The Committee recommendation includes \$2,387,112,000 for NIGMS.

Institutional Development Awards [IDeA].—The Committee provides \$276,480,000 to continue increased support for the IDeA program. The Committee recognizes the importance of the Centers of Biomedical Research Excellence [COBRE] and the IDeA Networks of Biomedical Research Excellence [INBRE] programs. The Committee believes the IDeA program has made a significant contribution to biomedical research and creating a skilled workforce. Therefore, the Committee continues the \$45,882,000 increase from fiscal year 2012 and recommends that one-half the increase go toward new COBRE awards. The increase should be paid for by a reduction in funding across NIH ICs.

The Committee encourages the NIH Director to expand the program to support co-funding IDeA projects across NIH ICs to foster the development of efforts in IDeA State programs. Further, as an Office of Experimental Program to Stimulate Competitive Research [EPSCoR] program, the focus of IDeA should continue to be on improving the necessary infrastructure and strengthening the biomedical research capacity and capability of research institutions. Unfortunately, many institutions in EPSCoR-qualifying States who could benefit from the IDeA program are ineligible for funding.

Therefore, the Committee directs the IDeA Director to expand IDeA eligibility to all NSF EPSCoR-eligible States.

EUNICE KENNEDY SHRIVER NATIONAL INSTITUTE OF CHILD HEALTH
AND HUMAN DEVELOPMENT

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,320,151,000 |
| Budget estimate, 2013 | 1,320,600,000 |
| Committee recommendation | 1,324,603,000 |

The Committee recommendation includes \$1,324,603,000 for NICHD.

Children in Military Families.—Given that nearly 2 million children live in military families and 700,000 children have been affected by a recent or current deployment of a parent, the Committee commends NICHD for supporting research on the impact of these experiences on child health and well-being and on the effectiveness of programs designed to address the psychosocial and mental health needs of children and their families. Studies are needed to examine the unique developmental challenges of children when the mother or female head of household is deployed to a combat zone, the process of adjustment when military personnel return home, and the long-term consequences of separation and reintegration on children's development.

Chromosome Abnormalities.—The Committee continues to support additional research on chromosome abnormalities and urges NICHD to consider holding a state of the science meeting focusing on strategies aimed at devising treatments for recurring and non-recurring copy number changes. The Committee further urges new funding to support other independent investigators whose work can provide pilot data or insight into future directions for the study of more chromosome abnormalities, particularly those involving chromosome 18. The Committee requests an update on these activities, focusing on non-Down syndrome research, in the fiscal year 2014 congressional budget justification.

Demographic Research.—The Committee commends NICHD for supporting large-scale databases, such as the National Longitudinal Survey of Youth, the Child Development Supplement of the Panel Study of Income Dynamics, and the Fragile Families and Child Well-Being Study, and demographic research activities, such as the Population Research Infrastructure Program. These investments have generated key scientific findings, illuminating in particular the relationship between socioeconomic status and individuals' health and well-being. As NICHD implements its ambitious reorganization and scientific visioning process in fiscal year 2013, the Committee urges the Institute to continue its commitment to supporting demography and population science.

Kidneys and Childhood Development.—The Committee urges NICHD, in consultation with NIDDK, to undertake efforts to examine the role of normal kidney development and/or function in neonatal and child health. Specific areas to be addressed should include: kidney function in low-birth weight infants; how chronic acidosis, untreated hypertension, or recurrent urinary tract infections affect child development; the impact of childhood-onset hypertension on adult cardiovascular health; and the identification of ge-

netic and epigenetic factors that may subsequently result in kidney injury and progression of hypertension and chronic kidney disease.

Orthotics and Prosthetics.—As America's population ages, the demand for orthotic and prosthetic care to address the effects of stroke, diabetes, cardiovascular disease, and other health issues continues to grow. To date, little comparative effectiveness and outcomes research has been conducted to establish which patients benefit most from which orthotic and prosthetic services, supports, and devices. The Committee supports evidence-based research in prosthetic and orthotic care, and urges NICHD and the National Center for Medical Rehabilitation Research to coordinate with DOD and the Department of Veterans' Affairs to develop and pursue a research agenda that responds to the most pressing needs of the field.

Pediatric Functional Gastrointestinal Disorders [FGIDs].—The Committee encourages NICHD to work with NIDDK to support research addressing FGIDs in children.

Pheochromocytoma.—The Committee is concerned that the current funding for the diagnosis, pathophysiology, and molecular biology of pheochromocytoma is inadequate to meet the rapidly expanding patient base and growing need for research into pheochromocytoma and paraganglioma. The Committee recommends NIH expand the funds available for this effort.

Preeclampsia.—The Committee is concerned by the lack of progress made in understanding the causes of and risks associated with preeclampsia and the related conditions of eclampsia and HELLP syndrome, which can result in disability or death for a mother and premature delivery or death for an infant. The Committee encourages NICHD to work with other ICs to share research findings and facilitate additional research into ways to better prevent, manage, and identify interventions for these conditions.

Preterm Births.—The Committee commends NICHD on its work to prevent preterm births and encourages the Institute to take into account that there are a number of conditions which increase the risk of neurologic damage. The Committee urges NICHD and NINDS to undertake studies into interventions during pregnancy and/or labor to improve neonatal outcome, particularly neurologic outcome. The Committee also requests that NICHD identify the steps necessary to establish one or more transdisciplinary research centers for prematurity as recommended by the IOM.

Severe Maternal Morbidity.—The Committee understands that NICHD is exploring the feasibility of holding a scientific workshop to harmonize definitions for maternal morbidity. The Committee urges NICHD to reach a positive decision, as uniform definitions would help Federal, State, and local agencies and research institutions establish standardized and interoperable processes for surveillance, data collection, and research.

Spinal Muscular Atrophy [SMA] Care Protocols.—The Committee is aware that clinical practice guidelines for SMA are under preliminary development by advocacy groups in concert with expert investigators and clinicians. In the absence of evidence-based care protocols, the efficacy of the care received by SMA patients depends largely upon geographic proximity to experienced care centers and clinicians. Many SMA patients receive care that is inconsistent

with best practices, and this variability negatively impacts individual patients as well as clinical trial results for SMA therapies. The Committee encourages NICHD to support natural history and care studies of SMA to facilitate the development of clinical practice guidelines that will bring uniformity to the medical care received by SMA patients and significantly improve the management of the disease. The Committee further encourages NICHD to facilitate the sharing of data and data sources between stakeholders involved in such studies.

Vulvodynia.—The Committee is pleased with the progress that NICHD has made over the last fiscal year in expanding extramural research support for vulvodynia, ensuring adequate representation of vulvodynia experts on peer-review panels, convening a vulvodynia workshop, and developing a research plan on this condition. The Committee calls upon the Director to build upon these initial efforts by carrying out the recommendations from the strategic research plan and expects to be updated on the Institute’s progress in the fiscal year 2014 congressional budget justification. The Committee also notes that vulvodynia frequently coexists with other persistent pain conditions, including interstitial cystitis, fibromyalgia, temporomandibular disorders, irritable bowel syndrome, endometriosis, headache, and chronic fatigue syndrome. The Committee is pleased with NICHD’s participation in the trans-NIH research initiative to support studies aimed at identifying etiological and mechanistic pathways of these overlapping conditions, and the Institute is encouraged to continue its work in this area.

NATIONAL EYE INSTITUTE

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$702,049,000 |
| Budget estimate, 2013 | 693,015,000 |
| Committee recommendation | 695,115,000 |

The Committee recommendation includes \$695,115,000 for NEI.

Diabetic Eye Disease.—The Committee continues to support the important work of the NEI Diabetic Retinopathy Clinical Research Network.

Genetic Basis of Eye Disease.—The Committee commends NEI for identifying more than 500 genes associated with both common and rare eye diseases, enabling an understanding of disease mechanisms and development of potential therapies for such blinding eye conditions as age-related macular degeneration [AMD], glaucoma, and retinitis pigmentosa [RP]. The Committee is pleased that NEI’s AMDGene Consortium has validated eight previously known gene variants and identified 19 new gene variants, and that the NEI Glaucoma Human Genetics Collaboration [NEIGHBOR] has identified the first risk variant in a gene thought to play a role in the development of the optic nerve head, the degeneration of which leads to glaucoma and loss of peripheral vision.

Translational Research.—The Committee recognizes NEI’s translational research initiatives and is pleased that the NEI-led human gene therapy clinical trial for Leber congenital amaurosis has resulted to date in 15 patients being treated and experiencing visual improvement. The Committee applauds NEI’s pioneering work that is enabling further research into ocular gene therapy through the launch of clinical trials for AMD, choroideremia,

Stargardt disease, and Usher syndrome, as well as pre-clinical safety trials for RP, juvenile retinoschisis, and achromatopsia.

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$684,923,000 |
| Budget estimate, 2013 | 684,030,000 |
| Committee recommendation | 686,103,000 |

The Committee recommendation includes \$686,103,000 for NIEHS.

Endocrine Disruption and Women's Health.—The Committee urges NIEHS to increase its research on the effects of endocrine-disrupting chemicals on women's health outcomes. An update is requested in the fiscal year 2014 congressional budget justification.

Gulf Oil Spill.—The Committee commends NIEHS for the Gulf Long-Term Follow-Up [GuLF] Study of 55,000 clean-up and response workers whose activities have involved potential exposures to oil, combustion by-products from burning oil, and oil dispersants that may be associated with adverse health consequences. In addition, the Committee commends the National Toxicology Program for its assessment of the toxicological effects of crude and weathered oil and dispersants, as well as NIH for its grants to community-university consortia for research on the effects of the oil spill on the health of the people of the gulf coast. The Committee urges NIEHS and other Institutes to continue their support of these important studies.

Women's Health and the Environment.—The Committee urges NIEHS to increase its research in several areas of special importance to women's health: exposures that may initiate or promote autoimmune diseases; exposures associated with risk of uterine fibroids; the effects of engineered nanomaterials in consumer products, especially cosmetics and personal care products; and environmental exposures that are associated with increased time to pregnancy.

NATIONAL INSTITUTE ON AGING

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,121,400,000 |
| Budget estimate, 2013 | 1,102,650,000 |
| Committee recommendation | 1,124,265,000 |

The Committee recommendation includes \$1,124,265,000 for NIA.

Alzheimer's Disease.—In order to build upon the strong body of work already being done in NIH-funded Alzheimer's Disease Research Centers, the Committee urges NIH to take advantage of existing well-characterized, longitudinal, population-based cohort studies and the existing research infrastructure these large-scale cohort studies have already established to provide new insights into risk factors and protective factors related to cognitive decline and dementia. The Committee feels strongly that additional research is needed in minority populations that are at particularly high risk for cognitive decline and dementia.

Biology of Aging.—The Committee applauds NIA's leadership role in the Geroscience Interest Group, which will promote coordinated discussion and action across NIH on research to reduce the burden of age-related disease.

Cognitive Interventions.—The Committee encourages NIA to continue support of studies to identify environmental, behavioral, and social factors that could protect against age-related cognitive decline as well as randomized studies to test the efficacy of behavioral and social interventions to slow or reverse age-related cognitive decline.

Demographic Research.—The Committee recognizes NIA for supporting research on the demographic, economic, and social consequences of an aging population in the United States and worldwide. A premier example of this research is the Health and Retirement Study, a longitudinal survey of more than 26,000 Americans that is now being replicated in over 30 other countries.

Measurement of Well-Being.—The Committee commends NIA for working with the Economic and Social Research Council in Great Britain to develop subjective measures of well-being as a complement to objective health measures and traditional economic indicators of progress. The Committee encourages the continued development of these metrics and their incorporation into national surveys.

Neuropsychology and Alzheimer’s.—Recognizing that neuropsychological assessment can provide detailed information about cognitive deficits related to dementia or trauma, the Committee encourages NIA to continue research that links neuropsychological markers with Alzheimer’s biomarkers.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$535,280,000 |
| Budget estimate, 2013 | 535,610,000 |
| Committee recommendation | 537,233,000 |

The Committee recommendation includes \$537,233,000 for NIAMS.

Heritable Connective Tissue Disorders.—The Committee encourages NIAMS to expand its collaborative efforts with other Institutes to support clinical and translational research aimed at identifying effective therapies for heritable connective tissue disorders, particularly Marfan syndrome.

Osteogenesis Imperfecta [OI].—The Committee urges NIAMS to support natural history studies of OI that will facilitate efforts by advocacy groups and medical professional societies to develop clinical practice guidelines for adults living with OI and to increase research on emerging issues. The Committee encourages NIAMS to work with relevant stakeholders from government, medical professional societies, and advocacy groups on this matter and to provide an update in the fiscal year 2014 congressional budget justification.

Scleroderma.—The Committee continues to be pleased with the progress of the Institute as it relates to scleroderma. The Committee encourages NIAMS to concentrate efforts on identifying genetic components that increase the likelihood of developing this disease.

Temporomandibular Disorders [TMD].—Many people who have TMD suffer from conditions that routinely affect other joints in the body, such as trauma, arthritis, and fibromyalgia. Therefore, the Committee calls on NIAMS to collaborate with NIDCR and NIBIB

to bring the intellectual and scientific resources within these Institutes to the study of the jaw anatomy and physiology and the complex neural, endocrine, and immune system interactions that orchestrate jaw function and trigger jaw joint pathology. NIAMS should integrate findings from studies of the structure, mechanical function, metabolism, and blood flow of bone, joints, and muscles with studies of central and peripheral neural pathways, as well as the endocrine, paracrine, and cytokine factors that impact upon craniofacial structures as a means to understanding the underlying causes of jaw pain and dysfunction.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION
DISORDERS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$415,880,000 |
| Budget estimate, 2013 | 417,297,000 |
| Committee recommendation | 418,562,000 |

The Committee recommendation includes \$418,562,000 for NIDCD.

Clinical Trials for Human Communication Disorders.—The Committee encourages NIDCD to expand its clinical trials program and commends the Institute for a funding opportunity announcement that encourages industry collaboration and requires both clinical and basic scientists to be a part of research teams.

Dementia and Hearing Loss.—The Committee recognizes the association of unaddressed hearing loss with pre-dementia and dementia and advocates investigating whether hearing loss is a cause for dementia, whether hearing-loss interventions will slow or halt dementia, and how rehabilitative interventions for hearing loss can be delivered in communities.

Early Detection, Diagnosis, and Intervention.—The Committee urges NIDCD to continue research on the auditory, speech, language, voice, and psychosocial outcomes of children identified with hearing loss through newborn screening. Additionally, the Committee is aware of data that show a higher prevalence of hearing loss than thought among school-age children who passed newborn screening. Therefore, the Committee recommends more research on methods of screening for both mild hearing loss in infancy and for late-onset hearing loss. The Committee also encourages NIDCD to continue studying optimal sound amplification strategies for children's hearing aids, particularly to enhance speech recognition in noisy classrooms, and the effects of services and parental engagement on the emotional well-being of the hearing-impaired child.

Hair Cell Regeneration and Replacement.—The Committee continues to place a high priority on research involving cellular regeneration of the inner ear. The Committee advocates the goals to identify genes and factors that promote regeneration cited in the 2012–2016 NIDCD Strategic Plan for Research.

Hearing Aids and Cochlear Implants.—The Committee encourages additional research that compares the benefits of high- and lower-cost hearing aids, creates screening protocols for hearing loss in primary care settings, and continues collaborations between industry, scientists, clinicians, and consumers in the area of low-cost hearing aids. The Committee recommends further studies of the relationship between the success of hearing aid fittings and the cog-

nitive capabilities of the hearing aid user, and supports further development of an automated hearing-screening kiosk. The Committee is pleased that NIDCD is funding cochlear implant research for those with severe-to-profound hearing loss and recommends additional studies on new electrode design and innovative approaches to speech processing. The Committee further urges continued research into studies evaluating and comparing the benefits of the “bimodal” option of an implant in one ear and a hearing aid in the other, and of a middle ear implantable device that combines electromechanical and acoustical stimulation in the same ear. The Committee encourages NIDCD to continue to monitor cochlear-implanted children as they enter school, including their development of higher-order cognitive and language skills, speech production and recognition, and behavioral and social adjustment.

Hearing Impairment Among Children and Young Adults.—The Committee urges additional research on children and young adults with mild and unilateral hearing loss from all modes of injury. In particular, the Committee recommends further studies on this group’s diminished educational outcomes and development of strategies to improve school achievement. The Committee commends NIDCD for “It’s a Noisy Planet!”, a public education effort in English and Spanish about the dangers of hearing loss from noise exposure. The Committee also encourages NIDCD to continue to explore new ways to engage and broaden audiences through social media.

Hereditary Hearing Impairment.—The Committee encourages additional efforts by NIDCD to identify and understand the structure, function, and regulation of genes whose mutation results in deafness and other communication disorders.

Noise-Induced and Environmental Hearing Loss.—The Committee continues to encourage NIDCD to promote public awareness of the importance of protecting hearing from noise, through public service announcements or other means. The Committee also encourages studies in normal-hearing children of the impact of noisy classrooms on learning, continuation of a study measuring hearing thresholds and noise exposure levels in 18- to 25-year-olds, and environmental and genetic research into factors that predispose individuals to noise-induced hearing loss.

Otitis Media.—The Committee supports continuing studies to develop new treatments for chronic and recurrent otitis media (ear infections), including treatment via a trans-tympanic antibiotic gel and prevention through intranasal vaccines.

Presbycusis.—The Committee urges NIDCD to continue multidisciplinary physiological and neurological studies of the peripheral and central mechanisms of presbycusis, or age-related hearing loss. It commends establishment of the NIDCD Otopathology Research Collaboration Network and NIDCD’s National Temporal Bone, Hearing and Balance Pathology Resource Registry to disseminate information about temporal bone donation.

Salt Intake and Salt Substitute.—The Committee encourages NIDCD to study whether taste perception will change following reduced salt intake and to determine the biological mechanisms of salt-taste transduction.

Synapses.—The Committee supports research on genetic and cellular mechanisms of normal synapse function and on approaches to prevent or reverse deafness-caused disruptions.

Tinnitus.—The Committee urges NIDCD to investigate preventions, treatments, and cures for tinnitus, which remains the most prevalent service-connected disorder for U.S. military personnel. Continuing research on the specific neural dysfunction responsible for tinnitus and on ways to suppress hearing system hyperactivity is essential. The Committee urges additional studies of the effect on tinnitus of stimulation of the vagus nerve with an implantable electrode.

NATIONAL INSTITUTE OF NURSING RESEARCH

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$144,633,000 |
| Budget estimate, 2013 | 144,153,000 |
| Committee recommendation | 144,590,000 |

The Committee recommendation includes \$144,590,000 for NINR.

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$459,085,000 |
| Budget estimate, 2013 | 457,104,000 |
| Committee recommendation | 458,489,000 |

The Committee recommendation includes \$458,489,000 for NIAAA.

Prevention and Brief Intervention.—The Committee applauds the release of NIAAA's new youth alcohol screening guide and encourages the Institute to continue to promote alcohol screening of children and adolescents. The Committee urges NIAAA to pursue its plans to evaluate the guide both for detecting risk of alcohol problems and as an initial screen for other risky behaviors. The Committee also commends NIAAA's efforts to develop a matrix of interventions for addressing alcohol problems on college and university campuses and in the surrounding communities. Providing information on the effectiveness, cost, personnel requirements, and ease of implementation of individual and environmental interventions will assist college and university presidents and other administrators as they work to reduce harmful alcohol use among their students. The Committee recognizes the critical role of psychological research in understanding and addressing underage drinking.

NATIONAL INSTITUTE ON DRUG ABUSE

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,052,373,000 |
| Budget estimate, 2013 | 1,054,001,000 |
| Committee recommendation | 1,057,196,000 |

The Committee recommendation includes \$1,057,196,000 for NIDA.

Collaboration With the FDA.—The Committee applauds the role NIDA is playing to facilitate the growth of regulatory science at FDA's Center for Tobacco Products. The research NIDA oversees will inform policies on regulating tobacco-product advertising, labeling, marketing, constituents, ingredients, and additives. As such, the Committee commends NIDA for helping establish the

science base for regulatory policies that are expected to influence tobacco-product risk perceptions, exposures, and use patterns in the short term, and to reduce tobacco-related morbidity and mortality in the long term. In particular, the Committee recognizes that large-scale research on national, longitudinal cohorts like the Population Assessment of Tobacco and Health study will be critical for assessing the impact of FDA regulatory authority over tobacco products and help to inform future activities.

Education.—The Committee recognizes and encourages the educational efforts of NIDA to inform the public of the deleterious effects of abused substances and the life-threatening dangers of drug addiction. Adolescents and returning veterans and their families are at a high risk for drug abuse and therefore should be areas of focus.

Medications Development.—The Committee encourages NIDA to continue its efforts to develop medications to treat diseases of addiction.

Military Personnel, Veterans, and Their Families.—The Committee commends NIDA for its efforts to coordinate and support research with the Department of Veterans Affairs and other NIH Institutes on substance abuse and associated problems among U.S. military personnel, veterans, and their families. The Committee encourages NIDA to continue work in this area.

Prescription Drug Abuse.—Prescription drug abuse has been the focus of much work by NIDA and remains a high priority. The Committee encourages NIDA to maintain its comprehensive leadership role in the effort to halt this epidemic.

Translational Research.—The Committee encourages NIDA to continue its efforts to understand how genetics, age, environment, and other factors affect the use of experimental drugs and the development of addiction.

NATIONAL INSTITUTE OF MENTAL HEALTH

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,478,868,000 |
| Budget estimate, 2013 | 1,479,204,000 |
| Committee recommendation | 1,483,687,000 |

The Committee recommendation includes \$1,483,687,000 for NIMH.

Autism.—The Committee commends NIMH for its leadership on autism research and encourages the Institute to ensure that such research focuses on both genetic and environmental causes. The Committee also encourages NIMH to collaborate with NIEHS regarding environmental causation.

Combination HIV Prevention.—With recent scientific advances demonstrating the promise of biomedical HIV prevention interventions, behavioral research is needed more than ever to bolster medication adherence and treatment uptake, document real-world decisionmaking processes associated with biomedical interventions, and better understand potential unintended and/or undesired consequences of biomedical interventions. The Committee urges NIMH to support a robust HIV/AIDS behavioral prevention research agenda that examines these factors and includes operations research to optimize combination HIV prevention.

Mental Health Disparities.—Rural and minority individuals can be vulnerable to emotional disorders for a number of reasons. Greater rates of poverty among some ethnic and minority groups and rural populations, relationships between low socioeconomic status and some mental disorders, and greater risk of poverty among people with certain mental illnesses can create a vicious cycle. In addition, cultural differences in symptom expression and attitudes toward mental illness can make recognition and diagnosis of mental disorders in these populations difficult. Further, minorities living in rural areas are particularly likely to be medically underserved, facing significant barriers to getting needed mental healthcare. The Committee encourages NIMH to fund research efforts to find innovative ways to address mental health disparities in underserved populations, especially in designated Psychiatric Manpower Shortage Areas.

Premature Mortality.—The Committee continues to be concerned about premature mortality and lower life expectancy experienced by adults living with serious mental illness as a result of treatable medical conditions such as cardiovascular, pulmonary, endocrine, and infectious diseases. The Committee urges NIMH to continue its collaborations with other Institutes, including NIDDK and NHLBI, to pursue research to better understand the causes and interventions needed to address this crisis. The Committee requests an update in the fiscal year 2014 congressional budget justification.

Psychotropic Drugs and Children.—In a November 2011 letter to State Medicaid directors, HHS officials noted that children in foster care are prescribed antipsychotic medications at nearly nine times the rate of other children receiving Medicaid. A December 2011 study by GAO reported similar findings, noting that prescriptions to foster children in the States GAO analyzed were more likely to have indicators of potential health risks. The Committee is pleased that NICHD, in collaboration with NIMH, is working to better understand the impact of medications on the growth and development of children. In light of the clinical vulnerability of many children in foster care, the Committee encourages both Institutes to assign this research a high priority as well as to examine evidence-based, nonpharmaceutical interventions to treat children with behavioral and mental health issues.

NATIONAL HUMAN GENOME RESEARCH INSTITUTE

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$512,727,000 |
| Budget estimate, 2013 | 511,370,000 |
| Committee recommendation | 512,920,000 |

The Committee recommendation includes \$512,920,000 for NHGRI.

NATIONAL INSTITUTE OF BIOMEDICAL IMAGING AND BIOENGINEERING

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$338,038,000 |
| Budget estimate, 2013 | 336,896,000 |
| Committee recommendation | 337,917,000 |

The Committee recommendation includes \$337,917,000 for NIBIB.

NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE
MEDICINE

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$127,937,000 |
| Budget estimate, 2013 | 127,930,000 |
| Committee recommendation | 128,318,000 |

The Committee recommendation includes \$128,318,000 for NCCAM.

Access to Natural Product Collections.—The Committee continues to applaud NCCAM's efforts to increase access to comprehensive and professionally organized natural product libraries, which are a major source of pharmaceutical leads and therapeutic agents.

NATIONAL INSTITUTE ON MINORITY HEALTH AND HEALTH DISPARITIES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$276,179,000 |
| Budget estimate, 2013 | 279,389,000 |
| Committee recommendation | 280,236,000 |

The Committee recommendation includes \$280,236,000 for NIMHD.

Diabetes.—The Committee recognizes that more research and education are needed on the disparate effects of diabetes on minority populations. The Committee urges NIMHD to expand its research on pre-diabetes and diabetes, particularly type 2 diabetes in minority populations. This research should identify clinical, socioeconomic, geographical, cultural, and organizational factors that contribute to diabetes in such populations. Specifically, the Committee encourages NIMHD to analyze behavior and obesity.

Obesity.—The Strategic Plan for NIH Obesity Research emphasizes the need for a transdisciplinary, multifaceted approach to address the complex factors that have resulted in the growing obesity problem in the United States. The Committee supports NIH's actions to date and the findings of the task force, but remains concerned that while the essential plan and direction may be in place, a better mechanism is needed to coordinate a trans-NIH, multidisciplinary effort to address the complicated nature of the obesity problem. The Committee urges NIH to intensify its investment in obesity research, in particular in populations that are most affected—racial and ethnic minorities, low-income populations, and rural populations. The Committee again strongly recommends that NIH review the benefits of establishing a Comprehensive Center of Excellence for Obesity Research and Prevention within NIMHD to better coordinate efforts within NIH and with other Federal agencies. The Committee believes that a comprehensive center could serve to capitalize on the health disparities efforts already underway at NIMHD and leverage both intramural and extramural research programs across NIH.

JOHN E. FOGARTY INTERNATIONAL CENTER FOR ADVANCED STUDY IN
THE HEALTH SCIENCES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$69,556,000 |
| Budget estimate, 2013 | 69,758,000 |
| Committee recommendation | 69,969,000 |

The Committee recommendation includes \$69,969,000 for FIC.

The Committee continues to support FIC's efforts to foster long-term research and training partnerships between U.S. research institutions and those in developing countries.

NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$574,823,000 |
| Budget estimate, 2013 | 639,033,000 |
| Committee recommendation | 631,346,000 |

The Committee recommendation includes \$631,346,000 for NCATS. The Committee includes bill language allowing up to \$40,000,000 of this amount to be used for the Cures Acceleration Network [CAN]. The fiscal year 2012 funding level for CAN is \$9,981,000 and the budget request includes bill language allowing up to \$50,000,000 for this purpose.

The Committee is encouraged by the direction of this new Center. In particular, the Committee applauds the recent launch of a collaborative program that will match researchers with a selection of pharmaceutical industry compounds to help scientists explore new treatments for patients. NCATS has partnered initially with three pharmaceutical companies that have agreed to make dozens of their compounds available for a new initiative called Discovering New Therapeutic Uses for Existing Molecules. These are compounds that have already cleared several key steps in the development process, but were abandoned by the companies because they were not therapeutically effective on the targeted diseases. Researchers will test these compounds for their effectiveness against other diseases and conditions. The companies will provide the researchers with access to the compounds and all related research data. Participating industry partners will retain the ownership of their compounds, while academic research partners will own any intellectual property they discover through the research project with the right to publish the results of their work. This initiative encapsulates the kind of collaboration between NIH and the pharmaceutical industry that the Committee envisioned when creating NCATS.

Congenital Diaphragmatic Hernia [CDH].—The Committee encourages ORDR to support dedicated research funding directed for CDH, which affects approximately 1,600 babies in the United States every year. The Committee urges ORDR to put a high priority on research related to finding the causes of CDH and requests an update in the fiscal year 2014 congressional budget justification.

Clinical and Translational Science Awards [CTSAs].—The Committee encourages NCATS to continue the focus of the CTSA program on the full spectrum of translational research.

Dystonia.—The Committee commends ORDR's support of the Dystonia Coalition Patient Registry.

Hereditary Angioedema [HAE].—The Committee recognizes that few treatment options are available for HAE and that they are not effective for all patients. The Committee encourages ORDR to continue to reinvigorate HAE research at NIH and help identify new pathways for interventions.

Rehabilitation Research.—The Committee encourages NCATS to include rehabilitation research as a priority area of investigation.

Therapeutics for Rare and Neglected Diseases [TRND] Program.—The Committee commends NIH for establishing and growing the TRND program, and encourages NIH to fund the projects with the highest likelihood of success, regardless of disease state. In particular, the Committee commends TRND for supporting a Fragile X partnership to accelerate potential new treatments that benefit patients with this rare and neglected disease. The Committee also encourages TRND to continue supporting development of treatments for Duchenne muscular dystrophy to bridge the gap between a basic research discovery and the testing of drugs in humans.

NATIONAL LIBRARY OF MEDICINE

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$345,522,000 |
| Budget estimate, 2013 | 380,851,000 |
| Committee recommendation | 381,981,000 |

The Committee recommends \$381,981,000 for NLM. This amount includes \$8,200,000 from transfers available under section 241 of the PHS Act. Of the funds provided, \$4,000,000 is for the improvement of information systems, to remain available until September 30, 2014.

Disaster Information Management.—The Committee applauds NLM's support of the Disaster Information Management Research Center [DIMRC], which has made important contributions to the Nation's disaster preparedness and response efforts through the rapid creation of information resources for specific events; development of innovative information tools to aid in disaster preparedness, response, and recovery; the establishment of a disaster information specialty among librarians; and its participation in the Bethesda Hospital Emergency Preparedness Partnership. The Committee encourages NLM to continue to work through DIMRC with Federal and non-Federal partners, including the library community, to identify and implement best practices for maintaining access to health information before, during, and after disasters; develop innovative resources and tools to aid emergency responders and managers; collect, organize, and disseminate disaster health information; promote the development of disaster information specialists; engage the library community in disaster information management; conduct research into disaster health informatics; and develop and export community-based models of health resiliency during disasters.

OFFICE OF THE DIRECTOR

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,458,501,000 |
| Budget estimate, 2013 | 1,429,161,000 |
| Committee recommendation | 1,431,341,000 |

The Committee recommendation includes \$1,431,341,000 for the Office of the Director [OD].

The Committee includes bill language allowing up to \$165,000,000 to be used for continuation of the National Children's Study. The budget request includes \$165,000,000, but does not specify this amount in bill language. The fiscal year 2012 level is \$193,098,000.

The Committee recommendation includes \$544,930,000 for the Common Fund. This is the same amount as the budget request and the fiscal year 2012 level.

Alzheimer's Disease.—The long-term costs of Alzheimer's disease, both in terms of lives and resources, are enormous. The Committee strongly urges the Director and all relevant ICs to increase funding for research on Alzheimer's disease to the greatest extent possible within their budgets. However, the Committee strongly disagrees with the President's budget request to allocate \$80,000,000 of the PPH Fund for Alzheimer's disease research at NIH. NIH research is not an appropriate use of the PPH Fund. Additionally, the Committee believes it would set a dangerous precedent to provide specific amounts of NIH funding for individual diseases. The Committee notes that it took the same position in fiscal year 2010 when the administration proposed allocating specific levels of funding for cancer and autism research. The Committee also notes that NIH has flexibility to prioritize funding for individual diseases when the scientific opportunities and the number of high-quality applications warrant an increase. HHS took this very approach in April when it announced a transfer of \$18,300,000 of fiscal year 2012 funds within NIH, as part of an overall strategy to increase NIH's investment in Alzheimer's research by \$50,000,000.

The Committee recommends that NIH allocate resources for Alzheimer's research according to the priority research recommendations included in the National Alzheimer's Plan required under the National Alzheimer's Project Act. NIH is also encouraged to consider entering into public-private partnerships to accelerate the discovery and development of small molecule therapeutics that could potentially improve the symptoms and modify the course of Alzheimer's disease.

Career Development Awards for Clinical Researchers.—The Committee is encouraged by the Director's efforts to strengthen the biomedical research workforce and recommends the continued awarding of NIH Career Development Awards, or "K" Awards, to train clinical researchers.

Cerebral Palsy.—The Committee notes that NIH funding for research on cerebral palsy has long been disproportionately low compared with that of similar diseases that affect fewer people. The Committee urges NIH to put a higher priority on cerebral palsy in fiscal year 2013.

Chimpanzees.—The Committee commends NIH for adopting the IOM's recommendations regarding research involving chimpanzees in the December 2011 report "Chimpanzees in Biomedical and Behavioral Research: Assessing the Necessity." The IOM found that chimpanzees are "largely unnecessary" for current research. One possible exception cited by the IOM is efficacy testing of a prophylactic hepatitis C vaccine, but the report pointed to several alternatives which are currently in development that could eliminate any need for chimpanzees in this type of research. The Committee urges NIH to put a priority on developing these alternatives.

Class B Animal Dealers.—The Committee commends NIH for moving to end the use of Class B random source dealers as suppliers of dogs and cats to its grant recipients by recently announcing a ban, effective October 1, 2012, on the acquisition of cats from

Class B random source dealers. The Committee urges NIH to implement the ban on the acquisition of dogs from Class B random source dealers no later than 2015 and requests an update on this matter in the fiscal year 2014 congressional budget justification.

Collaboration With DOE.—The Committee commends NIH and DOE’s national laboratories for their collaboration on research and development projects, which have resulted in advances in bioinformatics and breakthroughs in atomic resolution structural biology. The Committee encourages the Director and ICs to continue these collaborations.

Collaboration With the FDA.—The Committee commends NIH for its participation in a NIH–FDA Joint Leadership Council to help ensure that regulatory considerations form an increasing component of biomedical research planning and that the latest science is integrated into the regulatory review process. The Director is urged to continue this joint effort to advance the translation of biomedical research discoveries into approved diagnostics and therapies as well as promote science to enhance the evaluation tools used for regulatory review.

Congenital Muscular Dystrophy.—The Committee applauds NIH for its growing support of congenital muscle disease research, particularly in congenital muscular dystrophy and congenital myopathy, which will yield returns across the muscular disorders. The Committee also commends NINDS and NIAMS for its financial support of scientific conferences to identify common therapeutic targets and action plans toward clinical trial readiness. The Committee urges NIH to continue supporting grants and other funding mechanisms to advance key congenital muscle disease initiatives for clinical trial readiness and requests an update in the fiscal year 2014 congressional budget justification on total dollars spent on congenital muscular dystrophy and congenital myopathy research.

Cystic Fibrosis [CF].—While the life expectancy of CF patients has slowly improved, the Committee remains concerned regarding the severe morbidity and early mortality associated with the condition. The Committee supports further research regarding treatments that target the underlying cause of CF, building upon the success of the recently approved new drug Kalydeco. The Committee encourages support for protein structural studies that may advance the understanding of mechanisms of action of CF drugs in clinical development and also encourages the use of new technologies to discover, develop, and characterize the effect of new treatments, including the use of airway imaging to characterize the function of the airways. The Committee also notes the potential for research in CF to have applications on a wide array of human diseases, and urges continued work to identify the applications of CF treatments to other disease states.

Doctors of Veterinary Medicine [DVMs] and Loan Repayment Programs.—The Committee recognizes the important role that DVMs play in the biomedical research enterprise because of their background and training in disease processes across all animals, including cross-species virus transmission, and animal models. As with other medical professionals, large debt upon graduation influences their choice to pursue careers in biomedical research. DVMs participate on clinical research teams and are eligible in that capacity

for loan repayments under the Clinical Research and Clinical Research for Individuals from Disadvantaged Backgrounds loan repayment programs. NIH is encouraged to make this information more widely known to potential applicants, ICs, and reviewers.

Down Syndrome.—The Committee commends NIH for its ongoing efforts to implement the NIH Down Syndrome Research Plan and for establishing the NIH Down Syndrome Consortium, which is focused on facilitating a dialogue between trans-NIH Institutes and the Down syndrome patient community. Increased Federal funding for translational research is important, and investing in Down syndrome-centered research has the potential for benefiting many other diseases and conditions such as Alzheimer's disease. The Committee encourages NIH to increase the amount invested in investigator-driven research grants and plan for the development of the Down syndrome clinical database, research registry, and biobank. NIH is also urged to establish workshops and mentoring programs to encourage young researchers and scientists to successfully pursue NIH grants for Down syndrome research.

Drug Allergy.—The Committee is concerned about the incidence of allergic reactions to drugs for debilitating and potentially fatal diseases including cancer, HIV/AIDS, cystic fibrosis, and rheumatoid arthritis. The Committee requests an update in the fiscal year 2014 congressional budget justification regarding ways in which NCI, NHLBI, NIAMS, and other relevant Institutes can collaborate with NIAID to support research on desensitization of patients who have allergic reactions to potentially life-saving medications.

Duchenne Muscular Dystrophy.—The Committee is aware of multiple governmental and nongovernmental efforts to develop patient registries containing valuable data from patients with Duchenne muscular dystrophy. Such registries are critically important to continue advancing Duchenne public health and research projects, but the Committee is concerned about the lack of coordination and potential duplication of efforts. The Committee encourages NIH, working through the Muscular Dystrophy Coordinating Committee and with the private organizations that predominantly fund these registries, to convene a meeting to discuss coordination of all the Duchenne patient registries to the extent possible. The Committee requests an update on this topic in the fiscal year 2014 congressional budget justification.

Eating Disorders.—The Committee continues to be concerned about the alarming effects of eating disorders on women's health including elevated mortality rates and associated health consequences, such as serious cardiac conditions, kidney failure, gastrointestinal disorders, and osteoporosis. The Committee urges NIH to expand, intensify, and coordinate its activities with respect to research on eating disorders and to examine the possibility of creating collaborative consortia on eating disorders research with a specific emphasis on basic and clinical investigations into the causes, diagnosis, and treatment of these conditions. The Committee requests an update on this topic in the fiscal year 2014 congressional budget justification.

Eosinophil-Associated Disorders.—The Committee is pleased that a NIAID working group is developing a research agenda on

eosinophilic disorders. The Committee requests an update in the fiscal year 2014 congressional budget justification regarding programmatic initiatives being undertaken based on the working group's recommendations. In addition to NIAID and NIDDK, the Committee urges NHLBI, NICHD, NIMH, and other relevant Institutes to participate in these efforts. Further, NIH should seek opportunities to collaborate with private sector organizations on this initiative.

False Positives and Replications.—The Committee supports NIH's effort to develop a consensus on the issues of false-positive research results. This effort will encourage policies on the publishing of replications (and nonreplications) of previous research and advance scientific knowledge.

Fragile X-Associated Disorders.—The Committee commends NIH for the NICHD-led effort to update the NIH Research Plan on Fragile X Syndrome and Associated Disorders in light of the significant progress made toward targeted drug treatments since the plan was published. The Committee urges NIH to fully implement and prioritize the updated goals and objectives. In particular, NIH is encouraged to support translational research that shows significant promise of safer and more effective treatments for Fragile X-associated disorders. The Committee also encourages NIH to work with CDC to support and coordinate Federal investments in data collection efforts related to Fragile X.

Glomerular Disease.—The Committee continues to be concerned about the impact of idiopathic nephrotic syndrome [NS] and primary focal segmental glomerulosclerosis [FSGS] within the minority community, particularly given the increasing body of research linking FSGS to gene variants predominately expressed in African Americans. The Committee urges NIMHD to collaborate with NIDDK on NS and FSGS research. The Committee commends ORDR for its support of the Nephrotic Syndrome Rare Diseases Clinical Research Network and recognizes the potential impact of this study for patients with NS and FSGS and their families. Finally, the Committee urges NIDDK to continue to support research on NS and FSGS in order to develop treatments and cures that could ultimately prevent end-stage renal disease.

Human Tissue Supply.—The Committee remains committed to matching the increased needs of NIH-funded researchers, both intramural and extramural, who rely upon human tissues and organs to study human diseases, both common and rare, and who strive to translate research advances and discoveries into treatments and cures. Furthermore, the Committee recognizes that the national demand for high-quality human biospecimens will continue to grow, as will its importance to advancing translational research across NIH. Therefore, the Committee urges the Director to expand core and trans-NIH support for its nationwide human tissue and organ procurement program.

Interstitial Cystitis [IC].—The Committee commends ORWH for its support of research on IC. The Committee understands that IC disproportionately affects women and encourages ORWH to continue to work with NIDDK to support specialized centers of research that serve as a valuable source of IC research.

Lupus.—Given the scope and impact lupus has on virtually every organ system in the body, advances in lupus research require studies that transcend multiple disciplines, including genetics, basic and applied immunology, proteomics, and therapeutics. Therefore, the Committee urges the establishment of a trans-NIH coordinating committee on lupus that could focus on developing a comprehensive NIH research strategy and identifying gaps in lupus research.

Lymphatic Research and Lymphatic Disease.—The Committee commends the trans-NIH Coordinating Committee for Lymphatic Research [CCLR] for its efforts. As the Committee has previously requested, more oversight and engagement are needed by the Director and ICs to help make meaningful advances in research of the lymphatic system and medical care for lymphatic diseases. Furthermore, in keeping with the 2007 CCLR Working Group recommendations, the Committee urges the CCLR to work cooperatively to create interdisciplinary programs to train new investigators, such as an annual primer course for doctoral and postdoctoral candidates. The Committee also expects greater involvement by NIBIB, especially in carrying forth the CCLR Working Group quantitative and molecular imaging recommendations. Finally, the Committee urges NCATS to provide representation to the CCLR.

mHealth.—New mobile and wireless health technologies, known as mHealth, are likely to have a profound impact on biomedical research and the delivery of healthcare. The Committee applauds OBSSR for leading efforts to systematically evaluate the impact of new technologies. The Committee is pleased that virtually all of the NIH Institutes and NSF are collaborating in this area.

Minority Researchers.—The Committee is deeply concerned by the findings of the recent study “Race, Ethnicity, and NIH Research Awards,” which shows a disparity in the rates at which African Americans received NIH R01 grants. The Committee looks forward to the findings of the blue ribbon panel examining this matter.

Mitochondrial Disease.—The Committee applauds the progress that NIH has made to advance research on mitochondrial disease and dysfunction. Among other activities, NICHD has worked to cultivate new researchers in the field and, in collaboration with ORDR and NINDS, continued support for the North American Mitochondrial Disease Consortium. ORDR also convened a major workshop with the participation of numerous ICs to identify scientific opportunities and barriers to research advances. The Committee requests that a strategy to implement the workshop recommendations be developed.

Mucopolysaccharidoses [MPS].—The Committee encourages NINDS, NICHD, NIDDK, NIAMS, and ORDR to continue to expand research efforts in the development of effective treatments for MPS. The Committee also urges all relevant ICs and ORDR to continue funding research consortia and conferences on MPS and other lysosomal diseases, such as the annual Lysosomal Disease Network WORLD meeting and the Gordon research conference scheduled for 2013. Finally, the Committee encourages NIAMS to continue to support investigator-initiated research focused on the skeletal complications associated with MPS.

National Children's Study.—The Committee is troubled that after appropriating nearly \$1,000,000,000 for the NCS since the first work on it began in fiscal year 2000, only a few thousand children have been enrolled and fundamental questions about the project's implementation still remain, particularly regarding the methods that will be used to recruit participants. The Committee hopes that the budget request, a 15-percent reduction below the fiscal year 2012 level, represents a positive sign that NIH intends to bring the costs of the NCS under control and spend its appropriation more efficiently.

NIH's recently announced plan to switch to a provider-based rather than a household-based recruitment strategy will help achieve some of the necessary savings and may offer scientific benefits as well. At the same time, special efforts must be made to ensure that the new strategy will not leave out disadvantaged or underrepresented groups that are most negatively affected by health disparities. Plans to collect environmental as well as biological samples also should not be sacrificed.

Most important, it remains unclear whether a provider-based approach can accommodate the original goal of constructing a national probability sample that could be generalized to the entire U.S. population. The Committee believes NIH should make every possible effort to fulfill that goal within a sustainable long-term budget.

The Committee directs the Secretary to enter into an agreement within 90 days of enactment of this act with the National Academy of Sciences to review the NCS' sampling strategy.

The Committee is also aware of the confusion and disruption caused by NIH's decision to let the Vanguard Study contracts expire—a decision that caught many academic institutions by surprise. The Committee strongly urges NIH to improve its level of communication with the research community about any future changes to the project.

National Primate Research Centers.—The Committee supports the NPRCs and expects they will receive the same level of attention in the OD that they received in the now-dissolved National Center for Research Resources.

Neurofibromatosis [NF].—The Committee continues to support efforts to increase funding and resources for NF research and treatment at multiple NIH Institutes, including NCI, NHLBI, NINDS, NICHD, NIMH, NIDCD, NIAMS, NEI, and NHGRI. The Committee requests brief updates on NF-related activities at these ICs in the fiscal year 2014 congressional budget justification.

Overlapping Chronic Pain Conditions.—The Committee recognizes that NIH has taken seriously its repeated calls for an improved and expanded research effort to better understand overlapping chronic pain conditions including chronic fatigue syndrome, endometriosis, fibromyalgia, interstitial cystitis, irritable bowel syndrome, chronic headache, temporomandibular disorders, and vulvodynia. The Committee is aware that initial progress is being made toward the development and implementation of a trans-NIH research initiative to support studies aimed at identifying etiological and mechanistic pathways of these overlapping conditions, with a state of the science meeting scheduled for summer 2012.

The Committee hopes that the meeting will lay out a clear and concrete set of recommendations for an aggressive trans-NIH research agenda. The Committee notes that the chronic pain conditions listed above are also ideal candidates for inclusion in the Patient-Reported Outcomes Measurement Information System, as many chronic pain patients use multiple individualized approaches to manage pain symptoms.

Pain.—The Committee commends NIH for its efforts so far to respond to the IOM report “Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education and Research.” For example, NIH has designated NINDS as the lead Institute for coordinating pain research efforts across the organization; selected a cadre of 11 Centers of Excellence for Pain Education; begun to develop new informational material for the public and medical professionals on pain conditions; and instituted more frequent meetings of the NIH Pain Consortium. The Committee strongly urges NIH to expand on such efforts while giving appropriate attention to overlapping chronic pain conditions that solely or disproportionately impact women. The Committee believes that pain research would be an appropriate subject for inclusion in the Common Fund, as advances in this area would benefit all Institutes. Finally, the Committee agrees with the IOM report recommendation that NIH increase financial resources and staffing support for the Pain Consortium.

Pediatric Low Grade Astrocytoma [PLGA].—The Committee is encouraged by advancements in research on slow-growing children’s brain tumors but remains concerned by the long-term physical and cognitive disabilities caused by surgery, chemotherapy, and radiation treatments for PLGA children. The Committee urges NIH to establish a special emphasis panel with a focus on identifying and validating new therapeutic targets in these tumors. Research should emphasize the development of novel preclinical models of pediatric brain tumors (both mouse and other nonmammalian models), novel drug development and testing, target identification and validation, and improved drug delivery modalities. The Committee requests an update on these topics in the fiscal year 2014 congressional budget justification.

Pregnancy Health Status.—Epidemiologic studies have shown that a woman’s health status during pregnancy is associated with her health after pregnancy, suggesting that findings in pregnancy may be a better indicator for determining a woman’s future health status than traditional risk factors. The Committee encourages NICHD, NHLBI, and NIDDK to work together to more closely study these epidemiologic findings in an effort to identify predictive markers during pregnancy for subsequent heart disease and diabetes; develop tests to evaluate health after pregnancy; and test interventions both during and after pregnancy that may mitigate risk.

Rehabilitation Research.—The Committee recognizes and supports efforts of the Blue Ribbon Panel on Medical Rehabilitation Research to identify gaps in rehabilitation research. The Committee believes that the panel’s findings warrant meaningful steps by the Director to enhance the stature of, and emphasis is on, medical rehabilitation and disability research at NIH.

Sex-Based Biology.—It is now more than 10 years since the IOM report “Exploring the Biological Contributions to Human Health: Does Sex Matter?” confirmed that biological differences between males and females affect health, burden of disease, healthcare, and health outcomes, but significant disparities continue to exist. Understanding the basic biology of the impact of sex/gender in development, diagnosis, and treatment of disease could help improve the health of women. Therefore, the Committee urges NIH to analyze sex at all levels of biomedical research, including the basic animal and cellular levels, and to form interdisciplinary teams of basic and clinical investigators interested in unraveling the biology of sex differences.

Sleep Disorders.—The Committee recognizes that sleep or circadian disorders impact conditions such as hypertension, diabetes, obesity, heart attack, and stroke. The Committee urges implementation of the National Sleep Disorders Research Plan’s recommendations for the continuation of multi-Institute research collaborations to address such conditions.

Tox21 Program.—The Committee supports NIH’s leadership role in the Tox21 program, a collaborative effort with the EPA and the FDA to adopt advanced molecular biological and computational methods in lieu of animal toxicity tests for conducting chemical risk assessments. The Committee encourages NIH to continue to expand its extramural support for the use of human biology-based experimental and computational approaches in health research to further define toxicity and disease pathways and develop tools for their integration into evaluation strategies. Extramural and intramural funding should be made available for the evaluation of the relevance and reliability of Tox21 methods and prediction tools to assure readiness and utility for regulatory purposes, including pilot studies of pathway-based risk assessments. The Committee asks NIH to provide a report on fiscal year 2012 and 2013 funding for these activities in the fiscal year 2014 congressional budget justification.

Tuberous Sclerosis Complex [TSC].—The Committee understands that TSC is the largest single genetic cause of more prevalent neurological disorders such as autism and epilepsy and therefore encourages NINDS to focus resources on new drug targets for TSC and encourages NINDS and NIMH to focus resources on clinical trials for TSC. Because TSC impacts tumor growth and health of multiple organ systems, including skin, lung, kidney, and brain, the Committee encourages NCI, NIAMS, NHLBI, NIDDK, NINDS, NICHD, and ORDR to focus resources on methods to detect and treat manifestations of TSC in these organ systems.

Underrepresented Groups in Science.—The Committee commends OBSSR for its work to establish a comprehensive and cohesive process to track the efforts of government, universities, private foundations, and associations to enhance minority participation in the sciences.

OFFICE OF AIDS RESEARCH

OAR coordinates the scientific, budgetary, legislative, and policy elements of the NIH AIDS research program. The Committee recommendation does not include a direct appropriation for OAR. In-

stead, the Director of OAR and the Director of NIH together determine the total for AIDS research within the total NIH appropriation, and the Director of OAR determines and allocates distribution of those funds to the ICs and OAR. The recommendation includes a general provision permitting the NIH Director and OAR to shift up to 3 percent of AIDS research funding among Institutes and Centers throughout the year if needs change or unanticipated opportunities arise.

The Committee commends NIH for supporting the AIDS and non-AIDS funding allocations at their current relative rates and endorses the continuation of this policy. 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.

The Committee includes bill language permitting OAR to use up to \$8,000,000 for construction or renovation of National Primate Research Centers. This amount is the same as the fiscal year 2012 level and the budget request.

BUILDINGS AND FACILITIES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$125,308,000 |
| Budget estimate, 2013 | 125,308,000 |
| Committee recommendation | 125,308,000 |

The Committee recommendation includes \$125,308,000 for NIH buildings and facilities. This funding will remain available for obligation for 5 years, as in the fiscal year 2012 bill. The budget request proposes making the funding available until expended.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

The Committee recommends \$3,472,213,000 for SAMHSA. The recommendation includes \$129,667,000 in transfers available under section 241 of the PHS Act. The comparable level for fiscal year 2012 is \$3,476,682,000 and the administration request is \$3,316,266,000. In addition, the Committee recommends transferring \$88,000,000 to SAMHSA from the PPH Fund. The total program level assumed in this bill for SAMHSA is \$3,560,213,000.

SAMHSA is responsible for supporting mental health programs and alcohol and other drug abuse prevention and treatment services throughout the country, primarily through categorical grants and block grants to States.

The Committee continues to provide funding for Programs of Regional and National Significance [PRNS] under each of SAMHSA’s statutorily created centers and directs that SAMHSA shall account for all of its PRNS funding in this manner, which shall include future budget requests. SAMHSA’s authorization states that the agency’s work to improve the provision of mental health and substance abuse services shall be established and carried out by the agency’s three centers. Therefore, SAMHSA shall account for the funding for all of its programs, contracts and activities through the accounts, budget line items, and categories identified in this act and the accompanying Senate report. The Committee requests that the fiscal year 2014 congressional justification include budgetary

and programmatic information on programs as they existed in fiscal year 2013, even if the budget request proposes a new structure or consolidation in fiscal year 2014.

The Committee is extremely concerned that the increases provided to the Community Mental Health Services Block Grant [MHBG] and SAPT Block Grant in last year’s conference report were eroded by the administration’s decision to tap 1.25 percent of both block grants for program evaluation transfers pursuant to section 241 of the PHS Act. In prior years the administration has exempted these block grants from being used as a source for these evaluation transfers. The Committee directs SAMHSA and the Department to exempt these two programs from being used as a source for PHS evaluation transfers in fiscal year 2013, as was done prior to fiscal year 2012.

CENTER FOR MENTAL HEALTH SERVICES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$953,859,000 |
| Budget estimate, 2013 | 923,895,000 |
| Committee recommendation | 968,497,000 |

The Committee recommends \$968,497,000 for mental health services. The recommendation includes \$21,039,000 in transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$45,000,000 to CMHS from the PPH Fund. The total program level assumed in this bill for CMHS is \$1,013,497,000. Included in the recommendation is funding for programs of regional and national significance, the MHBG, children’s mental health services, PATH, and PAIMI.

Programs of Regional and National Significance

The Committee recommends \$270,394,000 for PRNS within CMHS. The comparable level for fiscal year 2012 is \$275,756,000 and the administration request is \$219,550,000. In addition, the Committee recommends that \$45,000,000 be transferred to PRNS from the PPH Fund. The total program level assumed in this bill for PRNS at CMHS is \$315,394,000. These programs address priority mental health needs through developing and applying evidence-based practices, offering training and technical assistance, providing targeted capacity expansion grants, and changing the delivery system through family, client-oriented, and consumer-run activities.

Within the total provided for PRNS, the Committee recommendation includes funding for the following activities:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| CAPACITY: | | | |
| Seclusion and Restraint | 2,444 | 1,149 | 2,444 |
| Youth Violence Prevention | 23,156 | 23,156 | 12,817 |
| National Child Traumatic Stress Initiative | 45,713 | 45,713 | 48,713 |
| Children and Family Programs | 6,474 | 6,474 | 6,474 |
| Consumer and Family Network Grants | 6,224 | 4,966 | 6,224 |
| MH System Transformation and Health Reform | 10,603 | 10,603 | 10,603 |
| Project LAUNCH | 34,640 | ..... | 34,640 |
| Primary and Behavioral Healthcare Integration | 30,749 | ..... | 30,749 |
| Primary and Behavioral Healthcare Integration—PPH Fund | 35,000 | 26,004 | 35,000 |

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|--------------------------------|-----------------------------|-----------------------------|
| Suicide lifeline | 5,512 | 5,512 | 5,512 |
| Suicide lifeline—PPH Fund | 1,705 | ..... | 1,705 |
| GLS Youth Suicide Prevention (State Grants) | 29,682 | 29,374 | 29,682 |
| GLS Youth Suicide Prevention (State Grants)—PPH Fund | 5,760 | ..... | 5,760 |
| GLS Youth Suicide Prevention (Campus Grants) | 4,966 | 4,858 | 4,966 |
| GLS Youth Suicide Prevention (Campus Grants)—PPH Fund | 1,530 | ..... | 2,535 |
| AI/AN Suicide Prevention Initiative | 2,938 | 2,938 | 2,938 |
| Homelessness Prevention Programs | 30,772 | 30,772 | 30,772 |
| Minority AIDS | 9,265 | 22,770 | 9,265 |
| Criminal and Juvenile Justice Programs | 6,672 | 4,281 | 4,281 |
| Grants for Adult Trauma Screening and Brief Intervention ..... | ..... | 2,896 | 2,896 |
| SCIENCE AND SERVICE: | | | |
| GLS Suicide Prevention Resource Center | 4,948 | 4,948 | 4,948 |
| GLS Suicide Prevention Resource Center—PPH Fund | 1,005 | ..... | ..... |
| Practice Improvement and Training | 7,863 | 7,437 | 7,437 |
| Primary & Behavioral Healthcare Integration T.A. | 1,996 | ..... | 1,996 |
| Primary & Behavioral Healthcare Integration T.A.—PPH Fund ..... | ..... | 1,996 | ..... |
| Consumer & Consumer Support T.A. Centers | 1,923 | 1,923 | 1,923 |
| Minority Fellowship Program | 5,089 | 3,755 | 5,089 |
| Disaster Response | 1,052 | 2,950 | 2,950 |
| Homelessness | 2,302 | 2,302 | 2,302 |
| HIV/AIDS Education | 773 | 773 | 773 |

Child Trauma.—The Committee reiterates its strong support for the National Child Traumatic Stress Initiative [NCTSI] and its work on behalf of children, families, and communities affected by a wide range of trauma, including physical and sexual abuse, natural disasters, sudden death of a loved one, and the impact of war on military families. The Committee provides \$48,713,000 under section 582 of the PHS Act to support the continuance of the current model and mission of the NCTSI by providing grants to the National Center for Child Traumatic Stress [NCCTS] and academic, clinical, and community-based centers for the purposes of developing knowledge of best practices, offering trauma training to child-serving providers, and providing mental health services to children and families suffering from PTSD and other trauma-related disorders. The Committee is aware that SAMHSA is developing a new definition of trauma-informed services to be used by NCTSI grantees and expects to be informed of any major changes before they are implemented.

The Committee also recognizes the extraordinary value of the core data set developed by the NCCTS. Within the total provided, the Committee provides \$1,500,000 to the NCCTS for the targeted collection of new outcome data from selected NCTSI centers and related analyses and reports.

Minority Fellowship Program.—The Committee continues to be concerned that while minorities represent 30 percent of the population and are projected to increase to 40 percent by 2025, only 23 percent of recent doctorates in psychology, social work, and nursing were awarded to minorities. The Committee has, therefore, continued funding at last year's level for the Minority Fellowship Program.

Primary and Behavioral Healthcare Integration.—The Committee continues to direct SAMHSA to ensure that new Integration grants awarded for fiscal year 2013, from both discretionary and PPH

funds, are funded under the authorities in section 520K of the PHS Act.

Project LAUNCH.—The Committee intends that funds provided to Project LAUNCH not duplicate activities eligible for funding elsewhere in the Department. The Committee reiterates its intention that funds provided to this program focus on mental health promotion and promotion strategies for children aged 0 to 8.

Seclusion and Restraint.—The Committee recommends \$2,444,000 for seclusion and restraint activities at CMHS. The Committee is deeply concerned that a recent Department of Education report showed that tens of thousands of students with disabilities are physically restrained in school systems across the country. There are also widespread media reports of persons with mental illnesses and developmental disabilities living in congregate care facilities who are subject to excessive use of seclusion and restraint causing psychological trauma, serious physical injury, and even death. The Committee urges SAMHSA to partner with other Federal agencies to reduce and ultimately eliminate the use of seclusion and restraints in institutional, community, and educational settings, and to promote evidence-based alternatives to restraint and seclusion, including the use of positive behavioral interventions and supports.

Suicide Prevention in Indian Populations.—The Committee remains concerned about the high incidence of drug and alcohol abuse and suicide in American Indian populations. SAMHSA is encouraged to continue its efforts in providing culturally competent suicide prevention training courses to selected gatekeepers in Indian country. These courses should teach community leaders, school personnel, and families how to identify and talk with at-risk individuals to motivate them to seek help. Courses should also include mental health support services information tailored to the specific geographical location of the participants in each program. The Committee further urges SAMHSA to collaborate with the Indian Health Service to identify priority communities and help ensure sustainability within American Indian/Alaska Native communities.

Community Mental Health Services Block Grant

The Committee recommends \$479,756,000 for the MHBG. The comparable fiscal year 2012 funding level and the administration request is \$459,756,000. The recommendation includes \$21,039,000 in transfers available under section 241 of the PHS Act.

The MHBG distributes funds to 59 eligible States and territories through a formula based on specified economic and demographic factors. Grant applications must include an annual plan for providing comprehensive community mental health services to adults with a serious mental illness and children with a serious emotional disturbance.

The Committee provides an increase to the MHBG in recognition of the severe budget cuts taking place to State and local mental health services and facilities nationwide. At the same time, public mental health systems are reporting an increase in demand for services. The MHBG is the primary source of financial support for evidence-based, comprehensive services for low-income and unin-

sured persons living with serious mental illnesses. Increased funding for this safety net program is needed to meet the growing demand for services resulting from the economic downturn, as well as the mental healthcare needs of returning Iraq and Afghan war veterans and their families.

Children's Mental Health Services

The Committee recommends \$117,315,000 for the children's mental health services program. This amount is the same as the comparable fiscal year 2012 level. The administration request is \$88,557,000. This program provides grants and technical assistance to support a network of community-based services for children and adolescents with serious emotional, behavioral, or mental disorders. Grantees must provide matching funds and services must be coordinated with the educational, juvenile justice, child welfare, and primary healthcare systems.

The Committee rejects the administration's proposed cut to this important program. The Committee notes that in the United States every year 5,000 young people between the ages of 14 and 24 commit suicide, and 600,000 make an attempt that is serious enough to require an emergency room visit. Furthermore, the Committee understands that 75 percent of psychiatric illness occurs before the age of 24. This public health crisis is exacerbated by the fact that there are only 7,500 child and adolescent psychiatrists and 3,500 child psychologists nationwide to treat this vulnerable population. The Committee encourages SAMHSA to seek innovative means to increase the number of children's mental health professionals, including efforts to develop bachelor's degree and master's level training curricula focusing on evidence-based interventions.

Projects for Assistance in Transition From Homelessness

The Committee recommends \$64,794,000 for PATH. This amount is the same as the comparable fiscal year 2012 level and the administration request. PATH addresses the needs of individuals with serious mental illness who are experiencing homelessness or are at risk of homelessness. Funds are used to provide an array of services, such as screening and diagnostic services, emergency assistance, case management, and referrals to the most appropriate housing environment.

Protection and Advocacy for Individuals With Mental Illness

The Committee recommends \$36,238,000 for PAIMI. This amount is the same as the comparable fiscal year 2012 funding level and the administration request. This program helps 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, including in their own homes. Funds are allocated to States according to a formula based on population and relative per capita incomes.

Mental Health State Prevention Grants

The Committee recommendation does not include funding requested by the administration to create the Mental Health State Prevention Grant program. The administration requests

\$55,000,000 for this program, which would promote the wellness of children, youth, and young adults up to age 25. Rather than create a new program, the Committee has provided increases to the MHBG and to the SAPT Block Grant.

CENTER FOR SUBSTANCE ABUSE TREATMENT

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$2,200,574,000 |
| Budget estimate, 2013 | 2,187,270,000 |
| Committee recommendation | 2,191,145,000 |

The Committee recommends \$2,191,145,000 for substance abuse treatment programs, including programs of regional and national significance and the substance abuse prevention and treatment block grant to the States. The recommendation includes \$81,200,000 in transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$25,000,000 to CSAT from the PPH Fund. The total program level assumed in this bill for CSAT in fiscal year 2013 is \$2,216,145,000.

Programs of Regional and National Significance

The Committee recommends \$370,813,000 for PRNS within CSAT. The comparable fiscal year 2012 level is \$400,242,000 and the administration request is \$334,139,000. The recommendation includes \$2,000,000 in transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$25,000,000 to PRNS from the PPH Fund. The total program level assumed in this bill for PRNS in fiscal year 2013 is \$395,813,000.

Programs of regional and national significance include activities to increase capacity by implementing service improvements using proven evidence-based approaches as well as science-to-services activities that promote the identification of practices thought to have potential for broad service improvement.

Within the total provided for PRNS, the Committee recommendation includes funding for the following activities:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|---|-----------------------------|--------------------------|--------------------------|
| CAPACITY: | | | |
| Opioid Treatment Programs/Regulatory Activities | 8,886 | 8,886 | 8,886 |
| SBIRT | 28,187 | 28,187 | 28,187 |
| SBIRT—Section 241 transfer (non-add) | 2,000 | 2,000 | 2,000 |
| SBIRT—PPH Fund | 25,000 | 30,000 | 25,000 |
| TCE—General | 27,980 | 13,256 | 13,256 |
| Pregnant and Postpartum Women | 15,970 | 15,970 | 15,970 |
| Strengthening Treatment Access and Retention | 1,672 | 1,000 | 1,000 |
| Recovery Community Services Program | 2,445 | 2,445 | 2,445 |
| Access to Recovery | 98,268 | 93,776 | 87,666 |
| Children and Families | 30,620 | 29,678 | 29,678 |
| Treatment Systems for Homeless | 41,571 | 41,571 | 41,571 |
| Minority AIDS | 65,863 | 52,359 | 65,863 |
| Criminal Justice Activities | 66,903 | 65,135 | 65,135 |
| SCIENCE AND SERVICE: | | | |
| Addiction Technology Transfer Centers | 9,064 | 8,081 | 9,064 |
| Minority Fellowship Program | 546 | 546 | 546 |
| Special Initiatives/Outreach | 2,267 | 1,436 | 1,436 |

*Addiction Technology Transfer Centers [ATTCs].—*The Committee continues to direct SAMHSA to ensure that ATTCs main-

tain a primary focus on addiction treatment and recovery services in order to strengthen the addiction workforce. As more individuals become eligible for substance abuse services through Medicaid and private insurance, the ATTC network is critical to ensure there are enough skilled workers to meet the demand in substance use disorder services.

Addiction Workforce.—As the provision of quality substance use disorder services is dependent on an adequate, qualified workforce and SAMHSA is the lead Federal agency charged with improving these services, the Committee directs SAMHSA to continue to focus on developing the addiction workforce and identifying ways to address the current and future workforce needs of the addiction prevention, treatment, and recovery fields.

Drug Treatment Courts.—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. In addition, the Committee urges CSAT to ensure that State substance abuse agencies are eligible to apply for all drug treatment court grant programs in its portfolio. The Committee expects CSAT to ensure that non-State substance abuse agency applicants for any drug treatment court grant in its portfolio continue to demonstrate evidence of working directly and extensively with the corresponding State substance abuse agency in the planning, implementation, and evaluation of the grant.

Hepatitis Testing.—The Committee notes the high incidence of hepatitis among injection drug users and urges SAMHSA to implement viral hepatitis testing as a standard of care in drug-treatment programs, consistent with the HHS Action Plan for the Prevention, Care and Treatment of Viral Hepatitis. The Committee encourages SAMHSA to use established best practices for infectious disease testing, including rapid tests.

HIV Testing.—The Committee urges SAMHSA to expand voluntary routine HIV-testing services at substance abuse and mental health treatment clinics, consistent with the National HIV/AIDS Strategy Implementation Plan. The Committee requests an update on the implementation of these activities in SAMHSA's fiscal year 2014 congressional budget justification.

Minority AIDS.—The Committee is concerned by SAMHSA's proposal to transfer funds to CMHS from the Minority Aids Initiative [MAI] administered by CSAT. According to NIDA, 1 in 4 of those living with HIV in 2009 reported use of alcohol or drugs at a level that warranted treatment. In addition, research shows alcohol and drug use are major risk factors for HIV/AIDS. The Committee directs SAMHSA to maintain funding for CSAT's MAI and to focus on building capacity and outreach efforts to individuals with, or at risk of developing, a primary substance use disorder and to improve efforts to identify such individuals to prevent the spread of the disease.

Oral Fluid Testing.—The Committee commends SAMHSA for updating its substance abuse testing guidelines to include oral fluid and encourages the agency to continue to advance oral fluid testing guidelines.

Screening, Brief Intervention, and Referral to Treatment [SBIRT].—The Committee continues to direct SAMHSA to ensure that funds provided for SBIRT are used for existing evidence-based models of providing early intervention and treatment services to those at risk of developing substance abuse disorders.

Substance Abuse Prevention and Treatment Block Grant

The Committee recommends \$1,820,332,000 for the SAPT block grant. The comparable funding level for fiscal year 2012 is \$1,800,332,000. The administration request is \$1,448,630,000. The recommendation includes \$79,200,000 in transfers available under section 241 of the PHS Act. The block grant provides funds to States to support alcohol and drug abuse prevention, treatment, and rehabilitation services. Funds are allocated to the States according to a formula.

The Committee rejects, as it did last year, the administration’s request for a waiver of the statutory requirement that 20 percent of the SAPT block grant be set aside for substance abuse prevention. The administration proposes to reallocate these set-aside funds to a new Substance Abuse State Prevention Grant program. The Committee remains concerned that creating another State grant program with new requirements would represent an unnecessary and burdensome approach and would not support services being delivered on a continuum of prevention, treatment, and recovery support services.

Substance Abuse State Prevention Grants

As explained above, the Committee recommendation does not include funding to create Substance Abuse State Prevention Grants. The administration request is \$404,501,000 for this program, which did not receive funding in fiscal year 2012.

CENTER FOR SUBSTANCE ABUSE PREVENTION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$185,956,000 |
| Budget estimate, 2013 | 58,877,000 |
| Committee recommendation | 184,433,000 |

The Committee recommends \$184,433,000 for CSAP, the sole Federal organization with responsibility for improving accessibility and quality of substance abuse prevention services.

Programs of Regional and National Significance

The Committee provides \$184,433,000 for PRNS within CSAP. Through these programs, CSAP supports: development of new practice knowledge on substance abuse prevention; identification of proven effective models; dissemination of science-based intervention information; State and community capacity building for implementation of proven, effective substance abuse prevention programs; and programs addressing new needs in the prevention system.

Within the total provided for PRNS, the Committee recommendation includes funding for the following activities:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|--------------------------------|-----------------------------|-----------------------------|
| CAPACITY: | | | |
| Strategic Prevention Framework/Partnership for Success | 109,754 | ..... | 109,754 |
| Mandatory Drug Testing | 5,196 | 4,906 | 4,906 |
| Minority AIDS | 41,307 | 41,307 | 41,307 |
| Sober Truth on Preventing Underage Drinking (STOP Act)—PPH Fund ..... | ..... | 7,000 | ..... |
| Sober Truth on Preventing Underage Drinking (STOP Act) | 6,987 | ..... | 7,000 |
| SCIENCE AND SERVICE: | | | |
| Fetal Alcohol Spectrum Disorder | 9,802 | 1,000 | 9,802 |
| Center for the Application of Prevention Technologies | 8,059 | 7,511 | 7,511 |
| Science and Service Program Coordination | 4,780 | 4,082 | 4,082 |
| Minority Fellowship Program | 71 | 71 | 71 |

The Committee recommendation includes funding for the Strategic Prevention Framework State Incentive Grant/Partnerships for Success [SPFSIG/PFS] programs at last year's level. The Committee is disappointed that the agency did not follow its direction in last year's statement of the managers regarding these programs. Although Congress rejected the administration's proposed cut for fiscal year 2012 and level-funded the SPFSIG/PFS programs, SAMHSA did not use funding from expiring grants to reinvest in new SPFSIG/PFS awards, as envisioned by Congress. Rather, SAMHSA proposed a new 1-year Prevention Achievement Grant program, which was not adequately described and for which no funding was explicitly appropriated by Congress. The Committee believes that by issuing 1-year grants and making frequent changes to its prevention programs, SAMHSA makes it difficult for States to plan and build capacity. In addition, with youth drug use rates increasing and perceptions of harm decreasing, especially for marijuana, SAMHSA's lack of long-term vision for prevention funding is deeply troubling.

The Committee reiterates its strong support for SPFSIG/PFS programs, which are promising approaches to preventing the onset and reducing the progression of substance abuse, including childhood and underage drinking. The Committee intends that continuation awards for SPFSIG/PFS grantees should be made at amounts no less than what grantees received in fiscal year 2012. Furthermore, SAMHSA shall use any additional funding to provide new grants under SPFSIG/PFS. The Committee intends that these new grants shall be awarded as the program was originally designed prior to fiscal year 2011, with similar eligible applicants, a multiyear project period, reliance on epidemiological workgroups, and financial incentives for grantees that meet performance targets. The Committee expects SAMHSA to award these multiyear grants on an annual, incremental basis rather than fully funding them in fiscal year 2013.

The Committee recognizes substance abuse prevention as a unique and distinct field and urges SAMHSA to promote programming consistent with this finding. The Committee intends that funds specifically appropriated for bona fide substance abuse and underage drinking prevention purposes shall not be consolidated with, reallocated to, or used for any other programs or initiatives in SAMHSA which do not have youth drug and underage alcohol

abuse as a primary purpose, even if these other programs may have secondary effects on these goals.

Underage Drinking.—The Committee provides a total of \$5,000,000 for Sober Truth on Preventing Underage Drinking [STOP] Act Community Based Coalition Enhancement Grants. The Committee understands that building on the infrastructure of current and past Drug Free Communities grantees is the most effective way to invest limited Federal dollars to deal with underage drinking issues at the community level.

HEALTH SURVEILLANCE AND PROGRAM SUPPORT

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$136,293,000 |
| Budget estimate, 2013 | 119,657,000 |
| Committee recommendation | 128,138,000 |

The Committee recommends \$128,138,000 for health surveillance and program support activities. The recommendation includes \$27,428,000 in transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$18,000,000 to this account from the PPH Fund. The total program level assumed in this bill for health surveillance and support is \$146,138,000.

This activity supports Federal staff and the administrative functions of the agency. It also provides funding to SAMHSA’s surveillance and data collection activities, including national surveys such as the National Survey on Drug Use and Health.

The Committee directs SAMHSA to provide within 90 days of enactment of this act a report to Congress that describes: SAMHSA’s proposed plan for implementing its Behavioral Health Quality Plan, including any proposed changes or additions to current outcome data measures for both discretionary grants and the SAPT Block Grant, including the use of dashboards; a description of the extent to which SAMHSA is coordinating the development of outcome measures with other HHS agencies, specifically CMS; and the extent to which SAMHSA has sought and received stakeholder input on changes to data collection and outcome measures.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$369,053,000 |
| Budget estimate, 2013 | 334,357,000 |
| Committee recommendation | 364,053,000 |

The Committee provides \$364,053,000 for AHRQ through transfers available under section 241 of the PHS Act. In addition, the Committee recommends transferring \$12,000,000 to AHRQ from the PPH Fund. The total program level assumed in this bill for AHRQ is \$376,053,000.

AHRQ was established in 1990 to enhance the quality, appropriateness and effectiveness of health services, as well as access to such services. In order to fulfill this mission, AHRQ conducts, supports, and disseminates scientific and policy-relevant research on topics such as reducing medical errors, eliminating healthcare disparities, using information technology, and comparing the effectiveness of drugs and medical procedures. AHRQ-supported research provides valuable information to researchers, policymakers,

healthcare providers, and patients on ways to improve our Nation’s health system and make healthcare more affordable.

HEALTH COSTS, QUALITY, AND OUTCOMES

The Committee provides \$236,331,000 for research on health costs, quality, and outcomes [HCQO]. The comparable funding level for fiscal year 2012 is \$235,768,000 and the administration request is \$206,635,000. In addition, the Committee recommends that \$12,000,000 be transferred to HCQO from the PPH Fund. The total program level assumed in this bill for HCQO is \$248,331,000. The HCQO research activity is focused upon improving clinical practice, improving the healthcare system’s capacity to deliver quality care, and tracking progress toward health goals through monitoring and evaluation.

Within the total provided for HCQO, the Committee recommendation includes funding for the following activities:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Patient-Centered Health Research | 16,600 | 10,000 | 10,000 |
| Prevention/Care Management | 15,904 | 15,904 | 15,904 |
| Prevention/Care Management—PPH Fund | 12,000 | 12,000 | 12,000 |
| Value | 3,730 | 3,614 | 3,614 |
| Health Information Technology | 25,572 | 25,572 | 25,572 |
| Patient Safety | 65,585 | 62,614 | 66,614 |
| Crosscutting Activities Related to Quality, Effectiveness and Efficiency | 108,377 | 88,931 | 114,627 |

Within the Prevention portfolio, the Committee recommends that \$5,000,000 from the PPH Fund be transferred to support the Research Centers for Excellence in Clinical Preventive Services. The Committee also recommends \$7,000,000 in PPH Fund transfers to support the work of the USPSTF.

Broadening the Evidence Base.—AHRQ’s research portfolio focuses predominantly on patient safety and healthcare quality. The Committee urges AHRQ to develop a more balanced research agenda, supporting all aspects of healthcare research outlined in its statutory mission, including: the cost and utilization of, and access to, healthcare; and the ways in which healthcare services are organized, delivered, and financed.

Healthcare Delivery Systems.—The Committee notes that identifying and disseminating improvements to the design of hospital rooms and healthcare facilities has the potential to prevent medical errors, reduce associated costs, and save lives. Within the Patient Safety portfolio, the Committee includes \$4,000,000 for research grants authorized by section 933 of the PHS Act. These grants will provide for the creation of multi-disciplinary teams, consisting of patients and their families, clinicians, technology experts, and engineers, to develop and test interventions that improve the safety of healthcare services as well as improve accountability and value. This is a new activity that was not funded in fiscal year 2012. The administration did not request funding for this activity.

Investigator-Initiated Research.—The Committee continues to prioritize investments in investigator-initiated research, which forms the backbone of AHRQ’s ability to improve healthcare with creative and innovative approaches to ongoing and emerging

healthcare issues. Within the Crosscutting Activities portfolio, the Committee provides \$43,364,000, the same amount as the fiscal year 2012 level, for investigator-initiated research. The administration request is \$29,259,000 for this research. The recommended funding level will allow AHRQ to support new investigator-initiated research grants to advance discovery and the free marketplace of ideas.

Maternal-Fetal Medicine.—The practice of maternal-fetal medicine has made great strides. The Committee encourages AHRQ, in collaboration with NICHD, to conduct clinical comparative effectiveness research to guide best practices and clinical management. Special emphasis should be placed on the use of progesterone, when to use it and in whom, as well as on research that will provide guidance on optimal timing of delivery for maternal and fetal conditions.

Medication Therapy Management.—The Committee recognizes the importance of medication therapy management [MTM] as a critical component of primary care services. In order to further integrate MTM services into primary care, the Committee encourages AHRQ to perform a systematic review that includes: the breadth and context of MTM services, a synthesis of what is currently known about the comparative effectiveness of MTM programs and program components, and a delineation of the gaps in the existing evidence base.

Moving Research Into Practice.—Health services research has great potential to improve health and healthcare when widely disseminated and used. The Committee continues to support AHRQ's research translation activities, including practice-based research centers and learning networks that are designed to better understand healthcare delivery and quickly move the best available research and decisionmaking tools into healthcare practice.

Quality Measure Development.—The Committee notes that there are significant gaps in the quality measures that determine whether Americans are receiving good healthcare. Strong, patient-centered quality measures that fill in current gaps will enable the evaluation and reduction of geographic variations in care quality and health disparities while improving the delivery of healthcare services, patient health outcomes, and population health. For this reason, the Committee recommendation includes \$4,000,000 within the Crosscutting portfolio for AHRQ, in consultation with CMS, to develop quality measures as authorized under section 931 of the PHS Act. This is a new activity that was not funded in fiscal year 2012. The administration did not request funding for this activity.

Scientific Freedom in Contracted Research.—The Committee continues to be concerned that contractual prior restraint clauses on the publication of research may inadvertently stifle scientific freedom and hinder the dissemination of findings that can inform health policymaking. The Committee urges AHRQ to ensure that researchers have the opportunity to publish research findings in peer-reviewed journals without unreasonable restrictions to allow greater review and input from the scientific community.

Training Grants.—The Committee is concerned about declines in the number of, and funding for, training grants for the next generation of researchers. Within the Crosscutting Activities portfolio,

the Committee provides \$2,250,000 for new, competing pre- and post-doctoral training grants. The comparable funding level for fiscal year 2012 is \$1,500,000. The administration request did not include funding for new training grants.

MEDICAL EXPENDITURES PANEL SURVEYS

The Committee provides \$59,300,000, the same as the administration request and the comparable funding level for fiscal 2012, for Medical Expenditure Panel Surveys [MEPS]. These surveys collect detailed information annually from households, healthcare providers, and employers regarding how Americans use and pay for healthcare. The data from MEPS are used to develop estimates of healthcare utilization, expenditures, sources of payment, and the degree of health insurance coverage of the U.S. population.

PROGRAM SUPPORT

The Committee recommends \$68,422,000 for program support. This amount is the same as the administration request. The comparable funding level for fiscal year 2012 is \$73,985,000. This activity funds the overall management of AHRQ, including salaries, benefits, and overhead costs such as rent. The Committee recommendation will support 305 FTEs, the same level as fiscal year 2012. The Committee recommendation does not include funding for tenant improvement costs associated with AHRQ's relocation. As requested by the administration, funding associated with a new long-term lease for AHRQ is included in the Office of the Secretary account.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

GRANTS TO STATES FOR MEDICAID

| | |
|--------------------------------|-------------------|
| Appropriations, 2012 | \$184,279,110,000 |
| Budget estimate, 2013 | 178,791,197,000 |
| Committee recommendation | 178,791,197,000 |

The Committee recommends \$178,791,197,000 in mandatory funding for grants to States for Medicaid.

The fiscal year 2013 recommendation excludes \$90,614,082,000 in fiscal year 2012 advance appropriations for fiscal year 2013. As requested by the administration, \$106,335,631,000 is provided for the first quarter of fiscal year 2014.

The Medicaid program provides medical care for eligible low-income individuals and families. It is administered by each of the 50 States, the District of Columbia, Puerto Rico, and the territories. Federal funds for medical assistance are made available to the States according to a formula that determines the appropriate Federal matching rate for State program costs. This matching rate is based on the State's average per capita income relative to the national average and cannot be less than 50 percent.

PAYMENTS TO HEALTHCARE TRUST FUNDS

| | |
|--------------------------------|-------------------|
| Appropriations, 2012 | \$230,741,378,000 |
| Budget estimate, 2013 | 251,718,000,000 |
| Committee recommendation | 251,718,000,000 |

The Committee recommends \$251,718,000,000 in mandatory funding for payments to healthcare trust funds.

This entitlement account includes the general fund subsidy to the Federal Supplementary Medical Insurance Trust Fund for Medicare part B benefits and for Medicare part D drug benefits and administration, plus other reimbursements to the Federal Hospital Insurance Trust Fund for part A benefits and related administrative costs that have not been financed by payroll taxes or premium contributions.

The Committee provides \$189,520,000,000 for the Federal payment to the Supplementary Medical Insurance Trust Fund. This payment provides matching funds for premiums paid by Medicare part B enrollees. The Committee further provides \$60,744,000,000 for the general fund share of benefits paid under Public Law 108–173, the Medicare Prescription Drug, Improvement and Modernization Act of 2003. As in previous years, the Committee includes bill language requested by the administration providing indefinite authority for paying the general revenue portion of the part B premium match and provides resources for the part D drug benefit program in the event that the annual appropriation is insufficient.

The Committee recommendation also includes \$424,000,000 to be transferred to the Supplementary Insurance Trust Fund as the general fund share of part D administrative expenses. The Committee recommendation includes \$610,000,000 in reimbursements to the HCFAC fund.

PROGRAM MANAGEMENT

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$3,820,112,000 |
| Budget estimate, 2013 | 4,820,808,000 |
| Committee recommendation | 4,370,112,000 |

The Committee recommends \$4,370,112,000 for CMS program management.

Research, Demonstrations, and Evaluations

The Committee recommends \$23,900,000 for research, demonstrations, and evaluation activities. The comparable level for fiscal year 2012 is \$21,160,000. The administration requests \$24,600,000, funded within program operations. The Committee includes sufficient funding to fulfill the President's request for the Medicare Current Beneficiaries Survey, the Research Data Assistance Center, public use data files, and Medicaid Analytic Data.

CMS research and demonstration activities expand efforts that improve the efficiency of payment, delivery, access, and quality of the Medicare and Medicaid programs.

Food Allergies.—In the United States, a patient visits an emergency department every 3 minutes for the treatment of a food-related allergic reaction. The Committee believes that proper management of food allergies could improve patient outcomes, reduce costs, and decrease the incidence of preventable death. The Committee encourages CMS to consider food allergy patients in other disease management pilot programs.

Program Operations

The Committee recommends \$3,156,045,000 for program operations. The comparable funding level for fiscal year 2012 is \$2,608,785,000 and the budget request is \$3,618,487,000.

The program operations account covers a broad range of activities including claims processing and program safeguard activities performed by Medicare contractors. These contractors also provide information, guidance, and technical support to both providers and beneficiaries.

The Committee includes additional funding for program operations above the fiscal year 2012 level to help support the work required of CMS to implement PPACA.

PPACA requires CMS in fiscal year 2013 to support States as they attempt to meet the January 1, 2014, deadline for a viable State-based health insurance exchange. The Committee recommendation includes funding to provide technical assistance to States, design and build the Federal fall-back exchange, educate Americans on the availability of subsidies, and develop systems to determine eligibility and protect the private health information of those who apply for health insurance through an exchange.

The Committee recommendation also includes increased funding for the National Medicare Education program. This funding supports beneficiary materials, Internet sites, contact centers and support services. The Committee notes that as the baby boom generation ages into Medicare, the population of Medicare beneficiaries will grow by 36 percent by the end of this decade, according to Census estimates. With a record number of Americans signing up for Medicare benefits, the Committee recognizes the need to help them set up their Medicare benefit plans and to modify beneficiary materials and support systems according to the ways baby boomers are most accustomed to accessing information.

Community First Choice Option.—The Committee commends CMS on the completion of the final rule for the implementation of the Community First Choice Option. The Committee directs CMS to provide information to State Medicaid Directors about the availability of the Community First Choice Option as a way to help States meet their obligations to expand opportunities for home and community based services for people with disabilities under the Supreme Court's decision in *Olmstead v. L.C.* and the Americans with Disabilities Act.

Continuous Oxygen Therapy.—The Committee continues to encourage innovative and more cost-effective methods for treating hard-to-heal wounds. The Committee appreciates CMS' interest in commissioning a technology assessment through AHRQ to review evidence on continuous oxygen delivery.

Health Insurance Literacy.—The Committee recognizes that to most effectively implement PPACA in medically underserved and at-risk communities, individuals with limited literacy and numeracy skills will need special attention. The Committee encourages CMS to work with experts to develop effective programs to educate these consumers on their rights and the resources available to help them access insurance coverage.

Healthcare Integrated General Ledger and Accounting System [HIGLAS].—The Committee is pleased with the continued progress

being made to develop and fully implement HIGLAS using ongoing funding from this appropriation. Over the past 7 years, at least \$467,000,000 in additional interest has been earned in the Medicare Trust Funds as a result of HIGLAS implementation. With deployment to 14 fee-for-service Medicare contractors and 19 Medicare administrative contractor sites, the program is on schedule and within its budget. The Committee expects deployment to continue as the remaining contractor sites are brought onto the system, achieving 100 percent compliance. The Committee requests that the fiscal year 2014 budget justification include lessons learned in the implementation of this program that may serve as a guide for other similar efforts to implement automated systems using commercially available software in the Federal Government.

Hepatitis Screening.—An estimated two-thirds of chronic hepatitis C cases are baby boomers who are currently beginning to enroll in Medicare in large numbers. Viral hepatitis is very costly to treat when diagnosed in the later stages of the disease. The Committee believes that opt-out hepatitis B and C screenings at the Welcome to Medicare physical exam would identify a significant number of beneficiaries with asymptomatic liver disease and reduce Medicare costs overall. The Committee encourages CMS to work with CDC to determine the prevalence of viral hepatitis in the soon-to-enroll Medicare population and to develop a cost-benefit analysis on this type of screening.

Pediatric Dental Services.—Although virtually all dental disease is fully preventable, tooth decay remains the most common chronic illness among children and oral healthcare is the most prevalent unmet healthcare need among children. Currently, 34 States allow dental hygienists to provide dental care outside of a dental office without a prior exam or pre-authorization by a dentist. The Committee urges CMS to update Medicaid dental regulations to reflect how dental services are currently delivered in the majority of the country.

Rural Hospital Flexibility.—In 1997, Congress created the Medicare Rural Hospital Flexibility Program for the purposes of improving access to hospital and other health services for rural residents. For those hospitals that did not meet the requirement for a minimum distance to another hospital or critical access hospital [CAH] of more than a 35-mile drive, or a 15-mile drive based on mountainous terrain or areas with only secondary roads, the program allowed a State to waive the distance requirement for one or more facilities designated as a necessary provider. The Committee requests a list of all CAH facilities grandfathered into the program through the State waiver system.

Vaccinations.—The Committee is concerned that the majority of healthcare workers, who are at high risk of contracting infectious disease, do not get regularly recommended vaccinations. In addition, adult vaccination rates are particularly low for minority groups. The Committee supports efforts by CMS to incorporate seasonal influenza vaccination rates into hospital payment updates and performance metrics and urges CMS to require Medicare-certified hospitals to offer the seasonal influenza vaccine to healthcare workers.

State Survey and Certification

The Committee recommends \$375,203,000, the same as the fiscal year 2012 level, for State survey and certification activities. The administration's request is \$387,353,000.

Survey and certification activities ensure that institutions and agencies providing care to Medicare and Medicaid beneficiaries meet Federal health, safety, and program standards. On-site surveys are conducted by State survey agencies, with a pool of Federal surveyors performing random monitoring surveys.

The Committee encourages CMS to complete its efforts to collect uniform staffing data based on payroll extracts from skilled nursing facilities and nursing facilities reimbursed by Medicare and Medicaid. The Committee requests an update from CMS on its progress in the fiscal year 2014 budget justification.

High-Risk Insurance Pools

The Committee includes \$44,000,000, the same as the fiscal year 2012 level, for high-risk insurance pools. The budget request is \$22,004,000.

Federal Administration

The Committee recommends \$770,964,000, the same as the fiscal year 2012 level, for Federal administration costs. The budget request is \$792,964,000.

HEALTH CARE FRAUD AND ABUSE CONTROL

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$309,790,000 |
| Budget estimate, 2013 | 610,000,000 |
| Committee recommendation | 610,000,000 |

The Committee recommends \$610,000,000, to be transferred from the Medicare trust funds, for health care fraud and abuse control [HCFAC] activities.

The Committee recommendation includes a base amount of \$311,000,000 and an additional \$299,000,000 through a budget cap adjustment authorized by section 251(b) of the Balanced Budget and Emergency Deficit Control Act of 1985.

This amount, in addition to the \$1,296,665,000 in mandatory monies for these activities, will provide a total of \$1,906,665,000 for HCFAC activities in fiscal year 2013.

Improper Payments.—The Committee is encouraged by the work of the Medicare fee-for-service [FFS] Recovery Audit Contractor [RAC] program. While there is clear value in rectifying improper payments, the Committee feels strongly that a larger benefit of the Medicare FFS RAC program lies in its ability to help identify potential vulnerabilities in the payment system. The list of potential vulnerabilities, which CMS identifies from RAC reports, allows CMS to make system changes that can prevent improper payments in the future. Unfortunately, in 2010, a GAO report found that CMS has no formal process in place to ensure that RAC-identified vulnerabilities are addressed. The Committee directs CMS to include in its annual report to Congress an accounting of reported vulnerabilities each fiscal year broken down by type of improper payment, including the number of vulnerabilities identified; the fi-

nancial cost of the vulnerabilities reported; the number that have been addressed with a change to the system; the number that have a system change identified but are waiting for the change to be made; the number that CMS has decided a system change is unfeasible; and the number that are waiting CMS review.

Senior Medicare Patrol [SMP].—The Committee strongly supports the SMP, administered by ACL with historical financial assistance from CMS. The Committee is concerned that the return on investment [ROI] calculation included in the performance metrics of the program does not adequately reflect outcome data on SMP fraud referrals. The Committee requests that a more accurate ROI calculation be developed for this important program. The Committee further directs CMS, ACL, DOJ, and HHS OIG to work to improve the process of informing beneficiaries and volunteers when their tips result in a conviction, a recovery, or a change to Medicare policies.

Transparency Reporting.—The Committee urges CMS to ensure transparency and accountability through the accurate reporting of transfers of value from drug, device, and group purchasing industries to physicians and teaching hospitals. The Committee encourages CMS to finalize procedures to comply with section 6002 of PPACA in time to require data collection in 2013. The Committee supports the statutory goal of posting payment reports information on a public Web site no later than September 30, 2014.

ADMINISTRATION FOR CHILDREN AND FAMILIES

PAYMENTS TO STATES FOR CHILD SUPPORT ENFORCEMENT AND FAMILY SUPPORT PROGRAMS

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$2,847,514,000 |
| Budget estimate, 2013 | 2,756,485,000 |
| Committee recommendation | 2,756,485,000 |

The Committee recommends \$2,756,485,000 in fiscal year 2013 mandatory funds for payments to States for child support enforcement and family support programs. In addition, the Committee recommends \$1,100,000,000 in advance funding for the first quarter of fiscal year 2014, the same as the budget request and the comparable advance provided last year for the first quarter of fiscal year 2013.

These funds support States' efforts to promote the self-sufficiency and economic security of low-income families, including administrative expenses matching funds and incentive payments to States for child support enforcement; grants to States to help establish and administer access and visitation programs between non-custodial parents and their children; payments to territories for benefits to certain aged, blind, or disabled individuals; and temporary benefits for certain repatriated citizens.

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$3,471,672,000 |
| Budget estimate, 2013 | 3,020,000,000 |
| Committee recommendation | 3,471,672,000 |

The Committee recommends \$3,471,672,000 for LIHEAP. LIHEAP provides home heating and cooling assistance to low-in-

come households, generally in the form of payments to energy vendors on behalf of the recipient. The Committee recommendation represents a 50-percent increase over the fiscal year 2008 non-emergency funding level.

State Formula Block Grant

The Committee recommendation includes \$3,371,672,000 for the State formula block grant. The comparable fiscal year 2012 funding level is \$3,471,672,000 and the budget request is \$2,820,000,000. The Committee maintains bill language that allocates these funds to States based on the same formula distribution that has been used since fiscal year 2009.

Within this amount, the Committee recommendation includes up to \$3,000,000, the same as the comparable fiscal year 2012 funding level and the budget request, for program integrity and oversight efforts.

Contingency Fund

The Committee recommendation includes \$100,000,000 for the contingency fund. This program was not funded in fiscal year 2012; the budget request is \$200,000,000. The contingency fund supports grants to States that are adversely affected by extreme heat or cold, energy prices, or other energy-related emergencies. While average home energy costs for many households decreased this past year, the costs for households dependent on home fuel oil and other home-delivered fuels remain at record levels. Low-income households dependent on home-delivered fuels are also generally not protected by State laws that prohibit utility companies from shutting off service during the winter. Therefore, the Committee encourages HHS to direct these funds to those States hit hardest by increases in home energy costs and facing other energy-related emergencies.

REFUGEE AND ENTRANT ASSISTANCE

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$768,334,000 |
| Budget estimate, 2013 | 805,358,000 |
| Committee recommendation | 805,358,000 |

The Committee recommends \$805,358,000 for refugee and entrant assistance programs. These programs provide a variety of benefits and services to refugees, asylees, Cuban and Haitian entrants, trafficking victims, and torture victims (referred to below as “refugees”). The programs also fund temporary shelter and services for unaccompanied alien children apprehended by law enforcement who are in Federal custody awaiting adjudication of their immigration status.

Transitional and Medical Services

The Committee recommendation includes \$343,000,000 for Transitional and Medical Services [TAMS]. The comparable fiscal year 2012 funding level is \$323,195,000 and the budget request is \$403,000,000. TAMS provides grants to States and nonprofit organizations to provide up to 8 months of cash and medical assistance to incoming refugees as well as foster care services to unaccompanied minors.

In fiscal year 2012 HHS reprogrammed \$49,100,000 from TAMS to the UAC program in response to a significant increase in the number of unaccompanied alien children placed into HHS' care through the first half of the year. This reprogramming will not impact the TAMS program because the number of refugees arriving in the United States has been significantly less than the amount allowed under law, and assumed in the fiscal year 2012 appropriation. The Committee recommendation assumes current trends will continue in fiscal year 2013 and the number of refugees actually arriving in the United States will continue to be less than the amount allowed under law. The Committee will continue to work with HHS and revisit these estimates as necessary.

Within the total, the Committee recommendation includes not less than \$65,000,000 for the voluntary agency matching grant program, which provides grants to resettlement agencies to support comprehensive services for arriving refugees, including case management, job development, job placement, and interim housing and cash assistance, with the goal of refugees becoming self-sufficient within their first 4 months in the United States. Refugees enrolled in this program are not eligible for regular transitional and medical assistance. The Committee continues to support the voluntary agency matching grant program and encourages HHS to explore the continued expansion of this program.

Victims of Trafficking

The Committee recommendation includes \$9,775,000, the same as the comparable fiscal year 2012 funding level and the budget request, for the Victims of Trafficking program. This program supports a national network for identifying, certifying, and providing comprehensive services to international victims of trafficking.

Social Services

The Committee recommendation includes \$153,407,000, the same amount as the budget request, for social services programs. The comparable fiscal year 2012 funding level is \$115,107,000. These funds include formula and discretionary grants to States and non-profit organizations to provide a variety of employment and support services to recently arrived refugees.

In fiscal year 2012 HHS reprogrammed \$38,300,000 from social services to the UAC program in response to a significant increase in the number of children placed into HHS' care through the first half of the year. Discretionary social services grants are typically awarded for a 12-month budget period at the end of the fiscal year. Under this reprogramming, discretionary grants will be awarded at the end of fiscal year 2012 but for a shorter budget period. This effectively shifts the budget period for these grants from starting at the end of the fiscal year to the middle of the fiscal year. The Committee recommendation will allow eligible grants to be fully funded in fiscal year 2013 for a 12-month budget period starting in the middle of the fiscal year.

The Committee strongly encourages ORR to explore the use of existing discretionary funds for case management services for particularly vulnerable refugee populations. Refugees enrolled in the matching grant program, which generally include those refugees

easiest to place in employment, have access to such services but other refugees generally do not beyond their first 30 to 90 days in the United States. Intensive case management services can help connect refugees to other support services and provide a comprehensive approach to integration for those that need it most.

Preventive Health

The Committee recommendation includes \$4,730,000, the same as the comparable fiscal year 2012 funding level and the budget request, for preventive health services for refugees. This program funds grants to coordinate and promote refugees' access to health screening, treatment, and follow-up services.

Targeted Assistance

The Committee recommendation includes \$48,401,000, the same as the budget request, for targeted assistance for refugees. The comparable fiscal year 2012 funding level is \$20,201,000. This program provides additional funds to States with an influx of refugee arrivals and a high concentration of refugees facing difficulties achieving self-sufficiency.

In fiscal year 2012 HHS reprogrammed \$28,200,000 from the targeted assistance program to the UAC program. As with social services grants, targeted assistance grants are typically awarded for a 12-month budget period at the end of the fiscal year. Under this reprogramming, these grants will be awarded for a shorter budget period, effectively shifting the budget period from starting at the end of the fiscal year to the middle of the fiscal year. The Committee recommendation will allow eligible grants to be fully funded in fiscal year 2013 for a 12-month budget period beginning in the middle of the fiscal year.

Unaccompanied Alien Children

The Committee recommendation includes \$235,000,000 for the UAC program. The comparable fiscal year 2012 funding level is \$284,281,000 and the budget request is \$175,000,000. The UAC program provides shelter and support services to unaccompanied alien children apprehended in the United States by the Department of Homeland Security or other law enforcement agencies. Children are taken into HHS' care pending resolution of their claims for relief under U.S. immigration law or release to an adult family member or guardian.

If current trends continue, the number of children placed into HHS' care could nearly double from around 8,000 in recent years to over 14,000 in fiscal year 2012. To address this increase, HHS reprogrammed a total of \$115,600,000 to the UAC program from other ORR programs in fiscal year 2012. A significant amount of this increase was for emergency-related costs associated with a sudden increase in children that required HHS to quickly acquire shelter space. As HHS acquires more permanent shelter space, these costs should decrease in fiscal year 2013. The Committee recommendation provides an increase over the budget request to support an increase in the number of children being placed into HHS' care and will continue to work with HHS to revise these estimates as necessary.

Many of the children placed into HHS' care are victims of abuse, neglect, or trafficking, or otherwise have physical or mental health issues. The Committee is particularly concerned about the impact this increase in children will have on the availability of support services, including access to pro bono legal representation, child advocates, social workers, physicians, and psychologists. The Committee strongly supports placing these children in areas where these vital services are readily available. As HHS pursues additional shelter space, it should provide assurances that children will have adequate access to these services.

Within the total, the Committee provides \$6,100,000 to continue the pro bono legal services initiative to support legal representation for both released and detained children. These funds are to be used to train legal counsel to detect abuse, mistreatment, labor exploitation, and trafficking of these children.

Victims of Torture

The Committee recommendation includes \$11,045,000 for the Victims of Torture program. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides treatment, social, and legal services to victims of torture and training to healthcare providers on treating the physical and psychological effects of torture.

PAYMENTS TO STATES FOR THE CHILD CARE AND DEVELOPMENT
BLOCK GRANT

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$2,278,313,000 |
| Budget estimate, 2013 | 2,603,313,000 |
| Committee recommendation | 2,438,313,000 |

The Committee recommends \$2,438,313,000 for the CCDBG, a State formula grant that provides financial assistance to low-income families to help pay for child care and to improve the quality of States' child care programs.

The Committee recommends that \$90,000,000 of the increase over the fiscal year 2012 level should be used for formula grants to States, tribes, and territories to improve the quality of the early childhood care and education workforce. These funds should support activities such as training, education, and other professional development (including coaching, mentoring, and other on-site training and technical assistance for staff) that are linked to a career pathway or lattice; technical assistance to help providers become licensed and comply with licensing and regulatory requirements; scholarships for further education; and compensation improvement (including rewards or bonuses) linked to increased credential or degree completion. States should work with their State Early Childhood Advisory Councils in coordinating these activities. States should report on the number of providers and staff, including by type of child care setting and age of children served in the setting, that receive support through these funds and the kind of support they receive. States applying for these funds should also provide assurances that funds will be prioritized first in areas with significant concentrations of poverty and unemployment that lack access to high-quality early care and education programs, or for otherwise underserved populations such as children with disabil-

ities or special needs. Additionally, any use of child assessments should conform to the recommendations of the National Research Council's reports on early childhood and assessment. Finally, these funds should be used to supplement and not to supplant Federal, State, and local funds otherwise used for these purposes.

The Committee recommends that the remaining \$70,000,000 increase over the fiscal year 2012 level should be used for the regular block grant. In recent years, many States have struggled to maintain key child care policies and have tightened eligibility requirements, added to waitlists, increased family copayments, and left reimbursement rates for providers stagnant. As a result, fewer families are receiving assistance and many that do are struggling to find quality affordable child care options. This increase will allow States to increase the number of families served and generally improve low-income families' access to quality affordable child care.

The Committee recommendation also maintains several existing set-asides at their comparable fiscal year 2012 funding levels. The Committee recommendation includes \$19,396,000 for resource and referral programs and school-aged child care activities. Of this amount \$1,000,000 is specified for a national toll-free referral line and Web site to provide child care consumer education information to low-income families, including information about the quality of child care programs, such as information under a State or local quality rating and improvement system, and information to help families access available child care in their community through linkages to State and local data sources. The Committee recommendation also includes \$9,871,000 for child care research and evaluation activities. Finally, in addition to the funds specified above for improving the quality of the early childhood workforce, the Committee recommendation also maintains existing set-asides for quality improvement activities. These quality improvement funds are in addition to the 4-percent quality improvement set-aside established in the authorizing legislation.

Tribes Participating in Public Law 102-477 Programs.—The Committee appreciates the administration's response to concerns raised in last year's Senate Committee report over the imposition of additional reporting, auditing and accounting requirements on "477 tribes", which includes the administration of CCDBG funding. For 20 years tribes have operated 477 programs and integrated employment, training, and related services to improve the effectiveness of these services and better serve tribal needs consistent with the policy of self-determination. The Committee appreciates the importance of ensuring appropriate transparency and accountability of Federal funds but believes that requirements to separately report on funding by CFDA numbers is contrary to the intent of section 14 of Public Law 102-477 and would impair the efficiency of the 477 initiative. The Committee appreciates that the administration has accordingly suspended such requirements. The Committee continues to believe that any reporting, accounting, or auditing requirements to improve transparency and accountability should be consistent with the intent of Public Law 102-477 and should not impose unnecessary or burdensome requirements on tribes and should be in response to specific identified problems. The Committee expects the administration to continue to work with the 477

Tribal Work Group so that any new guidelines or requirements continue to promote tribal flexibility in the administration of employment, training, and related services under the 477 program. The Committee directs HHS to provide a briefing to the Committees on Appropriations of the House and the Senate by September 30, 2012 on the status of the Tribal Work Group discussions.

SOCIAL SERVICES BLOCK GRANT

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,700,000,000 |
| Budget estimate, 2013 | 1,700,000,000 |
| Committee recommendation | 1,700,000,000 |

The Committee recommends \$1,700,000,000 in mandatory funds for the SSBG. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. The SSBG is a flexible source of funding that allows States to provide a diverse array of services to low-income children and families, the disabled, and the elderly.

The Committee continues to regard the SSBG as a critical source of funding for services that protect children from neglect and abuse, including providing foster and respite care, as well as related services for children and families, persons with disabilities, and older adults. The Committee recognizes the importance of this program, especially in providing mental health and counseling services to underserved populations, and recommends continued usage and flexibility of these funds for such purposes.

CHILDREN AND FAMILY SERVICES PROGRAMS

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$9,734,982,000 |
| Budget estimate, 2013 | 9,515,657,000 |
| Committee recommendation | 9,818,982,000 |

The Committee recommends \$9,818,982,000 in budget authority for children and families services programs. In addition, the Committee recommends \$5,762,000, the same as the comparable fiscal year 2012 funding level and the budget request, in transfers available under section 241 of the PHS Act. These funds support a variety of programs for children, youth, and families; the developmentally disabled; Native Americans; victims of child abuse, neglect, and domestic violence; and other vulnerable populations.

Head Start

The Committee recommendation includes \$8,038,544,000 for Head Start. The comparable fiscal year 2012 funding level is \$7,968,544,000 and the budget request is \$8,054,000,000. Head Start provides comprehensive early childhood education and development services for low-income children and families, focusing on cognitive and language development, socio-emotional development, physical and mental health, and parental involvement.

Within the total, the Committee recommendation includes up to \$25,000,000 for transition-related costs associated with the Head Start Designation Renewal System [DRS]. The Committee recommendation does not include bill language, requested by the administration, making these funds available through fiscal year 2014. In November 2011, carrying out provisions in the Improving Head Start for School Readiness Act of 2007, ACF published a final

rule which requires grantees that do not meet certain standards to re-compete for funding through the DRS. In fiscal year 2012, over \$1,200,000,000 in grants will be re-competed, with new awards expected to be made in fiscal year 2013. These additional funds will support implementation of the DRS and provide start-up related costs to new grantees to minimize any disruption in services. In addition, the Committee encourages HHS to consider the unique challenges faced by Head Start grantees in remote and frontier areas when reviewing such grantees' compliance with health and dental screening requirements as part of the DRS.

The Committee recommendation also supports an approximately 0.6 percent cost-of-living adjustment for each grantee. This will help defray rising operational costs so that grantees can maintain services for the approximately 962,000 low-income children and their families in Head Start programs.

Consolidated Runaway and Homeless Youth Program

The Committee recommendation includes \$97,355,000, the same as the fiscal year 2012 level and the budget request, for the consolidated runaway and homeless youth program. This program supports the Basic Centers program, which provides temporary shelter, counseling, and after-care services to runaway and homeless youth under age 18 and their families; the Transitional Living Program, which provides longer-term shelter and services for older youth; and a national toll-free runaway and homeless youth crisis hotline.

Education and Prevention Grants To Reduce Sexual Abuse of Runaway Youth

The Committee recommendation includes \$17,901,000, the same as the fiscal year 2012 level and the budget request, for education and prevention grants to reduce sexual abuse of runaway and homeless youth. This program provides competitive grants for street-based outreach and education services for runaway and homeless youth who are subjected to or are at risk of being subjected to sexual abuse or exploitation.

Child Abuse Prevention and Treatment State Formula Grants

The Committee recommendation includes \$26,432,000 for child abuse prevention and treatment State formula grants. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides formula grants to States to improve their child protective service systems.

Child Abuse Prevention and Treatment Discretionary Activities

The Committee recommendation includes \$25,744,000 for child abuse prevention and treatment discretionary activities. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program supports discretionary grants for research, demonstration, and technical assistance to increase the knowledge base of evidence-based practices and to disseminate information to State and local child welfare programs.

Child Abuse Prevention and Treatment Community-Based Grants

The Committee recommendation includes \$41,527,000 for child abuse prevention and treatment community-based grants. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides formula grants to States that then disburse funds to local, community-based organizations to improve local child abuse prevention and treatment efforts, including providing direct services and improving the coordination between State and community-based organizations.

Abandoned Infants Assistance

The Committee recommendation includes \$11,553,000 for the Abandoned Infants Assistance program. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides discretionary grants to public and private community and faith-based organizations to develop, implement, and operate demonstration projects that prevent the abandonment of infants and young children impacted by substance abuse and HIV. Funds may be used to provide respite care for families and caregivers, allow abandoned infants and children to reside with their natural families or in foster care, and carry out residential care programs for abandoned infants and children who are unable to reside with their families or be placed in foster care.

Child Welfare Services

The Committee recommendation includes \$280,650,000 for child welfare services. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This formula grant program helps State and tribal public welfare agencies improve their child welfare services with the goal of keeping families together. States and tribes provide a continuum of services that prevent child neglect, abuse or exploitation; allow children to remain with their families, when appropriate; promote the safety and permanence of children in foster care and adoptive families; and provide training and professional development to the child welfare workforce.

Child Welfare Research, Training, and Demonstration

The Committee recommendation includes \$31,092,000, the same as the budget request, for child welfare research, training, and demonstration projects. The comparable fiscal year 2012 funding level is \$26,092,000. This program provides grants to public and nonprofit organizations for demonstration projects that encourage experimental and promising types of child welfare services, as well as projects that improve education and training programs for child welfare service providers.

The Committee recommends an increase of \$5,000,000, as requested by the administration, to enhance efforts to prevent domestic child sex trafficking and improve services for child victims of sex trafficking. These funds will be used to train and build capacity in existing organizations that come into contact with at-risk youth, such as child welfare agencies, foster group homes, runaway and

homeless youth programs, law enforcement, and courts, to better identify and serve this very vulnerable population.

The Committee has previously encouraged ACF to work with ACL and other HHS agencies to evaluate intergenerational approaches for improving outcomes for at-risk youth and families. The Committee is particularly interested in initiatives that are place-based and leverage the service of older volunteers with supportive housing. Such initiatives have demonstrated potential to reduce demand for social services while improving the health and well-being of participating seniors by increasing their civic and societal engagement. The Committee strongly encourages HHS to use existing discretionary resources for such initiatives to support intermediary and community-based organizations developing projects that demonstrate this approach.

Adoption Opportunities

The Committee recommends \$39,179,000 for the Adoption Opportunities program. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. The Adoption Opportunities program funds discretionary grants to help facilitate the elimination of barriers to adoption and provide technical assistance to help States increase the number of children adopted, particularly children with special needs.

Consistent with the reauthorization of this program, the Committee continues to expect that these funds will focus on facilitating the adoption of older children, minority children, and children with special needs. Specifically, the Committee expects HHS to focus new grants on strengthening postadoption services and the recruitment of adoptive parents for these populations of children.

Adoption Incentives

The Committee recommends \$39,346,000 for adoption incentives. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides incentive payments to States based on a formula in law to encourage States to increase the number of adoptions of children from the foster care system, with an emphasis on children who are the hardest to place. If the payments due to States are higher than the amount of funds available, the payments are reduced on a pro rata basis based on the amount available.

Social Services and Income Maintenance Research

The Committee recommends \$5,762,000, the same as the fiscal year 2012 level, for social services and income maintenance research. This entire amount is funded through transfers available under section 241 of the PHS Act, the same as in fiscal year 2012. The budget request is \$13,762,000, of which \$5,762,000 is funded through transfers available under the PHS Act. These funds support research and evaluation of cost-effective programs that increase the stability and economic independence of American families, and contribute to the healthy development of children and youth.

Due to budget constraints, the Committee recommendation does not include a \$3,000,000 increase requested by the administration

for an early childhood care and education research and evaluation study. Similarly, the Committee recommendation does not include a \$5,000,000 increase requested by the administration for a new initiative to improve services for disconnected youth. However, the Committee does include a new general provision on Performance Partnerships involving disconnected youth. This new bill language provides the Departments of HHS, Education, and Labor flexibility to encourage local and State-level innovation among programs serving disconnected youth.

Developmental Disabilities

In fiscal year 2012 HHS moved the administration of developmental disabilities programs from ACF to the newly established ACL. The Committee supports this administrative change and funds these programs within ACL in fiscal year 2013.

Voting Access for Individuals With Disabilities

In fiscal year 2012 HHS moved the administration of the voting access for individuals with disabilities program from ACF to ACL. The Committee supports this administrative change and funds this program within ACL in fiscal year 2013.

Native American Programs

The Committee recommends \$48,583,000 for Native American programs. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. These funds support a variety of programs to promote self-sufficiency and cultural preservation activities among Native American, Native Hawaiian, Alaska Native, and Pacific Islander organizations and communities.

Within the total, the Committee recommendation includes \$12,000,000 for Native American language preservation activities, including no less than \$4,000,000 for language immersion programs 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. The Committee continues to strongly encourage ACF to give priority to grantees with rigorous immersion programs.

Community Services Block Grant

The Committee recommendation includes \$677,358,000, the same as the comparable fiscal year 2012 funding level, for the Community Services Block Grant [CSBG]. The budget request is \$350,000,000. The CSBG is a formula grant to States and Indian tribes to provide a wide range of services and activities to alleviate causes of poverty in communities and to assist low-income individuals in becoming self-sufficient. States are required to pass on at least 90 percent of these funds to local community-based organizations, the vast majority of which are community action agencies.

The Committee continues to strongly support this program, which provides critical flexible funding for local organizations that serve as a central source of assistance for low-income populations. These local organizations typically administer larger Federal programs such as Head Start and LIHEAP. The CSBG provides critical funding to support the administration of these programs at the

local level, as well as flexible funding to fill in service gaps and meet the particular needs of local communities.

Community Economic Development

The Committee recommendation includes \$29,943,000 for the community economic development program. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides grants to community development corporations to support employment and business development opportunities for low-income individuals.

Within the total for community economic development, the Committee recommendation includes up to \$10,000,000 for the Healthy Foods Financing Initiative [HFFI]. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. The HFFI is a joint initiative with the Department of Agriculture and Department of the Treasury to provide financial and technical assistance to community development financial institutions, non-profit organizations, and businesses to expand access to healthy foods in low-income and underserved communities.

Rural Community Facilities

The Committee recommendation includes \$5,981,000 for the rural community facilities program. The comparable fiscal year 2012 funding level is \$4,981,000; the budget request eliminates funding for this program. The rural community facilities program provides grants to regional nonprofit organizations to provide training and technical assistance to low-income rural communities in developing and managing safe and affordable water and wastewater treatment facilities. These funds support projects in communities that generally cannot access resources and services through similar programs at the Department of Agriculture and the Environmental Protection Agency.

Assets for Independence

The Committee recommendation includes \$19,869,000 for the Assets for Independences [AFI] program. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. The AFI program provides discretionary grants to organizations to support individual development accounts that encourage low-income individuals to create savings accounts for dedicated purposes, such as buying a home, paying for college, or starting a business.

In addition, the Committee recommendation includes new bill language requested by the administration that will allow HHS to recapture unused funds by grantees and reallocate them to new or existing projects. AFI grantees are required to match individual savings with equal amounts of Federal and non-Federal funds. Grantees have 5 years to expend funds but some have struggled to encourage enough savings or to provide a sufficient match to be able to expend their full grant during that time. This new language will allow HHS to recapture after 3 years unused funds that HHS determines grantees will be unable to spend within their grant period and award it to other organizations.

The Committee also includes new bill language requested by the administration providing for a \$1,000,000 evaluation of individual development account demonstration projects through the AFI program.

Domestic Violence Hotline

The Committee recommendation includes \$4,197,000 for the national domestic violence hotline. The comparable fiscal year 2012 funding level is \$3,197,000 and the budget request is \$4,500,000. This national, toll-free hotline provides information and assistance to victims of domestic violence 24 hours a day.

Family Violence Prevention and Services

The Committee recommendation includes \$133,547,000 for family violence prevention and services programs. The comparable fiscal year 2012 funding level is \$129,547,000 and the budget request is \$135,000,000. These funds support programs to prevent family violence and provide immediate shelter and related assistance for victims of domestic violence and their dependents. The Committee recommends an increase for this program, as well as for the national domestic violence hotline, to respond to an increase in demand for emergency domestic violence shelter services over the last several years. According to a 2011 survey of over 1,700 domestic violence programs, on any given day 67,000 victims receive services but an additional 10,000, including 6,700 requesting emergency or transitional housing, are turned away because of a lack of resources.

Education and Training Vouchers

The Committee recommendation includes \$45,174,000 for education and training vouchers for foster care youth. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program supports vouchers of up to \$5,000 per year for expenses related to postsecondary education and vocational training for foster care youth up to 21 years of age.

Disaster Human Services Case Management

The Committee recommends \$1,992,000 for disaster human services case management. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program assists States in establishing the capacity to provide case management services in a timely manner in the event of a disaster. It ensures that States are able to meet social service needs during disasters by helping disaster victims prepare recovery plans, referring them to service providers and FEMA contacts in order to identify needed assistance, and providing ongoing support and tracking through the recovery process.

Program Administration

The Committee recommendation includes \$201,645,000 for ACF program administration, which supports the administration of all ACF programs. The comparable fiscal year 2012 funding level is \$198,645,000 and the budget request is \$206,447,000. These

amounts have been adjusted to reflect the move of the Administration on Developmental Disabilities to the new ACL.

The Committee recommends an increase for program administration to support the implementation of the new Head Start Designation Renewal System as described earlier under the Head Start heading.

PROMOTING SAFE AND STABLE FAMILIES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$408,065,000 |
| Budget estimate, 2013 | 408,065,000 |
| Committee recommendation | 408,065,000 |

The Committee recommends \$408,065,000 for promoting safe and stable families. The Committee recommendation includes \$345,000,000 in mandatory funds authorized by the Social Security Act and \$63,065,000 in discretionary appropriations.

This program supports activities that can prevent the emergence of family crises that might require the temporary or permanent removal of a child from his or her home. Grants allow States to operate coordinated programs of family preservation services, time-limited family reunification services, community-based family support services, and adoption promotion and support services.

PAYMENTS FOR FOSTER CARE AND PERMANENCY

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$5,153,000,000 |
| Budget estimate, 2013 | 4,810,000,000 |
| Committee recommendation | 4,810,000,000 |

The Committee recommends \$4,810,000,000 in mandatory funds for payments for foster care and permanency. In addition, the Committee recommends \$2,200,000,000, the same as the budget request, in advance mandatory funding for the first quarter of fiscal year 2014. The comparable advance provided last year for the first quarter of fiscal year 2013 is \$2,100,000,000. These funds support programs that assist States with the costs of maintaining eligible children in foster care, prepare children for living on their own, assist relatives with legal guardianship of eligible children, and find and support adoptive homes for children with special needs.

The Committee recommendation includes a program level of \$4,143,000,000, the same as the budget request, for foster care programs. The comparable fiscal year 2012 program level is \$4,288,000,000. This program provides matching reimbursement funds for State costs associated with operating and managing their foster care programs.

The Committee recommendation includes a program level of \$2,537,000,000, the same as the budget request, for adoption assistance. The comparable fiscal year 2012 program level is \$2,495,000,000. The adoption assistance program provides funds to States for maintenance payments and the nonrecurring costs of adoption for children with special needs. The goal of this program is to facilitate the adoption of hard-to-place children in permanent homes and thus prevent long, inappropriate stays in foster care.

The Committee recommendation includes a program level of \$140,000,000 for the independent living program. This amount is the same as the comparable fiscal year 2012 program level and the budget request. The independent living program provides services

to foster children under 18 and foster youth ages 18 to 21 to help them make the transition to independent living by engaging in a variety of services including educational assistance, life skills training, and health services. States are awarded grants based on their share of the number of children in foster care, subject to a matching requirement.

The Committee recommendation includes a program level of \$90,000,000, the same as the budget request, for the guardianship assistance program. The comparable fiscal year 2012 program level is \$80,000,000. This program provides assistance payments to relatives taking legal guardianship of eligible children who have been in foster care.

ADMINISTRATION FOR COMMUNITY LIVING

AGING AND DISABILITY SERVICES PROGRAMS

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,697,264,000 |
| Budget estimate, 2013 | 2,152,712,000 |
| Committee recommendation | 1,708,105,000 |

The Committee recommends an appropriation of \$1,708,105,000 for ACL, which includes \$52,115,000 in Medicare trust funds. In addition, the Committee recommends that \$17,000,000 be transferred to ACL from the PPH Fund. The total program level assumed in this bill for ACL is \$1,725,105,000.

ACL was established by HHS in April 2012 with the goal of increasing access to community supports for older Americans and people with disabilities. This new agency was created by combining the organizational components of AoA, the HHS Office on Disability, and the Administration on Developmental Disabilities. ACL is charged with administering programs authorized under the Older Americans Act [OAA] and the Developmental Disabilities Act, as well as promoting community living policies throughout the Federal Government for older Americans and people with disabilities.

Home and Community-Based Supportive Services

The Committee recommends an appropriation of \$366,916,000 for home- and community-based supportive services program. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. This program provides formula grants to States and territories to fund a wide range of social services that enable seniors to remain independent and in their homes for as long as possible. State agencies on aging award funds to designated area agencies on aging that, in turn, make awards to local service providers. This activity supports services such as transportation, adult day care, physical fitness programs, as well as in-home assistance such as personal care and homemaker assistance.

Preventive Health Services

The Committee recommends \$20,945,000 for preventive health services. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. This program funds activities that help seniors stay healthy and avoid chronic

disease, thus reducing the need for costly medical interventions. The Committee continues language from the fiscal year 2012 bill requiring States to use these funds for interventions that are evidence-based and effective, such as enhanced fitness and wellness programs, depression screening, and medication management programs. These evidence-based prevention programs have been shown through randomized-controlled trials to be effective at helping older adults improve their health status and lower their use of healthcare services.

Protection of Vulnerable Older Americans

The Committee recommends \$21,797,000, the same as the comparable level for fiscal year 2012 and the administration request, for grants to States for protection of vulnerable older Americans. This activity funds the long-term care ombudsman program and the prevention of elder abuse program. Both programs provide formula grants to States to prevent the abuse, neglect, and exploitation of older individuals. The ombudsman program focuses on the needs of residents of nursing homes and other long-term care facilities, while the elder abuse prevention program targets the elderly community at large.

National Family Caregiver Support Program

The Committee recommends \$153,621,000 for the national family caregiver support program. This amount is the same as the comparable level for fiscal year 2012 and the administration request. Funds appropriated for this activity establish a multifaceted support system in each State for family caregivers, allowing them to care for their loved ones at home for as long as possible. States may use funding to provide information to caregivers about available services, assistance to caregivers in gaining access to services, caregiver counseling and training, respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities, and limited supplemental services that fill remaining service gaps.

Native American Caregiver Support Program

The Committee recommendation includes \$6,364,000 to carry out the Native American caregiver support program. This amount is the same as the comparable level for fiscal year 2012 and the administration 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 disability, as well as for grandparents caring for grandchildren.

Congregate and Home-Delivered Nutrition Services

The Committee recommends an appropriation of \$439,070,000 for congregate nutrition services and \$216,831,000 for home-delivered meals. Both amounts are the same as the comparable funding levels for fiscal year 2012 and the administration request.

These programs address the nutritional needs of older individuals. Funded projects must make home-delivered and congregate meals available at least once a day, 5 days a week, and each meal must meet a minimum of one-third of daily dietary requirements. While States receive separate allotments of funds for congregate

meals, home-delivered meals, and supportive services, they have flexibility to transfer funds between these programs.

Nutrition Services Incentives Program

The Committee recommendation includes \$160,389,000 for the nutrition services incentives program [NSIP]. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. NSIP augments funding for congregate and home-delivered meals provided to older adults. Funds provided under this program are dedicated exclusively to the provision of meals. NSIP rewards effective performance by States and tribal organizations in the efficient delivery of nutritious meals to older individuals through the use of cash or commodities.

Aging Grants to Indian Tribes and Native Hawaiian Organizations

The Committee recommends \$27,601,000 for grants to Native Americans. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. Under this program, awards are made to eligible organizations based on their share of Native Americans, Native Alaskans, and Native Hawaiians aged 60 and over.

Aging Network Support Activities

The Committee recommends \$7,873,000 for aging network support activities. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. These funds support activities that expand public understanding of aging and the aging process, apply social research and analysis to improve access to and delivery of services for older individuals, test innovative ideas and programs, and provide technical assistance to agencies that administer programs authorized by the OAA.

Within funding for aging network support activities, the Committee provides \$998,000 to continue the 24-hour call center that provides Alzheimer's family caregivers with professional care consultation and crisis intervention. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request.

Mental Health.—The Committee notes that approximately 20 to 25 percent of older adults have a mental or behavioral health problem, with White men aged 85 and older having the highest rates of suicide of any group in the United States. The Committee urges ACL to expand its efforts to address the mental and behavioral health needs of older adults, including implementation of the mental and behavioral health provisions in the OAA. The Committee also urges ACL to designate an officer responsible for administering mental health services for older Americans.

Alzheimer's Disease Demonstration Grants to States

The Committee recommendation includes \$4,011,000 for Alzheimer's disease demonstration grants to States. This amount is the same as the comparable funding level for fiscal year 2012. The administration request is \$9,537,000. This program funds competitive grants to States to test and implement new models of care for individuals with Alzheimer's disease.

Lifespan Respite Care

The Committee recommends \$4,990,000 for the Lifespan Respite Care program. The comparable funding level for fiscal year 2012 level and the administration request is \$2,490,000. The Lifespan Respite Care program provides grants to States to expand respite care services to family caregivers, improve the local coordination of respite care resources, and improve access to and quality of respite care services, thereby reducing family caregiver strain.

The Committee recognizes the essential role of family caregivers who provide a significant proportion of our Nation's health and long-term services and supports for the chronically ill and aging. Respite care can provide family caregivers with relief necessary to maintain their own health, bolster family stability and well being, and avoid or delay more costly nursing home or foster care placements. The Committee urges the Secretary to ensure that State agencies, as well as aging and disability research centers [ADRCs], use these funds to serve all age groups, chronic conditions, and disability categories equitably and without preference.

Chronic Disease Self-Management Program

The Committee recommends \$10,000,000 be transferred from the PPH Fund to ACL for the Chronic Disease Self-Management Program [CDSMP]. This amount is the same as the comparable funding level in fiscal year 2012 and the administration request. This program assists those with chronic disease with managing their conditions and improving their health status. Topics covered by the program include nutrition, appropriate use of medications, fitness, and effective communications with healthcare providers. The Committee notes that the CDSMP has been shown through multiple studies to result in significant and measurable improvements in health and quality of life, as well as reductions in hospitalizations and emergency room visits.

Elder Falls Prevention

The Committee recommends that \$7,000,000 in mandatory funding be transferred from the PPH Fund for elder falls prevention activities at ACL, in coordination with CDC. This is a new activity that was not funded in fiscal year 2012. The administration did not request funding for this program.

The Committee notes that falls are the leading cause of fatal and nonfatal injuries for those 65 and older. Each year, 1-in-3 Americans aged 65 and older falls. Every 15 seconds, an older adult is treated in the emergency room for a fall-related injury. Preventing falls will help seniors stay independent and in their homes, avoiding costly hospitalizations and hip fractures, which frequently lead to nursing home placement. The Committee intends that funds provided to ACL should be used for public education about the risk of these falls, as well as implementation and dissemination of community-based strategies that have been proven to reduce the incidence of falls among seniors.

Adult Protective Services Demonstrations

The Committee recommendation includes \$8,000,000 for adult protective services demonstrations. This amount is the same as the

administration request. This is a new program that did not receive funding in fiscal year 2012. This program, as established in the Elder Justice Act, will provide competitive grants to States to test and evaluate innovative approaches to preventing and responding to elder abuse.

Senior Medicare Patrol

The Committee recommends \$9,402,000 for the Senior Medicare Patrol [SMP] program. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. These funds support a network of retired senior volunteers who educate older adults on preventing and identifying healthcare fraud and abuse.

The Committee strongly supports the SMP program, administered by ACL with historical financial assistance from CMS. The Committee is concerned that the return on investment [ROI] calculation included in the performance metrics of the program does not adequately reflect outcome data on SMP fraud referrals. The Committee requests that a more accurate ROI calculation be developed for this important program. The Committee requests that ACL, CMS, DOJ, and the HHS OIG work to improve the process of informing beneficiaries when their tips directly result in a conviction, a recovery, or a change to Medicare policies.

Elder Rights Support Activities

The Committee recommends \$4,088,000 for elder rights support activities. This amount is the same as the comparable funding level for fiscal year 2012 and the administration request. This activity supports programs that provide information, training, and technical assistance to legal and aging services organizations in order to prevent and detect elder abuse and neglect.

Aging and Disability Resource Centers

The Committee recommendation includes \$6,457,000 for ADRCs. This amount is the same as the comparable funding level for fiscal year 2012. The administration did not request funding for this program. ADRCs provide “one stop shop” entry points into long-term care at the community level. The Committee recommendation continues funding for this program in recognition of the centers’ role in providing access to a range of home- and community-based resources that allow seniors and individuals with disabilities to maintain their independence.

State Health Insurance Assistance Program

The Committee recommendation includes \$52,115,000 for State Health Insurance Assistance Programs [SHIPs], which provide accurate and understandable health insurance information to Medicare beneficiaries and their families. This is the same as the comparable fiscal year 2012 level. The administration request is \$51,902,000. The Committee concurs with the administration’s proposal to transfer this grant program to ACL from CMS and includes bill language that reflects this transfer. The Committee notes that many SHIPs are already housed in, or are partnered with, area agencies on aging. Activities of the SHIPs are also

aligned with ACL's mission to develop a comprehensive system of home- and community-based services to help seniors maintain their health and independence.

Community Service Employment for Older Americans

The Committee recommendation does not include funding for the CSEOA program in ACL, as proposed by the administration. The administration request is \$448,251,000 for this program. The Committee continues to provide funding for this program in the Department of Labor.

Developmental Disabilities State Councils

The Committee recommendation includes \$74,774,000 for State councils on development disabilities. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. These State councils work to develop, improve, and expand the system of services and supports for people with developmental disabilities. By engaging in activities such as training, educating the public, building capacity, and advocating for change in State policies, these councils support the inclusion and integration of individuals with developmental disabilities in all aspects of community life.

Developmental Disabilities Protection and Advocacy

The Committee recommendation includes \$40,865,000 for protection and advocacy programs for people with developmental disabilities. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This formula grant program provides funds to States to establish and maintain protection and advocacy systems to protect the legal and human rights of persons with developmental disabilities who are receiving treatment, services, or rehabilitation.

Voting Access for Individuals With Disabilities

The Committee recommendation includes \$5,235,000 for voting access for individuals with disabilities. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides grants to protection and advocacy organizations to ensure that individuals with disabilities have the opportunity to participate in every step of the electoral process, including registering to vote, accessing polling places, and casting a vote.

Developmental Disabilities Projects of National Significance

The Committee recommendation includes \$8,317,000 for projects of national significance to assist persons with developmental disabilities. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program funds grants and contracts that develop new technologies and demonstrate innovative methods to support the independence, productivity, and integration into the community of persons with developmental disabilities.

University Centers for Excellence in Developmental Disabilities

The Committee recommendation includes \$38,792,000 for University Centers for Excellence in Developmental Disabilities [UCEDDs]. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. The UCEDD program supports a network of 67 university-based centers that provide interdisciplinary education, conduct research, and develop model services for children and adults with disabilities. The centers serve as the major vehicle to translate disability-related research into community practice and to train the next cohort of future professionals who will provide services and supports to an increasingly diverse population of people with disabilities.

Program Administration

The Committee recommends \$29,652,000, the same as the administration request, for program administration. The comparable funding level for fiscal year 2012 is \$29,311,000. These levels have been adjusted for comparability to reflect the administrative costs associated with the Administration for Developmental Disabilities and the Office on Disability, which are now part of ACL. These funds support salaries and related expenses for program management and oversight activities.

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$542,197,000 |
| Budget estimate, 2013 | 421,895,000 |
| Committee recommendation | 535,639,000 |

The Committee recommends \$535,639,000 for general departmental management [GDM]. The recommendation includes \$69,211,000 in transfers available under section 241 of the PHS Act. Funding levels have been adjusted to reflect the transfer to ACL of the Office on Disability.

This appropriation supports activities that are associated with the Secretary's role as policy officer and general manager of the Department. It supports health activities performed by the Office of the Assistant Secretary for Health [ASH], including the Office of the Surgeon General. GDM funds also support the Department's centralized services carried out by several Office of the Secretary staff divisions, including personnel management, administrative and management services, information resources management, intergovernmental relations, legal services, planning and evaluation, finance and accounting, and external affairs.

The Committee recommendation includes an increase of \$2,800,000, requested by the administration, for acquisition reform activities. The Committee does not include funding for abstinence-only education programs, consistent with the administration request. The comparable fiscal year 2012 funding level for abstinence-only education programs is \$4,991,000.

The Committee recommendation includes \$250,000 for continued support of the Advisory Council on Alzheimer's Research, Care, and Services.

Antimicrobial Resistance.—The Committee commends the work of the Interagency Task Force on Antimicrobial Resistance [ITFAR], particularly the final action plan, but is concerned that the plan is missing measurable benchmarks and completion deadlines. The Committee urges the Secretary to designate an office and director within ASH or ASPR to lead the task force and coordinate the Federal response. The Committee further recommends that the task force work with non-government antimicrobial resistance experts to help set priorities and provide expert input on a routine basis.

Biovigilance Network.—The Committee recognizes the leadership of ASH and the Office of Blood Safety and Availability in coordinating efforts between CDC, FDA, NIH, AHRQ, HRSA, and CMS, as well as experts in transfusion medicine and blood banking, in the development and implementation of surveillance systems to track medical errors and adverse events occurring at any point in the collection, processing, distribution, or transfusion of blood. The Committee urges ASH to further these biovigilance efforts as a public/private collaboration allowing for in-depth analysis of the data collected as well as the development of interventions and best practices that can be implemented to eliminate errors and waste, thus improving patient health and safety and reducing costs.

Drug Shortages.—The Committee urges the Secretary, in consultation with FDA, to establish an interagency and intra-agency task force to address drug shortages. The task force should have stakeholder input, including an expert in how shortages affect pediatric patients. The study should examine whether other countries have experienced drug shortages, the extent and effect of the shortages, as well as any steps these countries are taking to mitigate or prevent such shortages.

Freely Associated States.—Pursuant to the Compact of Free Association Act of 1985 (Public Law 99–239), and continued under the Compact of Free Association Amendments Act of 2003 (Public Law 108–188), citizens of the FAS are accorded the privilege of freely traveling and residing in the United States without a set time limit. Upon arrival, FAS migrants often arrive with serious medical needs, requiring acute care such as dialysis and chemotherapy. As such, affected jurisdictions are seeing an increase in the number of cases involving tuberculosis, hepatitis, and sexually transmitted diseases which is putting a further strain on already constrained public health resources and education services. The Secretary is directed to work within the National Security Council Interagency Policy Committee on Freely Associated State Affairs to implement an effective action plan that addresses some of these issues. The Secretary should also provide effective guidance and feedback to the island nations through the Joint Economic Management Committee and Joint Economic Management Financial Accountability Committee process by ensuring that funds provided to the FAS nations are spent wisely to develop capacity in the islands to promote economic development, provide pre-health screenings, and to create an education program to ensure that FAS migrants know what is expected of them upon arrival to the affected jurisdictions.

Global Health Threats.—The Committee acknowledges the urgent need for new technologies in the fight against global health

threats as well as the need to sustain and protect U.S. investment in this important research. The Committee urges the FDA, CDC, and NIH to each create metrics to measure progress and to develop concrete plans to prioritize and incorporate global health research, product development, and regulation into the U.S. global health and development strategies, in line with the new HHS Global Health Strategy.

Human Services Transportation.—The Committee recommendation includes \$1,000,000 for a competitive grant to provide technical assistance to local government and nonprofit transportation providers. This assistance should focus on the most cost-effective ways to provide transportation assistance and information to persons with disabilities. In addition, because of rising fuel prices, such technical assistance should include expanding the use of accessible, fuel-efficient taxi service for persons with disabilities and those receiving dialysis. Congress appropriated \$998,000 for a similar purpose in fiscal year 2012.

Overdose Prevention.—Accidental deaths from overdose, particularly from prescription drugs such as opioids, are on the rise and have become the leading cause of preventable death for individuals under the age of 65 in the United States. The Committee strongly encourages the Secretary to launch a public awareness campaign to educate the public and health professionals about the signs, symptoms, and risk factors for overdose, as well as how individuals can make linkages to recovery and treatment services. The Committee urges the Secretary to develop the campaign with the participation of Federal agencies including SAMHSA, NIDA, HRSA, FDA, and the Office of National Drug Control Policy.

Pain Management.—A recent IOM report concluded that pain represents a public health crisis that impacts more than 1 out of every 3 adults, costs the American economy over \$560,000,000,000 in added healthcare costs and lost productivity, and results in unnecessary human suffering. The Committee requests that HHS develop a comprehensive plan with specific goals, actions, and timeframes regarding reducing barriers to pain management, educating the public, improving professional education, and refocusing pain research efforts at NIH. The Committee requests that this plan be submitted to the House and Senate Committees on Appropriations by March 2013.

Traumatic Brain Injury [TBI].—The Committee notes that TBI is a leading cause of death and disability worldwide, especially in children and young adults ages 1 to 44. Due to the high prevalence of TBI, the Committee believes there is a need for multidisciplinary approaches to rapid evaluation and diagnosis of injured patients who have the potential for the development of TBI, as well as the development of early intervention and treatment protocol for use in preventing TBI and improving patient outcomes. The Secretary is encouraged to support a competitively awarded program of academic centers focused on developing and implementing multidisciplinary approaches to the early diagnosis and innovative treatment models for TBI victims.

Urban-Based Network.—The Committee continues to encourage the Secretary and other agencies within the Department such as HRSA, AHRQ, CDC, CMS, and OMH to partner with NIMHD in

supporting a network of urban-based institutions focused on, and with demonstrated commitment and capacity to, addressing recruitment and training needs of minority and urban underserved populations and reducing health disparities in these urban communities.

Teen Pregnancy Prevention

The Committee recommendation includes \$113,047,000 for the Teenage Pregnancy Prevention [TPP] program, which is the same as the comparable funding level for fiscal year 2012. The recommendation includes \$8,455,000 in transfers available under section 241 of the PHS Act. The administration requests \$109,022,000 for the TPP program, with \$104,790,000 funded through transfers from the PPH Fund.

This program supports competitive grants to public and private entities to replicate evidence-based teen pregnancy prevention approaches. The Committee recommendation includes \$4,000,000 to continue the Federal evaluation of the projects funded by this program.

Office of Minority Health

The Committee recommends \$55,782,000, the same as the fiscal year 2012 funding level, for OMH. The administration request is \$41,100,000. OMH focuses on strategies designed to decrease health disparities and to improve the health status of racial and ethnic minority populations in the United States. OMH establishes goals and coordinates all departmental activity related to improving health outcomes for disadvantaged and minority individuals. The Committee strongly urges continuation of existing programs run by OMH to address health disparities in rural and disadvantaged populations.

The Committee recommendation includes \$1,000,000 to continue the national health education program on lupus for healthcare providers, with the goal of improving diagnosis for those with lupus and reducing health disparities. This program is intended to engage healthcare providers, educators, and schools of health professions in working together to improve lupus diagnosis and treatment through education.

Cancer in Asian/Pacific Islanders.—Asian and Pacific Islanders [API] have a high incidence of stomach cancer and liver cancers compared to Caucasians. The Committee continues to urge the Department to focus on the unique and pressing needs regarding cancer in the API population.

Chronic Kidney Disease [CKD].—The Committee continues to prioritize early detection and treatment of CKD in minority communities to improve health outcomes and eliminate health disparities. In particular, the Committee urges the Department to focus on the prevention of CKD in Filipino populations, who have one of the highest rates of incidence per capita. The Committee encourages OMH to partner with minority health professions schools to educate providers on the benefits and opportunities for early detection and treatment of CKD.

Health Disparities in Women.—Women of racial and ethnic minorities face higher rates of obesity, cancer, diabetes, heart disease,

HIV/AIDS, and other diseases when compared with white women. A disproportionately higher rate of preterm birth exists among African-American women that cannot be accounted for by known risk factors. The Committee encourages HHS to conduct research into the causes of these health disparities and develop and evaluate interventions to address these causes.

Hepatitis B.—The Committee urges OMH to expand hepatitis B outreach and preventive programs specific to API and other groups disproportionately affected by this disease.

Offices of Minority Health.—The Committee continues to be encouraged by the Department's implementation of the Action Plan to Reduce Racial and Ethnic Health Disparities, as well as the National Stakeholder Strategy for Achieving Health Equity. The Committee strongly supports the Offices of Minority Health in the Office of the Secretary, AHRQ, CDC, CMS, FDA, HRSA, and SAMHSA, which are charged with leading the strategy. The Secretary is encouraged to work closely with communities, as well as the public and private sectors, in this effort.

Office of Women's Health

The Committee recommends \$29,120,000, the same as the administration request, for OWH. The comparable level for fiscal year 2012 is \$33,682,000. OWH develops, stimulates, and coordinates women's health research, healthcare services, and public and healthcare professional education across the Department. It advances important crosscutting initiatives and develops public-private partnerships, providing leadership and policy direction, and initiating and synthesizing program activities to redress the disparities in women's health.

The Committee recommendation includes \$3,010,000 to continue the violence against women's initiative. This initiative provides funding to public health programs that integrate domestic and sexual violence assessment and intervention into basic care, as well as encourages collaborations between healthcare providers, public health programs, and domestic and sexual violence programs.

HIV/AIDS in Minority Communities

The Committee recommends \$53,681,000 for this program, which addresses high-priority HIV prevention and treatment needs of minority communities heavily impacted by HIV/AIDS. The funding level provided is the same as the comparable level for fiscal year 2012. The administration request is \$53,891,000. The Committee provides funding for this activity through budget authority, rather than through transfers available under section 241 of the PHS Act as requested by the administration. These funds are available to key operating divisions of the Department with expertise in HIV/AIDS services to assist minority communities with education, community linkages, and technical assistance.

Embryo Donation and Adoption

The Committee does not provide funding for embryo donation and adoption awareness activities, consistent with the administration request. The fiscal year 2012 funding level for this program is \$1,996,000. The Committee notes that this program has had a lim-

ited number of applicants since its inception and the administration has been unable to demonstrate its effectiveness.

OFFICE OF MEDICARE HEARINGS AND APPEALS

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$72,011,000 |
| Budget estimate, 2013 | 84,234,000 |
| Committee recommendation | 79,908,000 |

The Committee provides \$79,908,000 for OMHA. OMHA is responsible for hearing Medicare appeals at the administrative law judge level, which is the third level of Medicare claims appeals. The Office ensures that Medicare beneficiaries who are dissatisfied with the initial decisions about their benefits or eligibility can appeal and exercise their right to a hearing in front of an administrative law judge. The Committee recommendation provides additional funding to OMHA to address its growing backlog of cases and expand its capacity to adjudicate Medicare appeals.

OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$61,226,000 |
| Budget estimate, 2013 | 66,257,000 |
| Committee recommendation | 66,257,000 |

The Committee makes available \$66,257,000 to ONC, which includes \$49,842,000 in transfers available under section 241 of the PHS Act. ONC is responsible for promoting the use of electronic health records in clinical practice, coordinating Federal health information systems, and collaborating with the private sector to develop standards for a nationwide interoperable health information technology infrastructure.

OFFICE OF INSPECTOR GENERAL

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$50,083,000 |
| Budget estimate, 2013 | 58,579,000 |
| Committee recommendation | 55,483,000 |

The Committee recommends an appropriation of \$55,483,000 for the HHS OIG. In addition to discretionary funds provided in this act, the Health Insurance Portability and Accountability Act of 1996 provides a permanent appropriation of \$196,669,000 for OIG.

OIG conducts audits, investigations, and evaluations of the programs administered by the Department’s operating and staff divisions, including the recipients of the Department’s grant and contract funds. In doing so, OIG addresses issues of waste, fraud, and abuse and makes recommendations to improve the efficiency and effectiveness of the Department’s programs and operations. The recommended increase over the fiscal year 2012 level should be used to support staff previously funded through ARRA, who will be redirected toward other departmental priorities.

OFFICE FOR CIVIL RIGHTS

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$40,938,000 |
| Budget estimate, 2013 | 38,966,000 |
| Committee recommendation | 38,966,000 |

The Committee recommends \$38,966,000 for OCR, which is responsible for enforcing civil rights-related statutes in healthcare and human services programs. To enforce these statutes, OCR investigates complaints of discrimination, conducts program reviews to correct discriminatory practices, and implements programs to generate voluntary compliance among providers and constituency groups of health and human services. OCR also has responsibility for implementing and enforcing privacy protections under the HITECH Act.

RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED
OFFICERS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$497,350,000 |
| Budget estimate, 2013 | 527,151,000 |
| Committee recommendation | 527,151,000 |

The Committee provides an estimated \$527,151,000 in mandatory funds for retirement pay and medical benefits for commissioned officers of the U.S. Public Health Service [PHS]. This account provides for retirement payments to PHS officers who are retired due to age, disability, or length of service; payments to survivors of deceased officers; and medical care to active duty and retired officers, as well as their dependents.

PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$983,231,000 |
| Budget estimate, 2013 | 1,057,262,000 |
| Committee recommendation | 1,020,220,000 |

The Committee recommends \$1,020,220,000 for the Public Health and Social Services Emergency Fund [PHSSEF]. This appropriation supports the activities of ASPR and other components within the Office of the Secretary to prepare for the health consequences of bioterrorism and other public health emergencies, including pandemic influenza. It also provides funding for the Department's cybersecurity efforts.

The Committee does not support transferring additional balances from Public Law 111-32, the Supplemental Appropriations Act, 2009, to CDC as proposed by the administration. The Committee believes that the remaining supplemental funds should be used for the purposes for which they were intended, namely increasing domestic influenza vaccine production capacity, improving international pandemic preparedness efforts, and developing better vaccines, antivirals, and diagnostics. Specifically, the Committee strongly supports BARDA's International Influenza Vaccine Manufacturing Capacity Building Program. Through this program, HHS helps developing countries build sustainable influenza vaccine production capacity, which includes establishing manufacturing facilities and ensuring a skilled in-country workforce. So far, 12 developing countries have received technical and financial support from BARDA to establish influenza vaccine manufacturing capacity. In 2005, the capacity to produce pandemic influenza vaccine in these countries was less than 1 million doses. By 2016, continued financial support from BARDA will enable manufacturers in these countries to produce up to 300 million doses of vaccine to respond to a pandemic. The Committee notes that the capability of developing

countries to produce influenza vaccine within their borders is crucial to reducing the threat of a global pandemic. The Committee strongly urges BARDA to continue this effort with existing balances from the fiscal year 2009 supplemental.

Office of the Assistant Secretary for Preparedness and Response

The Committee recommendation includes \$944,821,000 for activities administered by ASPR. The administration request is \$981,863,000 and the comparable funding level for fiscal year 2012 is \$925,612,000. ASPR was created by the Pandemic and All-Hazards Preparedness Act to lead the Department's activities regarding preventing, preparing for, and responding to public health emergencies, including disasters and acts of terrorism.

Virtual Training.—The Committee notes the need, particularly at the local level, to improve surge capacity and enhance community and hospital preparedness for public health emergencies using today's enabling training technologies. Virtual training tools have the potential to revolutionize medical emergency response training with a corresponding reduction in costs. The Committee urges ASPR to develop and standardize such hospital preparedness training using state-of-the-art, 3D, medical response simulation technology with a goal of exporting it to all States to preclude redundant efforts.

Hospital Preparedness Program

The Committee's recommendation includes \$324,650,000 for the Hospital Preparedness Program [HPP]. The administration request for HPP is \$254,500,000 and the comparable funding level for fiscal year 2012 is \$374,650,000. This program provides grants to States and localities to enhance hospital preparedness and improve overall surge capacity in public health emergencies.

Funds will be used in fiscal year 2013 to transform HPP toward an emphasis on healthcare coalitions at the regional and community level rather than on individual hospitals. The Committee requests a multiyear plan from the Department describing this change. This plan should include the program's framework for determining funding levels for coalitions, strategies to improve coordination with public health departments, inclusion of nonacute hospitals and ambulatory care settings, and engagement with individual healthcare providers.

Medical Surge Capacity.—The ability of our healthcare system to quickly expand beyond normal capacity during a major emergency is critical in securing preparedness for our Nation. The Committee urges the Secretary to extend health system surge capacity by creating a national framework to guide States and local entities on developing crisis standards of care in the event of a mass casualty event or crisis. The Secretary should also clarify Federal law to implement uniform liability applying to all volunteer health professionals during a declared public health emergency.

Emergency System for Advance Registration of Volunteer Health Professionals [ESAR VHP]

The Committee recommendation includes \$4,989,000 for the ESAR VHP program. This amount is the same as the comparable

funding level for fiscal year 2012. This program is a national network of State-based registries that allows health professionals to volunteer in public health emergencies and disasters.

The administration requests \$500,000 for this program and proposes discontinuing these grants, noting that all 50 States and the District of Columbia have developed ESAR VHP programs. However, the Committee believes that ESAR VHP is a critical component of providing workforce surge capacity in the event of a public health emergency. For this reason, the Committee provides continued funding for the ESAR VHP program and expects grantees to use the funds to support volunteer recruitment and retention, training and coordination, and integration of ESAR VHP with the Medical Reserve Corps at the State and local level.

Biomedical Advanced Research and Development

The Committee recommendation includes \$465,000,000 for advanced research and development. The administration request is \$546,671,000 for this activity and the comparable funding level for fiscal year 2012 is \$415,000,000. As in previous years, the Committee includes bill language to transfer \$415,000,000 from the Project BioShield Special Reserve Fund advance appropriation to fund advanced research and development of medical countermeasures. This amount is the same as the administration request and the comparable level from fiscal year 2012.

Advanced Research and Development.—The fiscal year 2012 Senate Report included language encouraging ASPR to work with NIAID to ensure that sufficient research is being conducted to develop a bioagent detection and bioterrorism warning system based on bioinformatics technology that would allow for the direct identification and sample characterization of pathogens in rapid fashion. The Committee requests an update on these efforts within 60 days of enactment of this act.

Anthrax.—The Committee continues to be concerned about the country's level of preparedness against biological threats, most particularly anthrax. The Committee notes that BARDA is moving forward with developing a variety of countermeasures to anthrax, including antitoxins, enhancements to the current AVA vaccine, and most importantly a next generation recombinant vaccine. The Committee expects BARDA to keep it informed of its progress in developing a recombinant anthrax vaccine for the Strategic National Stockpile [SNS].

Antibiotic Research and Development.—The Committee recognizes that the increasing failure of approved, life-saving antibiotics, as well as the plummeting number of new antibiotics in development, seriously threatens our Nation's health and potentially our security. The Committee encourages BARDA to continue awarding contracts for promising new antibiotics that otherwise might not make it to market due to existing challenges and particularly for new antibiotics intended to treat multidrug-resistant pathogens.

Multiyear Planning Process.—The Committee notes that the 2010 review of the Public Health Emergency Medical Countermeasure Enterprise endorsed a 5-year planning process to enable the Department to forecast, plan for, and communicate its long-range advanced development needs. The Committee directs the Department

to report on the implementation of such a coordinated 5-year budgetary planning process based on medical countermeasure priorities and goals not later than 180 days after the date of enactment of this act, and every year thereafter. This report should include specific information on the Department's planned investments for the next 5-year fiscal period, including: the cost of procuring and maintaining all materials placed in SNS, the costs associated with maintaining existing research and development contracts for medical countermeasures, and the costs associated with anticipated new research and development contracts for medical countermeasures.

Strategic Investor

The Committee recommendation includes \$20,000,000 to create the Strategic Investor program. The purpose of this program is to provide financial support and business expertise to emerging bio-defense companies that develop medical countermeasures for the Federal stockpile. The administration requests \$50,000,000 for this activity. Funding was not provided in fiscal year 2012.

Medical Countermeasure Dispensing

The Committee recommendation includes \$5,000,000, the same as the administration request, for the Medical Countermeasure Dispensing program. Funding for this program was last provided in fiscal year 2010.

Funding provided by the Committee will support the continued implementation of the National Postal Model, which provides for the delivery of medical countermeasures through the U.S. Postal Service during a bioterrorist attack.

Other Activities

The Committee recommendation includes the following amounts for the following activities within ASPR:

- Operations—\$32,981,000;
- Preparedness and Emergency Operations—\$24,647,000;
- National Disaster Medical System—\$52,390,000; and
- Policy, Strategic Planning, and Communications—\$15,164,000.

Office of the Assistant Secretary for Administration

The Committee recommends \$40,000,000 for information technology cybersecurity in the Office of the Assistant Secretary for Administration. This amount is the same as the administration request. The comparable funding level for fiscal year 2012 is \$39,924,000. These funds provide for continuous monitoring and security incident response coordination for the Department's computer systems and networks.

Office of the Assistant Secretary for Health

The Committee recommendation includes \$10,971,000, the same as the administration request, for the medical reserve corps program in ASH. This program is a national network of local volunteers who work to strengthen the public health infrastructure and preparedness capabilities of their communities. The comparable funding level for fiscal year 2012 is \$11,247,000.

Office of the Secretary

The Committee recommendation includes \$24,428,000 for activities within the Office of the Secretary. This amount is the same as the administration request. The comparable fiscal year 2012 funding level is \$6,448,000.

Lease Replacement

The Committee recommendation includes \$17,000,000, the same as the administration request, for relocation and fit-out costs associated with new long-term leases for HHS agencies. In fiscal year 2012 funding for this activity was provided in the accounts of each HHS agency.

Office of Security and Strategic Information

The Committee includes \$7,428,000 for the Office of Security and Strategic Information to secure and strengthen the Department's critical assets. This amount is the same as the administration request. The comparable level for fiscal year 2012 is \$6,448,000.

PREVENTION AND PUBLIC HEALTH FUND

The PPH Fund was created in section 4002 of PPACA. The fund provides \$12,500,000,000 in mandatory funds over the next 10 years to supplement investments in public health and prevention.

The Committee strongly believes that additional resources for prevention will improve people's health and reduce healthcare costs over the long term. Discretionary funding is needed for these purposes because many of the health promotion activities that reach the populations most in need take place outside the reimbursement system, through community- and State-based initiatives.

In recognition of the Committee's responsibility to determine funding levels for community-based prevention and public health programs, PPACA specifically gives the Committee authority to transfer funds into Federal programs that support the goal of making America healthier.

In fiscal year 2013, the level appropriated for the fund is \$1,000,000,000, the same as the fiscal year 2012 level. The Committee includes bill language in section 220 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 | Account | Program | Committee recommendation |
|-----------|---|--|--------------------------|
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Community Transformation Grants | \$280,000,000 |
| CDC | Immunization and Respiratory Diseases ... | Section 317 Immunization Grants | 190,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Office of Smoking and Health | 95,000,000 |
| CDC | CDC-Wide Activities | Public Health Infrastructure grants | 40,200,000 |
| CDC | Emerging and Zoonotic Infectious Diseases | Epidemiology and Laboratory Capacity Grants. | 40,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Racial and Ethnic Approaches to Community Health. | 40,000,000 |
| CDC | Environmental Health | Environmental and Health Outcome Tracking Network. | 35,000,000 |
| CDC | Public Health Scientific Services | Health Surveillance and Statistics | 35,000,000 |

| Agency | Account | Program | Committee recommendation |
|--------------|---|---|--------------------------|
| SAMHSA | Mental Health | Primary and Behavioral Healthcare Integration. | 35,000,000 |
| CDC | CDC-Wide Activities | Public Health Workforce | 25,000,000 |
| HRSA | Health Workforce | Public Health Training Centers | 25,000,000 |
| SAMHSA | Substance Abuse Treatment | Screening, Brief Intervention and Referral to Treatment. | 25,000,000 |
| SAMHSA | Health Surveillance and Program Support. | Surveillance activities | 18,000,000 |
| CDC | Emerging and Zoonotic Infectious Diseases. | Healthcare Associated Infections | 11,750,000 |
| ACL | Aging and Disability Services | Chronic Disease Self Management | 10,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Diabetes Prevention Program | 10,000,000 |
| CDC | Public Health Scientific Services | Guide to Community Preventive Services ... | 10,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Prevention Research Centers | 10,000,000 |
| CDC | HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. | Viral Hepatitis Screening | 10,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Workplace Wellness grants | 10,000,000 |
| SAMHSA | Mental Health | Suicide Prevention | 10,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Breast Feeding Promotion and Support Grants. | 7,050,000 |
| AHRQ | Health Costs, Quality, and Outcomes | U.S. Preventive Services Task Force | 7,000,000 |
| ACL | Aging and Disability Services | Elderly Falls Prevention | 7,000,000 |
| AHRQ | Health Costs, Quality, and Outcomes | Clinical Prevention Research Centers for Excellence. | 5,000,000 |
| CDC | Chronic Disease Prevention, Health Promotion, and Genomics. | Million Hearts Program | 5,000,000 |
| CDC | Injury Prevention and Control | Elderly Falls Prevention | 3,000,000 |
| CDC | CDC-Wide Activities | National Prevention, Health Promotion, and Public Health Council. | 1,000,000 |

GENERAL PROVISIONS

Section 201. The bill continues a provision placing a \$50,000 ceiling on official representation expenses.

Section 202. The bill continues a provision that limits the assignment of certain public health personnel.

Section 203. The bill continues a provision limiting the use of certain grant funds to pay individuals more than an annual rate of executive level II.

Section 204. The Committee recommendation continues a provision restricting the Secretary's use of taps for program evaluation activities unless a report is submitted to the Appropriations Committees of the House and Senate on the proposed use of funds.

Section 205. The Committee recommendation continues a provision authorizing the transfer of up to 2.5 percent of PHS Act funds for evaluation activities.

Section 206. The Committee recommendation continues a provision restricting transfers of appropriated funds and requires a 15-day notification to both the House and Senate Appropriations Committees.

Section 207. The Committee recommendation continues a provision permitting the transfer of up to 3 percent of AIDS funds among ICs by the Director of NIH and the Director of the Office of AIDS Research at NIH.

Section 208. The Committee recommendation retains language which requires that the use of AIDS research funds be determined

jointly by the Director of NIH and the Director of the Office of AIDS Research and that those funds be allocated directly to the Office of AIDS Research for distribution to the Institutes and Centers consistent with the AIDS research plan.

Section 209. The Committee recommendation continues a provision regarding requirements for family planning applicants.

Section 210. The Committee recommendation retains language which states that no provider services under title X of the PHS Act may be exempt from State laws regarding child abuse.

Section 211. The Committee recommendation retains language which restricts the use of funds to carry out the Medicare Advantage Program if the Secretary denies participation to an otherwise eligible entity.

Section 212. The Committee recommendation modifies a provision which facilitates the expenditure of funds for international health activities.

Section 213. The Committee recommendation continues a provision authorizing the Director of NIH to enter into certain transactions to carry out research in support of the NIH Common Fund.

Section 214. The Committee continues a provision that permits CDC and the Agency for Toxic Substances and Disease Registry to transfer funds that are available for Individual Learning Accounts to "Disease Control, Research, and Training".

Section 215. The Committee recommendation includes bill language allowing use of funds to continue operating the Council on Graduate Medical Education.

Section 216. The Committee recommendation continues a provision permitting NIH to use up to \$3,500,000 per project for improvements and repairs of facilities.

Section 217. The Committee recommendation includes a provision that transfers funds from NIH to HRSA and AHRQ, to be used for National Research Service Awards.

Section 218. The Committee recommendation modifies a provision requiring a publicly available Web site that details expenditures from the PPH Fund.

Section 219. The Committee recommendation includes a new provision that rescinds unobligated mandatory funds from the Abstinence Education program.

Section 220. The Committee recommendation includes a new provision transferring mandatory funds from section 4002 of the Patient Protection and Affordable Care Act to accounts within the Department for activities outlined under the heading "Prevention and Public Health Fund" in this report.

Section 221. The Committee recommendation includes a new provision that allows the Director of CDC to detail staff in response to a public health emergency.

Section 222. The Committee recommendation includes a new provision requiring fiscal year 2014 budget justifications to include certain FTE information with respect to PPACA.

Section 223. The Committee includes a new provision requiring the Secretary to respond to certain correspondence.

TITLE III
DEPARTMENT OF EDUCATION
EDUCATION FOR THE DISADVANTAGED

| | |
|--------------------------------|------------------|
| Appropriations, 2012 | \$15,741,703,000 |
| Budget estimate, 2013 | 15,530,002,000 |
| Committee recommendation | 15,840,103,000 |

The Committee recommends an appropriation of \$15,840,103,000 for education for the disadvantaged.

The President’s budget was based on the administration’s proposal to reauthorize the ESEA, but no such bill has passed the Senate. As a result, the Committee bill is based on current law for programs authorized under the ESEA.

The programs in the Education for the Disadvantaged account help ensure that poor and low-achieving children are not left behind in the Nation’s effort to raise the academic performance of all children and youth. Funds appropriated in this account primarily support activities in the 2013–2014 school year.

Grants to Local Educational Agencies

Title I grants to LEAs provide supplemental education funding, especially in high-poverty areas, for local programs that provide extra academic support to help raise the achievement of eligible students or, in the case of schoolwide programs, help all students in high-poverty schools meet challenging State academic standards.

The Committee recommends \$14,616,457,000 for the title I grants to LEAs program. The comparable fiscal year 2012 level and budget request also are \$14,516,457,000.

Title I grants are distributed through four formulas: basic, concentration, targeted, and education finance incentive grant [EFIG].

For title I basic grants, including up to \$3,984,000 transferred to the Census Bureau for poverty updates, the Committee recommends an appropriation of \$6,577,904,000, the same amount as the fiscal year 2012 level and budget request.

For concentration grants, the Committee recommends \$1,362,301,000, the same amount as the fiscal year 2012 level and budget request.

For grants through the targeted formula, the Committee recommends \$3,338,126,000. The comparable fiscal year 2012 level and budget request are \$3,288,126,000.

For grants through the EFIG formula, the Committee recommends \$3,338,126,000. The comparable fiscal year 2012 level and budget request are \$3,288,126,000.

Of the funds available for title I grants to LEAs, up to \$3,984,000 shall be available on October 1, 2012; \$3,771,296,000 will become available on July 1, 2013; and \$10,841,177,000 will become avail-

able on October 1, 2013. The funds that become available on July 1, 2013, and October 1, 2013, will remain available for obligation through September 30, 2014.

The Committee notes that the biggest barrier for homeless children and youth attempting to enroll in and attend school regularly is the lack of transportation. The Committee bill includes a new provision clarifying that title I funds may be used to address this transportation issue, as well as support homeless liaisons.

The Committee also notes that the ESEA allows title I funds to be used to implement integrated student support services that address both the academic and nonacademic needs of students through partnerships of schools and nonprofit providers. The Committee believes, at the discretion of schools choosing to use funds for such activities, that such decisions should be based on evidence that the activities implemented will have a significant effect on student outcomes.

School Improvement Grants

The Committee recommendation includes \$533,552,000, the same amount as the fiscal year 2012 level and budget request, for the SIG program.

The Committee continues authority provided by prior appropriations acts that addresses several issues. First, it continues the expansion of the number of schools that may receive funds through the program. This language allows schools to be eligible for SIG if they are eligible for title I and have not made adequate yearly progress for at least 2 years or are in the State's lowest quintile of performance based on proficiency rates. Second, language also allows States to make subgrants of not more than \$2,000,000 to each participating school. And, a set-aside of up to 5 percent of the SIG appropriation may be used for national activities.

The Committee continues to believe that the SIG program holds great promise for improving outcomes for students in our Nation's lowest-achieving schools. At the request of three Committee members, the GAO analyzed certain aspects of the SIG program, focusing particularly on challenges for successful SIG implementation, the Department's technical assistance and oversight activities, and State administration of SIG. Interim and final reports released during the past 12 months identified, among other things, that local capacity—such as the ability to attract and retain administrative staff with school turnaround expertise or high-quality teachers—influenced implementation, and that SIG interventions were often challenging for low-capacity districts. Further, the GAO found that third-party contractors rarely were reviewed for contract performance. The Committee believes the Department should implement effective strategies that address the GAO's findings as soon as possible.

The Committee also notes that Federal and non-Federal investments in school turnaround and comprehensive school reform have identified, developed, or supported research-proven, replicable models for struggling schools. Such schools now have a growing number of options to match their needs. Therefore, the Committee bill includes new language that will allow schools that receive SIG funds

the flexibility to choose and implement a research-proven, whole-school reform model.

The Committee believes that the Department needs to take additional steps to support parent engagement and family support through SIG and other programs and activities. The Committee notes that evidence-based parent education and family support models have been shown to increase parent knowledge of child development; provide early detection of developmental delays; and increase children's school readiness and school success. The Committee directs the Department to address this issue through its national activities set-aside and other appropriate actions.

Striving Readers

The Committee recommends \$159,698,000, the same amount as the comparable fiscal year 2012 level, to continue the Striving Readers initiative. The budget request proposes to consolidate this funding within a new Effective Teaching and Learning program under the administration's reauthorization proposal.

The Committee bill includes language that continues the competitive portion of the program as it was established in the fiscal year 2010 appropriations act. This comprehensive literacy program will advance literacy skills for all students, including English language learners and students with disabilities, from birth through grade 12.

Migrant Education Program

The Committee recommends \$393,236,000, the same as the fiscal year 2012 level and budget request, for the migrant education program.

The title I migrant education program authorizes grants to SEAs for programs to meet the special educational needs of the children of migrant agricultural workers and fishermen. This appropriation also supports activities to improve interstate and intrastate coordination of migrant education programs, as well as identify and improve services to the migrant student population.

Neglected and Delinquent

The Committee recommends \$50,231,000, the same amount as the fiscal year 2012 level and budget request, for the title I neglected and delinquent program.

This program provides financial assistance to SEAs for education services to neglected and delinquent children and youth in State-run institutions and for juveniles in adult correctional institutions. States are authorized to set aside at least 15 percent, but not more than 30 percent, of their neglected and delinquent funds to help students in State-operated institutions make the transition into locally operated programs and to support the successful re-entry of youth offenders who are age 20 or younger and have received a secondary school diploma or its recognized equivalent.

Evaluation

The Committee recommends \$1,594,000 for evaluation of title I programs. The budget request proposes to fund evaluation efforts through a comprehensive evaluation authority contained in the ad-

ministration's reauthorization proposal. The comparable fiscal year 2012 amount is \$3,194,000.

Evaluation funds are used to support large-scale national surveys that examine how the title I program is contributing to student academic achievement. Funds also are used to evaluate State assessment and accountability systems and analyze the effectiveness of educational programs supported with title I funds.

The Committee bill also includes a new general provision in this title that clarifies the Department's authority to reserve up to 0.5 percent of each ESEA appropriation in the bill for evaluation of ESEA programs funded in this act. These resources are in addition to any funds specifically provided for evaluation purposes. The Department shall provide the Senate Committees on Appropriations and HELP with an evaluation plan not later than 10 days before the initial obligation of funds under the provision.

High School Graduation Initiative

The Committee recommends \$48,809,000, the same amount as the fiscal year 2012 level, for the High School Graduation Initiative under title I, part H of the ESEA. The budget request does not include any funding for this program but proposes to fund related activities through a broader College Pathways and Accelerated Learning program.

The High School Graduation Initiative provides competitive grants to LEAs or SEAs to implement effective high school graduation and re-entry strategies in schools and districts that serve students in grades 6 through 12 and have annual school dropout rates that are above their State's average. Funds also are used for certain national activities, including evaluation, technical assistance, and dissemination of information on effective programs and best practices.

Special Programs for Migrant Students

The Committee recommends \$36,526,000, the same amount as the fiscal year 2012 level and budget request, for Special Programs for Migrant Students.

The Higher Education Opportunity Act of 2008 reauthorized the High School Equivalency Program [HEP] and College Assistance Migrant Program [CAMP] within the Special Programs for Migrant Students, and added a new provision allowing the Department to reserve up to 0.5 percent of the funds appropriated between the two programs for outreach, technical assistance, and professional development activities. In addition, under current law, if the total amount appropriated is below \$40,000,000, the remaining funds are to be distributed between the two programs in the same proportion as the amounts available for each program the previous year.

HEP projects are 5-year grants to institutions of higher education and other nonprofit organizations to recruit migrant students ages 16 and older and provide the academic and support services needed to help them obtain a high school equivalency certificate and subsequently gain employment, win admission to a post-secondary institution or a job-training program, or join the military.

CAMP projects are 5-year grants to institutions of higher education and nonprofit organizations to provide tutoring, counseling, and financial assistance to migrant students during their first year of postsecondary education.

IMPACT AID

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,291,186,000 |
| Budget estimate, 2013 | 1,224,239,000 |
| Committee recommendation | 1,291,186,000 |

The Committee recommends \$1,291,186,000 for impact aid.

Impact aid provides financial assistance to school districts for the costs of educating children when enrollments and the availability of revenues from local sources have been adversely affected by the presence of Federal activities. Children who reside on Federal or Indian lands generally constitute a financial burden on local school systems because these lands do not generate property taxes—a major revenue source for elementary and secondary education in most communities. In addition, realignments of U.S. military forces at bases across the country often lead to influxes of children into school districts without producing the new revenues required to maintain an appropriate level of education.

The Committee bill retains language that provides for continued eligibility for students affected by the deployment or death of their military parent, as long as these children still attend schools in the same school district.

Basic Support Payments.—The Committee recommends \$1,153,540,000, the same amount as the fiscal year 2012 level and budget request, for basic support payments. Under this statutory formula, payments are made on behalf of all categories of federally connected children, with a priority placed on making payments first to heavily impacted school districts and providing any remaining funds for regular basic support payments.

Payments for Children With Disabilities.—The Committee bill includes \$48,413,000, the same amount as the fiscal year 2012 level and the budget request, for payments for children with disabilities. Under this program, additional payments are made for certain federally connected children eligible for services under IDEA.

Facilities Maintenance.—The Committee recommends \$4,845,000, the same amount as the fiscal year 2012 level and budget request, for facilities maintenance. This activity provides funding for emergency repairs and comprehensive capital improvements to certain school facilities owned by the Department and used by LEAs to serve federally connected military dependent students. Funds appropriated for this purpose are available until expended.

Construction.—The Committee recommends \$17,441,000, the same amount as the fiscal year 2012 level and budget request, for the construction program. Formula and competitive grants are authorized to be awarded to eligible LEAs for emergency repairs and modernization of school facilities.

The Committee recommendation includes bill language allowing these funds to be awarded entirely through the authorized formula. The budget request proposes to award funds on a competitive basis. Last year's bill provided these funds entirely through competitive allocations.

Payments for Federal Property.—The Committee recommends \$66,947,000, the same amount as the fiscal year 2012 level, for payments for Federal property. The budget request eliminates funding for this program. These payments compensate LEAs in part for revenue lost due to the removal of Federal property from local tax rolls.

SCHOOL IMPROVEMENT PROGRAMS

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$4,544,596,000 |
| Budget estimate, 2013 | 2,436,203,000 |
| Committee recommendation | 4,544,596,000 |

The Committee recommendation includes \$4,544,596,000 for school improvement programs.

The President's budget was based on the administration's proposal to reauthorize the ESEA, but no such bill has passed the Senate. As a result, programs in this account are based generally on current law, as authorized under the ESEA.

Effective Teaching and Learning: Literacy

The Committee recommends no funds for the proposed Effective Teaching and Learning: Literacy program. The budget request is \$186,892,000. Activities supported under this proposed program are instead funded under current law.

The Effective Teaching and Learning: Literacy program would provide competitive grants to SEAs, or SEAs in partnership with appropriate outside entities, to support development and implementation of comprehensive, evidence-based State and local efforts to provide high-quality literacy programs aligned with college- and career-ready English language standards.

Effective Teaching and Learning: Science, Technology, Engineering, and Mathematics

The Committee recommends no funds for the proposed Effective Teaching and Learning: STEM program. The budget request is \$149,716,000. Activities supported under this proposed program are instead funded under current law.

The Effective Teaching and Learning: STEM would provide competitive grants to SEAs, or SEAs in partnership with appropriate outside entities, to support State and local efforts to implement a comprehensive strategy for the provision of high-quality STEM instruction and support to students from preschool through grade 12.

Effective Teaching and Learning for a Well-Rounded Education

The Committee recommends no funds for the proposed Effective Teaching and Learning for a Well-Rounded Education program. The budget request is \$90,000,000. Activities supported under this proposed program are instead funded under current law.

The Effective Teaching and Learning for a Well-Rounded Education program would provide competitive grants to high-need LEAs, SEAs, and institutions of higher education or nonprofit organizations in partnership with one or more high-need LEAs to support the development and expansion of innovative practices to improve teaching and learning across a well-rounded curriculum that includes the arts, health education, physical education, foreign lan-

guages, civics and government, history, geography, environmental education, economics and financial literacy, and other subjects.

College Pathways and Accelerated Learning

The Committee recommends no funds for the proposed College Pathways and Accelerated Learning program. The budget request is \$81,282,000. Activities supported under this proposed program are instead funded under current law.

The College Pathways and Accelerated Learning program would support efforts to increase high school graduation rates and preparation for college matriculation and success by providing college-level and other accelerated courses and instruction in middle and high schools with concentrations of students from low-income families and in high schools with low graduation rates.

State Grants for Improving Teacher Quality

The Committee recommends \$2,466,567,000, the same amount as the fiscal year 2012 level, for State grants for improving teacher quality. The budget request does not include any funding for this program but instead proposes \$2,466,567,000 for a new Effective Teacher and Leaders State Grants program within the Innovation and Improvement account.

The appropriation for this program primarily supports activities associated with the 2013–2014 academic year. Of the funds provided, \$785,126,000 will become available on July 1, 2013, and \$1,681,441,000 will become available on October 1, 2013. These funds will remain available for obligation through September 30, 2014.

States and LEAs may use funds for a range of activities related to the certification, recruitment, professional development, and support of teachers and administrators. Activities may include reforming teacher certification and licensure requirements, addressing alternative routes to State certification of teachers, recruiting teachers and principals, and implementing teacher mentoring systems, teacher testing, merit pay, and merit-based performance systems. These funds may also be used by districts to hire teachers to reduce class sizes.

The Committee bill modifies a set-aside included in prior year bills for competitive awards to national not-for-profit organizations for recruiting, training, or providing professional enhancement activities for teachers or teachers and school leaders, particularly for high-need schools most likely to face shortages in these areas. The Committee recommends that up to 5.5 percent of funds available for the State grants for improving teacher quality program shall be used for this purpose; in fiscal year 2012, the set-aside was 1.5 percent. The bill language also differs slightly from prior years by allowing up to 10 percent of the set-aside funds to be used for related research, development, evaluation, dissemination, and technical assistance.

Mathematics and Science Partnerships

The Committee recommends \$149,716,000, the same as the comparable fiscal year 2012 level, for the mathematics and science partnerships program. The budget request does not include any

funding for this program but instead proposes \$149,716,000 for a new Effective Teaching and Learning: STEM program.

The ESEA requires that when the appropriation for this program is higher than \$100,000,000, the funds are to be distributed to States by formula. The Committee has been concerned that at recent appropriations levels, this funding has been spread too thinly among the States to make a significant impact.

At the recommended funding level, the ESEA requires the Department to make competitive awards to eligible partnerships, which must include an engineering, math, or science department of an institution of higher learning and a high-need LEA. Partnerships will seek to improve the performance of students in the areas of math and science, including engineering, by bringing math and science teachers in elementary and secondary schools together with scientists, mathematicians, and engineers to increase the teachers' subject-matter knowledge and improve their teaching skills.

The Committee notes that it is including additional resources under FIE to create a new, evidence-based grant competition jointly administered by the Department and NSF that will focus on developing, evaluating, and scaling-up effective practices that can help increase student achievement in mathematics, and for related activities.

Supplemental Education Grants

The Committee recommendation includes \$17,619,000, the same amount as the fiscal year 2012 level and budget request, for supplemental education grants to the Republic of Marshall Islands [RMI] and the Federated States of Micronesia [FSM].

This grant program was authorized by the Compact of Free Association Amendments Act of 2003. These funds will be transferred from the Department to the Secretary of the Interior for grants to these entities. The Committee bill continues language that allows up to 5 percent to be used by the FSM and RMI to purchase oversight and technical assistance, which may include reimbursement to the Departments of Labor, HHS, and Education for such services.

21st Century Community Learning Centers

The Committee recommends an appropriation of \$1,151,673,000, the same amount as the fiscal year 2012 level and budget request, for the 21st Century Community Learning Centers program.

Funds are allocated to States by formula, which in turn, award at least 95 percent of their allocations to LEAs, community-based organizations and other public and private entities. Grantees use these resources to establish or expand community learning centers that provide activities offering significant extended learning opportunities, such as before- and afterschool programs, recreational activities, drug and violence prevention, and family literacy programs for students and related services to their families. Centers must target their services to students who attend schools that are eligible to operate a schoolwide program under title I of the ESEA or serve high percentages of students from low-income families.

A growing body of evidence demonstrates that students benefit academically from a longer school day, week, and year. The Com-

mittee notes that some school districts have adopted strategies to extend the school day without significant new investments, such as through staggered school schedules and innovative partnerships with community partners.

The Committee bill includes new language to expand the design options for subgrants under the 21st CCLC program for high-quality, afterschool, before school, summer learning, and expanded learning time programs.

The Committee believes that SEAs should award grants to high-quality programs that address individual student learning needs and student well-being. Funded programs should deliver services through a variety of high-quality and effective strategies for boosting learning and enrichment including afterschool, before school, summer school, or expanded day, week, or year opportunities; align with and complement, rather than replicate, the regular school day, by offering a range of activities that capture student interest and support student engagement to promote higher class attendance, reduce risk for retention or dropping out, and foster good health; integrate academics, enrichment, and skill development through hands-on experiences that make learning relevant and engaging; and actively address the specific learning needs and interests of all types of students, especially those who may benefit from approaches and experiences not offered in the traditional classroom setting.

The Committee urges the Department to provide guidance and technical assistance to States, schools, and community partners on how to develop and maintain strong community-school partnerships, implement continuous quality improvement processes, and ensure that programs meet the needs of individual students. The Committee also urges the Department to consult with experts in the field, including State and local intermediaries, in creating and providing such guidance and technical assistance. The Committee directs the Department to refrain from giving priority to, showing preference for, or providing direction about whether communities should use these funds for afterschool, before school, summer school, or expanded school day programs, unless specifically requested by SEAs or LEAs.

The Committee also directs the Secretary to report to Congress on the progress of the ESEA—No Child Left Behind waiver process initiated in the fall of 2011, specifically in terms of the impact on the 21st Century Community Learning Centers and student participation in, and access to, afterschool, before school, and summer learning programs, as a result of the flexibility provided to SEAs under waiver option 11. The Department should report on the number of children served and the centers/sites offering expanded learning in the 3 years preceding the waiver approval and the 3 years following waiver approval, as well as the number of hours of and diversity of programming available to students through such grants at each site and the average cost of the programs (per student and per site) before and after waiver approval. All data should be provided at the State level.

State Assessments and Enhanced Assessment Instruments

The Committee recommends \$389,214,000, the same amount as the fiscal year 2012 level and budget request, for State assessments and enhanced assessment instruments.

This program has two components. The first provides formula grants to States to pay the cost of developing and implementing standards and assessments required by the ESEA. The Committee provides \$380,000,000 for this purpose.

Under the second component—grants for enhanced assessment instruments—appropriations in excess of the State assessment program are used for a competitive grant program designed to support efforts by States to improve the quality and reliability of their assessment systems. The Committee recommendation for the second component is \$9,214,000.

The Committee urges the Department to place a high priority in the fiscal year 2013 enhanced instruments grant competition on improving the quality of State assessments for students with disabilities and students with limited English proficiency, and to ensure the most accurate means of measuring their performance on these assessments.

Education for Homeless Children and Youth

For carrying out education activities authorized by title VII, subtitle B of the Stewart B. McKinney Homeless Assistance Act, the Committee recommends \$65,173,000. This amount is the same as the budget request and the comparable fiscal year 2012 level.

This program provides assistance to each State to support an office of the coordinator of education for homeless children and youth, to develop and implement State plans for educating homeless children, and to make subgrants to LEAs to support the education of those children. Grants are made to States based on the total that each State receives in title I grants to LEAs.

Under the McKinney-Vento Homeless Children and Youth Program, SEAs must ensure that homeless children and youth have equal access to the same free public education, including a public preschool education, as is provided to other children and youth.

The Committee bill also includes language under the Education for the Disadvantaged account clarifying the availability of title I funds for services to homeless children and youths.

Training and Advisory Services

For training and advisory services authorized by title IV of the Civil Rights Act, the Committee recommends \$6,962,000. This is the same amount as the budget request and the comparable fiscal year 2012 level.

The funds provided will support awards to operate the 10 regional equity assistance centers [EACs]. Each EAC provides services to school districts upon request. Activities include disseminating information on successful practices and legal requirements related to nondiscrimination on the basis of race, color, sex, or national origin in education programs.

Education for Native Hawaiians

For programs for the education of Native Hawaiians, the Committee recommends \$34,181,000. This is the same amount as the budget request and the comparable fiscal year 2012 amount.

The Committee bill continues a provision that allows funding provided by this program to be used for construction.

Alaska Native Educational Equity

The Committee recommends \$33,185,000, the same amount as the fiscal year 2012 level and budget request, for the Alaska Native educational equity assistance program.

These funds address the severe educational handicaps of Alaska Native schoolchildren. Funds are used for the development of supplemental educational programs to benefit Alaska Natives. The Committee bill continues language that allows funding provided by this program to be used for construction. The Committee bill also includes language overriding the authorizing statute's requirement to make noncompetitive awards to certain organizations.

The Committee is aware that the ESEA includes a priority for funding under this program for applications from Alaska Native regional nonprofit organizations, or consortia that include at least one Alaska Native regional nonprofit organization. Therefore, the Committee directs the Department to distribute funding for new awards under this program based only on the priority authorized under part C of title VII of the ESEA. Within 180 days of enactment of this act, the Committee also directs the Department to prepare and submit a report on activities funded under this program, including how such activities are achieving the purposes of the program as authorized in the ESEA. The report should also include a plan on how the Department will work to improve consultation with and participation of Alaska Native organizations, Alaska Native regional nonprofit organizations, or consortia that include at least one Alaska Native regional nonprofit organizations in the program.

Rural Education

The Committee recommends \$179,193,000, the same amount as the fiscal year 2012 level and budget request, for rural education programs.

The Committee expects that rural education funding will be equally divided between the Small, Rural Schools Achievement Program, which provides funds to LEAs that serve a small number of students, and the Rural and Low-Income Schools Program, which provides funds to LEAs that serve concentrations of poor students, regardless of the number of students served.

Comprehensive Centers

The Committee recommends \$51,113,000, the same amount as the fiscal year 2012 level and budget request, for the comprehensive centers program.

These funds provide support to a network of comprehensive centers that are operated by research organizations, agencies, institutions of higher education, or partnerships thereof, and provide training and technical assistance on various issues to States, LEAs,

and schools as identified through needs assessments undertaken in each region. The system currently includes 16 regional centers, which are charged with providing intensive technical assistance to SEAs to increase their capacity to assist LEAs and schools with meeting the goals of the ESEA, and content centers, which are organized by topic area.

The Committee strongly supports the mission of the centers, particularly with regard to their role in helping develop State capacity to meet the needs of LEAs and schools. The Committee also believes that the centers play an important part in the Department's system of technical assistance and appreciates the steps the Department has taken to align and coordinate its various technical assistance activities. The Committee encourages the Department to continue its efforts in coordinating its technical assistance activities and requests that the Department describe these efforts and future plans in the fiscal year 2014 congressional budget justification.

INDIAN EDUCATION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$130,779,000 |
| Budget estimate, 2013 | 130,779,000 |
| Committee recommendation | 130,779,000 |

The Committee recommends \$130,779,000 for Indian education programs.

Grants to Local Educational Agencies

For grants to LEAs, the Committee recommends \$105,921,000, the same amount as the fiscal year 2012 level and budget request.

These funds provide financial support to elementary and secondary school programs that serve Indian students, including pre-school children. Funds are awarded on a formula basis to LEAs, schools supported and operated by the Department of the Interior/Bureau of Indian Education, and in some cases directly to Indian tribes.

Special Programs for Indian Children

The Committee recommends \$18,986,000, the same amount as the fiscal year 2012 level and budget request, for special programs for Indian children.

Funds are used for demonstration grants to improve Indian student achievement through early childhood education and college preparation programs, and for professional development grants for training Indians who are preparing to begin careers in teaching and school administration.

National Activities

The Committee recommends \$5,872,000, the same amount as the comparable fiscal year 2012 funding level and budget request, for national activities.

Funds will be used to expand efforts to improve research, evaluation, and data collection on the status and effectiveness of Indian education programs, and to continue grants to tribal educational departments for education administration and planning.

INNOVATION AND IMPROVEMENT

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,527,536,000 |
| Budget estimate, 2013 | 4,332,166,000 |
| Committee recommendation | 1,545,966,000 |

The Committee recommends \$1,545,966,000 for programs within the innovation and improvement account.

The President's budget was based on the administration's proposal to reauthorize the ESEA, but no such bill has passed the Senate. As a result, programs in this account are based generally on current law.

Race to the Top

The Committee recommends \$549,284,000 for the Race to the Top [RTT] program. The budget request includes \$850,000,000 for this program. These funds are available for obligation through December 31, 2013.

RTT, which was established in ARRA, has supported and incentivized reforms that are designed to reduce achievement gaps; improve student achievement, graduation rates, and college enrollments; and encourage the broad replication of effective practices. The Committee bill continues language allowing local school districts to be eligible for RTT grants and up to 5 percent of the appropriation for this program to be used for evaluation and technical assistance.

Funds also may be used for Race to the Top–Early Learning Challenge [RTT–ELC], a component that was added in the fiscal year 2011 appropriations bill. The goal of RTT–ELC is to improve the quality of early learning and development and close the achievement gap for children with high needs. The RTT–ELC grant competition focuses on improving early learning and development for young children by supporting States' efforts to increase the number and percentage of low-income and disadvantaged children in each age group of infants, toddlers, and preschoolers enrolled in high-quality early learning and development programs; and designing and implementing an integrated system of high-quality early learning and development programs and services. Grants may be made to States, or consortia thereof, which may make subgrants to appropriate entities.

The Committee expects a significant portion of the fiscal year 2013 appropriation to be used for RTT–ELC. In combination with additional resources allocated for the CCDBG and Head Start programs, the Committee expects these investments to help improve early learning and development systems and opportunities for young children. The Committee bill includes language requiring the Departments of Education and HHS to jointly administer RTT–ELC.

The Committee applauds the Department's efforts to ensure that rural areas have a fair opportunity to compete in recent grant competitions, including the LEA-level competition under RTT. The Committee directs the Department in developing any fiscal year 2013 notice under RTT to provide an absolute priority for rural States or rural LEAs, as applicable.

Investing in Innovation

The Committee recommends \$149,417,000, the same amount as the fiscal year 2012 level, for the Investing in Innovation program. The budget request is \$150,000,000 for this purpose.

Investing in Innovation, which was established in ARRA, has provided a source for replicating education programs that meet the highest level of evidence; expanding those with significant levels of evidence; and supporting promising practices for which there is some level of appropriate research. The Committee supports this three-tier evidentiary model and believes that this feature of the program should continue to guide future funding opportunities and decisions. The Committee also appreciates the priority given to rural applicants in the last two competitions and believes that this priority should continue to be used in the fiscal year 2013 competition. The Committee expects the Department to distribute grants equally among the absolute priority categories unless there are an insufficient number of qualified grants for a particular category.

The Committee bill continues language from last year's bill providing up to 5 percent of the appropriation for this program to be used for evaluation and technical assistance. The Committee expects to be notified in advance of the proposed uses of these funds.

The Committee bill also includes new language allowing up to 30 percent of the funds for this program to be used to support ARPA-ED, a new organization that will be created to identify and promote advances in fundamental and applied sciences and engineering that could be translated into new learning technologies; to develop, test, and evaluate novel learning technologies and related processes; and to accelerate transformational technological advances. Prior to obligating any funds for ARPA-ED, the Committee directs the Department to provide the Senate Committees on Appropriations and HELP with a report describing the goals, planned activities, and organization related to this new effort.

Effective Teachers and Leaders

The Committee recommends no funding to create the Effective Teachers and Leaders State grant program. The budget request includes \$2,466,567,000 for this program based on the administration's reauthorization proposal.

The Committee has provided \$2,466,567,000 for State Grants for Improving Teacher Quality within the school improvement programs account. These funds may be used for similar purposes as those proposed under this program.

Effective Teachers and Leaders Innovation Fund

The Committee recommends no funding to create the Effective Teachers and Leaders Innovation Fund. The budget request includes \$400,000,000 for this program based on the administration's reauthorization proposal.

The Committee provides \$299,433,000 for the Teacher Incentive Fund and additional funds for other current law programs that may be used for similar purposes as those proposed under this program.

Teacher and Leader Pathways

The Committee recommends no funding to create the Teacher and Leader Pathways program. The budget request includes \$74,676,000 for this program based on the administration's reauthorization proposal.

The Committee provides resources under current law programs that may be used for similar purposes as those proposed under this new program.

Expanding Educational Options

The Committee recommends no funding to create the Expanding Educational Options program. The budget request includes \$255,036,000 for this program based on the administration's reauthorization proposal.

The Committee provides resources under current law programs that may be used for similar purposes as those proposed under this new program.

Transition to Teaching

The Committee recommends \$18,200,000 for the Transition to Teaching program. The budget request proposes an Excellent Instructional Teams initiative that could support activities carried out under this program, but includes no funds specifically for Transition to Teaching. The fiscal year 2012 level is \$26,054,000 for this program.

This program provides grants to help support efforts to recruit, train, and place nontraditional teaching candidates into teaching positions and to support them during their first years in the classroom. In particular, this program is intended to attract mid-career professionals and recent college graduates. Program participants are placed in high-need schools in high-need LEAs.

School Leadership

The Committee recommends \$29,107,000, the same amount as the fiscal year 2012 level, for the school leadership program. The budget request proposes a Teacher and Leader Pathways program that could support activities funded through this program, but includes no funds specifically for school leadership.

The program provides competitive grants to assist high-need LEAs to recruit and train principals and assistant principals through activities such as professional development and training programs. The Committee continues to recognize the critical role that principals and assistant principals play in creating an environment that fosters effective teaching and high academic achievement for students. The Committee urges the Department to put a high priority on grants that prepare, place, and support school leaders in schools most in need of improvement, as defined by status as persistently lowest-achieving, priority, or focus schools.

Charter Schools

The Committee recommends a total of \$254,836,000, the same amount as the fiscal year 2012 level, for the support of charter schools. The budget request proposes no dedicated funding for the

charter schools program, instead providing support for such activities through a broader Expanding Educational Options program.

The Committee allocates the recommended funding as follows: \$221,836,000 for charter school grants, up to \$11,000,000 for State facilities incentives, not less than \$11,000,000 for the credit enhancement for charter schools facilities program, and up to \$11,000,000 for national activities designed to support local, State, and national efforts to increase the number of high-quality charter schools.

The Charter Schools grants program supports the planning, development, and initial implementation of charter schools. SEAs that have the authority under State law to approve charter schools are eligible to compete for grants. If an eligible SEA does not participate, charter schools from the State may apply directly to the Secretary.

Under the State facilities program, the Department awards 5-year competitive grants to States that operate per-pupil facilities aid programs for charters schools. Federal funds are used to match State-funded programs in order to provide charter schools with additional resources for charter school facilities financing.

The credit enhancement program provides assistance to help charter schools meet their facility needs. Funds are provided on a competitive basis to public and nonprofit entities, to leverage non-Federal funds that help charter schools obtain school facilities through purchase, lease, renovation, and construction.

The Committee continues bill language that allows the Secretary to reserve a portion of the charter school grant funds to make multiple awards to charter management organizations and other entities for the replication and expansion of successful charter school models that have a track record of success. This year's bill requires that not less than \$30,000,000 of funds available for charter school grants shall be used for this purpose. Last year's bill caps this activity at \$55,000,000 but only roughly \$29,000,000 is expected to be used for this purpose.

The Committee urges the Department to continue using a portion of the funds available for national activities to address issues related to services to students with disabilities enrolled in or interested in enrolling in charter schools, as well as efforts to strengthen charter authorizing practices that will result in a greater share of high-quality charter schools.

Magnet Schools Assistance

The Committee recommends \$96,733,000, the same amount as the comparable fiscal year 2012 level, for the magnet schools assistance program. The budget request includes \$99,611,000 for this purpose.

This program supports grants to LEAs to establish and operate magnet schools that are part of a court-ordered or federally approved voluntary desegregation plan. Magnet schools are designed to attract substantial numbers of students from different social, economic, ethnic, and racial backgrounds. Grantees may use funds for planning and promotional materials, salaries of instructional staff, and the purchase of technology, educational materials, and equipment.

Fund for the Improvement of Education

The Committee recommends an appropriation of \$85,735,000 for FIE. The fiscal year 2012 appropriation is \$65,775,000 and the budget request is \$36,276,000 for this purpose.

Within programs of national significance, the Committee includes \$29,000,000 to continue the initiative funded in last year's bill that provides competitive awards to national not-for-profit organizations or school libraries for providing books and childhood literacy activities to children and families living in high-need communities. The Committee expects no less than 50 percent of these funds to be made available to applications from school libraries proposing high-quality projects for increasing access to a wide range of print and electronic resources that provide learning opportunities to all students, but particularly those less likely to have access to such materials at home.

The Committee recommendation also includes \$19,235,000 for a new STEM initiative. A portion of these funds will be used jointly with funds provided to NSF for a program using a tiered-evidence model, similar to the Investing in Innovation program, that seeks to develop, evaluate, and scale-up proven practices that can help improve teaching and learning in mathematics. Another portion of the funds for this initiative will be used for STEM-related activities at IES to improve the evidence base for STEM programs across the Federal Government; this portion may also be used for providing technical assistance to other Federal agencies and the field to improve evaluations.

Within programs of national significance, the Committee also recommends \$2,950,000 to support inter-agency strategies to strengthen re-engagement activities and outcomes of Federal programs serving disconnected youth, \$5,424,000 to continue awards for full-service community schools, \$1,276,000 for data quality and evaluation initiatives, and \$350,000 for peer review. It also includes \$1,000,000 to support a new competition for operation of a clearinghouse on educational facilities, which will provide information on planning, designing, financing, building, maintaining, and operating safe, healthy, high-performance educational facilities, including early learning centers.

Within the amount for FIE, the Committee also includes \$26,500,000 for the Arts in Education program. The budget request includes funds for similar activities under its proposed Effective Teaching and Learning for a Well-Rounded Education program, but no funds specifically for arts in education. The fiscal year 2012 appropriation is \$24,935,000. The funding is used for competitive awards for national nonprofit organizations engaged in arts education, professional development activities, and model arts education programs. Funds also are used for evaluation and dissemination activities, as well as a partnership with the National Endowment for the Arts. The Committee appreciates the recent release of the arts education report prepared by NCES. The Committee believes that this survey should be conducted more frequently than once every 10 years. The Committee also directs the Department to take more effective steps in disseminating what is being learned through the model and professional development grants funded under the Arts in Education program.

Teacher Incentive Fund

The Committee recommendation includes \$299,433,000, the same amount as the fiscal year 2012 level, for TIF. The budget proposal supports the program through a broader Teacher and Leader Innovation Fund based on the administration's reauthorization proposal but includes no funding specifically for TIF.

The goals of TIF are to improve student achievement by increasing teacher and principal effectiveness; reform compensation systems to reward gains in student achievement; increase the number of effective teachers teaching low-income, minority, and disadvantaged students, and students in hard-to-staff subjects; and other activities designed to increase the effectiveness of teachers, principals, and other personnel in high-need schools.

Ready-To-Learn Television

The Committee recommendation includes \$27,194,000, the same amount as the fiscal year 2012 level, for the Ready-to-Learn Television program. The budget request proposes to fund similar activities through its proposed Effective Teaching and Learning: Literacy program, but includes no funding specifically for Ready-to-Learn.

The Ready-to-Learn program is intended to use the power and reach of public television to help prepare children, especially disadvantaged children, enter and succeed in school. The ESEA requires that all programming and digital content created under Ready-to-Learn be specifically designed for nationwide distribution over public television stations' digital broadcasting channels and the Internet. The act also requires funds to be made available to public telecommunications entities to ensure that these programs and related educational materials are disseminated and distributed to the widest possible audience and are made accessible to all Americans.

Advanced Placement

The Committee recommends \$36,027,000 for AP programs. The comparable fiscal year 2012 level is \$30,027,000. The budget request proposes to fund similar activities through its College Pathways and Accelerated Learning program, but does not include funding specifically for AP.

These funds support two programs, the AP Test Fee program and the AP Incentive [API] program. The purpose of both is to aid State and local efforts to increase access to AP and International Baccalaureate [IB] classes and tests for low-income students. Under the test fee program, the Department makes awards to SEAs to enable them to cover part or all of the cost of test fees of low-income students who are enrolled in an AP or IB class and plan to take an AP or IB test. Under the API program, the Department makes 3-year competitive awards to SEAs, LEAs, or national nonprofit educational entities to expand access for low-income individuals to AP programs through activities including teacher training; development of pre-advanced placement courses; coordination and articulation between grade levels to prepare students for academic achievement in AP or IB courses; books and supplies; and participation in online AP or IB courses. Under the authorizing statute, the Department must give priority to funding the test fee program.

SAFE SCHOOLS AND CITIZENSHIP EDUCATION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$255,753,000 |
| Budget estimate, 2013 | 295,866,000 |
| Committee recommendation | 259,589,000 |

The Committee recommends a total of \$259,589,000 for activities to promote safe schools, healthy students, and citizenship education.

The President's budget was based on the administration's proposal to reauthorize the ESEA, but no such bill has passed the Senate. As a result, the Committee bill is based on current law for programs authorized under the ESEA.

Promise Neighborhoods

The Committee recommends \$80,000,000 for the Promise Neighborhoods program. The comparable fiscal year 2012 funding level is \$59,887,000, and the budget request is \$100,000,000.

Funds are available for obligation through December 31, 2013. By providing an extra quarter to obligate these funds, the Committee gives fiscal year 2012 planning grantees sufficient time to develop implementation plans that could be funded by this bill and provides the Department ample time to evaluate whether prior-year implementation grantees are making significant progress required to justify the receipt of continuation awards in fiscal year 2013.

Competitive grants are awarded to nonprofit, community-based organizations for the development of comprehensive neighborhood programs designed to combat the effects of poverty and improve educational and life outcomes for children and youth, from birth through college. Each Promise Neighborhood grantee serves a high-poverty urban neighborhood or rural community.

Two types of awards are made under this program, 1-year planning grants and implementation grants. Funds for planning grants are used by communities to develop a plan for providing a continuum of services and supports for the children and youth in a particular neighborhood. Implementation grants are awarded to organizations with feasible plans for achieving the goals of the program.

At the funding level recommended by the Committee, the Department could use roughly \$67,000,000 to support implementation grants for prior planning grant recipients or communities with high-quality plans for achieving the goals of the program. Approximately \$13,000,000 would be available for another round of planning grants and for technical assistance activities.

Successful, Safe, and Healthy Students

The Committee recommends no funds for this proposed new program, which is based on the administration's reauthorization plan. The Committee has allocated funds for related current law programs, as described under the individual headings in this account.

Under this program, the Department would award grants to SEAs, title I-eligible LEAs, and their partners for programs designed to improve the school culture and climate; improve students'

physical health and well-being; and improve students' mental health and well-being.

Safe and Drug-Free National Activities

The Committee recommendation includes \$48,600,000 for the national activities portion of the Safe and Drug-Free Schools and Communities program. The comparable fiscal year 2012 funding level is \$64,877,000. The budget request proposes to fund related activities within the proposed Successful, Safe, and Healthy Students program.

The Committee recommendation includes funds for continuation costs related to safe and supportive schools grants and other activities.

The Committee is aware of the Department's work with elementary and secondary schools and institutions of higher education [IHEs] to support the successful adoption of the National Incident Management System [NIMS]. Since all schools and IHEs have a critical role in emergency management, it is important that they adopt NIMS at the organizational and operational levels as part of an integrated school and campus emergency management plan. Therefore, the Committee encourages the Department to continue to collaborate with the Department of Homeland Security, make widely available the guidance on the implementation of NIMS for schools and IHEs as part of all-hazard emergency management planning, and provide training resources on safety and security at large venues.

Elementary and Secondary School Counseling

The Committee recommends \$52,296,000, the same amount as the comparable fiscal year 2012 funding level, to establish or expand counseling programs in elementary and secondary schools. The budget request recommends consolidating this program into its proposed Successful, Safe, and Healthy Students program, but does not include any funding specifically for counseling. As authorized, at least \$40,000,000 must be used to support elementary school counseling programs.

Carol M. White Physical Education for Progress Program

The Committee recommendation includes \$78,693,000, the same as the fiscal year 2012 level, to help LEAs and community-based organizations initiate, expand, and improve physical education programs for students in grades K–12. The budget request recommends this program into its proposed Successful, Safe, and Healthy Students program, but does not include any funding specifically for physical education. This funding will help schools and communities improve their structured physical education programs for students and help children develop healthy lifestyles to combat the national epidemic of obesity.

ENGLISH LANGUAGE ACQUISITION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$732,144,000 |
| Budget estimate, 2013 | 732,144,000 |
| Committee recommendation | 732,144,000 |

The Committee recommends an appropriation of \$732,144,000 for English language acquisition.

The President’s budget was based on the administration’s proposal to reauthorize the ESEA, but no such bill has passed the Senate. As a result, the Committee bill is based on current law for programs authorized under the ESEA.

The Department makes formula grants to States based on each State’s share of the Nation’s limited-English-proficient and recent immigrant student population. The program is designed to increase the capacity of States and school districts to address the needs of these students. The authorizing statute requires that 6.5 percent of the appropriation be used to support national activities, which include professional development activities designed to increase the number of highly qualified teachers serving limited-English-proficient students; a National Clearinghouse for English Language Acquisition and Language Instructional Programs; and evaluation activities. National activities funds shall be available for 2 years.

The Committee bill continues language that requires the Secretary to use a 3-year average of the most recent data available from the American Community Survey for calculating allocations to all States under this program.

SPECIAL EDUCATION

| | |
|--------------------------------|------------------|
| Appropriations, 2012 | \$12,640,709,000 |
| Budget estimate, 2013 | 12,687,307,000 |
| Committee recommendation | 12,770,709,000 |

The Committee recommends an appropriation of \$12,770,709,000 for special education programs.

Grants to States

The Committee recommends \$11,677,855,000, an increase of \$100,000,000 more than the fiscal year 2012 level and budget request, for special education grants to States, authorized under section 611 of part B of the IDEA.

This program provides formula grants to assist States, outlying areas, and other entities in meeting the costs of providing special education and related services for children with disabilities. States pass along most of these funds to LEAs, but may reserve some for program monitoring, enforcement, technical assistance, and other activities.

The appropriation for this program primarily supports activities associated with the 2013–2014 academic year. Of the funds available for this program, \$2,394,472,000 will become available on July 1, 2013, and \$9,283,383,000 will become available on October 1, 2013. These funds will remain available for obligation through September 30, 2014.

As requested by the administration, the Committee continues bill language capping the Department of the Interior set-aside at the prior year level, adjusted by the lower of the increase in inflation or the change in the appropriation for grants to States. This provision also would prevent a decrease in the amount to be transferred in case the funding for this program decreases or does not change.

The bill also includes new language clarifying provisions of the IDEA. The first provision clarifies that penalties paid by States for

violating maintenance of effort under part B of the IDEA shall be reallocated to States by formula to those States that did not violate those requirements. The language further clarifies that both the reduced State allocations due to penalties paid and increased amounts under the reallocation shall not be considered in fiscal year 2013 or future years for allocations under the statutory formula. These provisions are included in the administration's budget request.

The bill also includes new language clarifying that the level of effort under part B that an LEA must meet in the year after it fails to maintain its fiscal effort is the level that it should have met in the prior year. This language clarifies congressional intent and is consistent with OSEP's April 4, 2012, informal guidance letter on the issue. Finally, the bill includes language clarifying that funds reserved under section 611(c) of the IDEA may be used to help improve State capacity to meet data collection requirements under the IDEA and improve data collection, quality, and use under the act.

Preschool Grants

The Committee recommends \$372,646,000, the same amount as the fiscal year 2012 level and budget request, for preschool grants. The preschool grants program provides formula grants to States to assist them in making available special education and related services for children with disabilities aged 3 through 5. States distribute the bulk of the funds to LEAs. States must serve all eligible children with disabilities aged 3 through 5 and have an approved application under the IDEA.

Grants for Infants and Families

The Committee recommends \$462,710,000, the same amount as the budget request, for the grants for infants and families program under part C of the IDEA. The comparable fiscal year 2012 level is \$442,710,000. Part C of the IDEA authorizes formula grants to States, outlying areas, and other entities to implement statewide systems for providing early intervention services to all children with disabilities, ages 2 and younger, and their families. The IDEA also gives States the option of extending eligibility for part C services to children 3 and older if they were previously served under part C and will continue to be served until entrance to kindergarten.

As requested by the administration, the Committee bill includes new language allowing the Department to use up to \$2,710,000 for incentive grants to States that choose to serve children 3 years old until entrance into elementary school. The IDEA currently allows up to 15 percent of the amount above \$460,000,000 to be used for this purpose, which would be too small under the level of the Committee recommendation to effectively serve potentially interested States.

State Personnel Development

The Committee recommends \$45,011,000, the same amount as the budget request, for the State personnel development program. The comparable fiscal year 2012 amount is \$43,917,000. This pro-

gram focuses on the professional development needs in States by requiring that 90 percent of funds be used for professional development activities. The program supports grants to SEAs to help them reform and improve their personnel preparation and professional development related to early intervention, educational, and transition services that improve outcomes for students with disabilities.

Technical Assistance and Dissemination

The Committee recommends \$46,781,000, the same amount as the budget request and fiscal year 2012 level, for technical assistance and dissemination. This program supports awards for technical assistance, model demonstration projects, the dissemination of useful information, and other activities. Funding supports activities that are designed to improve the services provided under the IDEA.

The Committee continues to support activities that address the need for high-quality, evidence-based technical assistance activities that improve the services to and outcomes for students with disabilities. Prior to issuing new notices for fiscal year 2013 competitions, the Committee directs OSEP to develop a long-term strategic plan for its technical assistance activities that is aligned with its revised monitoring and data reporting structures as well as the Department's other technical assistance activities.

Personnel Preparation

The Committee recommends \$86,205,000 for the personnel preparation program. The budget request is \$85,799,000 and the comparable fiscal year 2012 amount is \$88,299,000.

Funds support competitive awards to help address State-identified needs for personnel who are qualified to work with children with disabilities, including special education teachers and related services personnel. The program is required to fund several other broad areas, including training leadership personnel and personnel who work with children with low-incidence disabilities, and providing enhanced support for beginning special educators.

Parent Information Centers

The Committee recommends \$29,917,000 for parent information centers. The budget request and comparable fiscal year 2012 amount are \$28,917,000. 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.

Technology and Media Services

The Committee recommends \$29,588,000, the same amount as the budget request and comparable fiscal year 2012 level, for technology and media services. This program makes competitive awards to support the development, demonstration, and use of technology and educational media activities of value to children with disabilities.

PROMISE: Promoting Readiness of Minors in SSI

The Committee recommendation includes \$11,996,000 for PROMISE and makes these funds available for obligation through September 30, 2014. The budget request includes \$30,000,000 for this activity. Last year’s bill provides \$1,996,000 under this account, as well as additional resources from unclaimed VR State grant funds and funds provided to SSA.

The goal of PROMISE is to improve outcomes, such as employment and completion of postsecondary education, of children who receive SSI, as well as their families. Competitive grants will be awarded to a small number of States for a period of 5 years. States will use funds to improve the coordination and increase the use of existing services for which children receiving SSI and their families are already eligible. The Committee includes new bill language requested by the administration that slightly modifies the program as it was initially created in last year’s bill.

As requested by the administration, the Committee bill also includes new bill language that allows a portion of the funds provided to be used for Pay for Success awards, which are described in the highlights section in the introduction to the Committee report. The Committee expects to be notified prior to the issuance of any notice related to the Pay for Success activity.

Special Olympics

The Committee recommendation includes \$8,000,000, the same amount as the fiscal year 2012 level and budget request, for Special Olympics education activities. Under the Special Olympics Sport and Empowerment Act of 2004, the Secretary is authorized to provide financial assistance to Special Olympics for activities that promote its expansion and for the design and implementation of education activities that can be integrated into classroom instruction and are consistent with academic content standards.

The Committee bill includes language requested by the administration allowing funds to be used to support Special Olympics National and World Games. This language was not included in last year’s bill, but has been included in bills from prior years.

REHABILITATION SERVICES AND DISABILITY RESEARCH

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$3,511,281,000 |
| Budget estimate, 2013 | 3,581,313,000 |
| Committee recommendation | 3,626,380,000 |

The Committee recommends \$3,626,380,000 for rehabilitation services and disability research.

Vocational Rehabilitation State Grants

The Committee recommends \$3,230,972,000 for VR grants to States. The Committee recommends the full amount authorized by the Rehabilitation Act of 1973 for this mandatory funding stream. The comparable fiscal year 2012 level is \$3,121,712,000. The fiscal year 2013 budget request is \$3,167,369,000 and assumes several program consolidations and eliminations as part of a proposal to reauthorize WIA. While the Senate authorizing committee has made significant progress on a WIA reauthorization, legislation has not

yet passed the Senate. As a result, the Committee recommendation follows current law.

Basic State grant funds assist States in providing a range of services to help persons with physical and mental disabilities prepare for and engage in meaningful employment.

The Rehabilitation Act requires that not less than 1 percent and not more than 1.5 percent of the appropriation in fiscal year 2013 for VR State grants be set aside for grants for Indians.

The Committee bill continues language, as requested by the administration, allowing unmatched funds in excess of any funds requested during the reallocation process to be available for the PROMISE program described under the Special Education account and SSA. Such funds used for the PROMISE program will remain available for obligation through September 30, 2014.

As requested by the administration, the Committee bill also includes new bill language that allows a portion of the funds provided under the PROMISE program to be used for Pay for Success awards, which are described in the highlights section in the introduction to the Committee report. The Committee expects to be notified prior to the issuance of any notice related to Pay for Success activity.

The budget request also provides a \$10,000,000 set-aside for WIF. The Committee does not recommend any funds for WIF from VR grants to States due to budget constraints, but instead recommends funding through the Department of Labor to continue this initiative.

Client Assistance State Grants

The Committee recommends \$12,240,000 in discretionary funds, the same amount provided in fiscal year 2012 and the budget request, for the client assistance State grants program.

The client assistance program funds State formula grants to help VR clients or client applicants understand the benefits available to them and work with service providers. States must operate client assistance programs in order to receive VR State grant funds.

Training

The Committee recommends \$35,515,000, the same as the comparable fiscal year 2012 level, for training rehabilitation personnel. The budget request provides \$30,188,000.

The purpose of this program is to ensure that skilled personnel are available to serve the rehabilitation needs of individuals with disabilities. It supports training, traineeships, and related activities designed to increase the numbers of qualified personnel providing rehabilitation services. The program awards grants and contracts to States and public or nonprofit agencies and organizations, including institutions of higher education, to pay all or part of the cost of conducting training programs.

Demonstration and Training Programs

The Committee recommends \$6,500,000 for demonstration and training programs; this amount is an increase of \$1,175,000 above the comparable fiscal year 2012 funding level. The budget request includes \$5,750,000.

This program awards grants to States and nonprofit agencies and organizations to develop innovative methods and comprehensive services to help individuals with disabilities achieve satisfactory vocational outcomes. Demonstration programs support projects for individuals with a wide array of disabilities.

The Committee recommendation includes \$425,000 for new technical assistance activities, as requested in the budget, for RSA to direct program improvement resources to the areas of greatest need and assist the field to improve outcomes for individuals with disabilities.

The Committee recommendation includes \$750,000 to support a new competition for parent training and information centers, which provide information and training on transition planning, the adult service system, and strategies that prepare youth for successful employment, postsecondary education, and independent living outcomes. The Committee expects RSA to coordinate with OSEP in carrying out this activity.

Migrant and Seasonal Farmworkers

The Committee recommends \$1,262,000, the same as the comparable fiscal year 2012 funding level, for migrant and seasonal farmworkers. The budget request proposes consolidating this program into the VR State Grants Program.

This program provides grants for comprehensive rehabilitation services to migrant and seasonal farmworkers with disabilities and their families.

Protection and Advocacy of Individual Rights

The Committee recommends \$18,031,000, the same amount provided in fiscal year 2012 and the budget request, for protection and advocacy of individual rights.

This program provides grants to agencies to protect and advocate for the legal and human rights of persons with disabilities who are ineligible for protection and advocacy services available through the Developmental Disabilities Assistance and Bill of Rights Act or the Protection and Advocacy for Individuals with Mental Illness Act.

Supported Employment State Grants

The Committee recommends \$29,068,000, the same as the comparable fiscal year 2012 level, for the supported employment State grant program. The budget request proposes consolidating this program into the VR State Grants program.

This program assists the most severely disabled individuals by providing ongoing support needed to obtain competitive employment.

Independent Living State Grants

The Committee recommends \$23,359,000, the same amount provided in fiscal year 2012 and the budget request, for independent living State grants.

This program provides formula grants to States to improve independent living services, support the operation of centers for inde-

pendent living, conduct studies and analysis, and provide training and outreach.

Centers for Independent Living

The Committee recommends \$79,953,000, the same amount provided in fiscal year 2012 and the budget request, for independent living centers.

These funds support consumer-controlled, cross-disability, non-residential, community-based centers that are designed and operated within local communities by individuals with disabilities. These centers provide an array of independent living services.

The Committee commends the work by these centers and encourages them to continue their efforts to facilitate the transition of individuals with significant disabilities from institutional settings to home and community based residences, and from school to postsecondary life, including employment.

Independent Living Services for Older Blind Individuals

The Committee provides \$34,018,000, the same amount provided in fiscal year 2012 and the budget request, for independent living services to older blind individuals.

Through this program, assistance is provided to persons aged 55 or older to adjust to their blindness, continue living independently, and avoid societal costs associated with dependent care. Services most commonly provided by this program are daily living skills training, counseling, community integration, information and referral, the provision of low-vision devices and communication devices, and low-vision screening.

Helen Keller National Center

The Committee recommends \$9,145,000 for the Helen Keller National Center for Deaf-Blind Youth and Adults. This is the same amount as the budget request and fiscal year 2012 level.

The Helen Keller National Center consists of a national headquarters in Sands Point, New York, with a residential training and rehabilitation facility where deaf-blind persons receive intensive specialized services; a network of 10 regional field offices that provide referral and counseling assistance to deaf-blind persons; and an affiliate network of agencies.

National Institute on Disability and Rehabilitation Research

The Committee recommends \$108,817,000, the same as the comparable fiscal year 2012 level, for NIDRR. The budget request includes \$106,817,000 for this purpose.

NIDRR develops and implements a comprehensive and coordinated approach to the conduct of research, demonstration projects and related activities that enable persons with disabilities to better function at work and in the community, including the training of persons who provide rehabilitation services or conduct rehabilitation research. The Institute awards competitive grants to support research in federally designated priority areas, including rehabilitation research and training centers, rehabilitation engineering research centers, research and demonstration projects, and dissemi-

nation and utilization projects. NIDRR also supports field-initiated research projects, research training and fellowships.

The Committee strongly supports the mission of NIDRR, which includes research in the interrelated domains of health and function, employment, and participation and community living. NIDRR’s resources should focus on each of these statutory research priorities to ensure the advancement of economic and social self-sufficiency and full community inclusion and participation. The Committee urges the Secretary to embrace NIDRR’s mission and enhance its stature and visibility within the Department. It also urges the NIDRR director to focus attention on ensuring that the practical implications of research outcomes are summarized and research activities and findings are made publicly available in a timely manner.

Assistive Technology

The Committee recommends \$37,500,000 for assistive technology. The fiscal year 2012 funding level is \$32,836,000. The budget request includes \$30,840,000 for this purpose.

The Assistive Technology program is designed to improve occupational and educational opportunities and the quality of life for people of all ages with disabilities through increased access to assistive technology services and devices. The program supports various activities that help States develop comprehensive, consumer-responsive statewide programs that increase access to, and the availability of, assistive technology devices and services.

The Committee recommendation will ensure all 50 Statewide Assistive Technology programs, the District of Columbia, and outlying areas will receive the minimum grant provided under statute for the first time.

The Committee recommendation includes \$31,000,000 for State grant activities authorized under section 4 of the Rehabilitation Act of 1973, \$5,500,000 for protection and advocacy systems authorized by section 5, and \$1,000,000 for technical assistance activities authorized under section 6. The comparable fiscal year 2012 levels are \$25,560,599, \$4,282,890, and \$996,114, respectively.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

AMERICAN PRINTING HOUSE FOR THE BLIND

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$24,505,000 |
| Budget estimate, 2013 | 24,505,000 |
| Committee recommendation | 24,505,000 |

The Committee recommends \$24,505,000 to help support APH.

APH provides educational materials to students who are legally blind and enrolled in programs below the college level. The Federal subsidy provides approximately 70 percent of APH’s total sales income. Materials are distributed free of charge to schools and States through per capita allotments based on the total number of students who are blind. Materials provided include textbooks and other educational aids in Braille, large type, recorded form, and computer applications. Appropriated funds may be used for staff salaries and expenses, as well as equipment purchases and other

acquisitions consistent with the purpose of the Act to Promote the Education of the Blind.

NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$65,422,000 |
| Budget estimate, 2013 | 65,037,000 |
| Committee recommendation | 65,422,000 |

The Committee recommends \$65,422,000 for NTID. This level supports operational costs only, as in fiscal year 2012. The budget request includes \$2,000,000 for construction expenses in addition to operational costs.

NTID, located on the campus of the Rochester Institute of Technology in Rochester, New York, was created by Congress in 1965 to provide a residential facility for postsecondary technical training and education for persons who are deaf. NTID also provides support services for students who are deaf, trains professionals in the field of deafness, and conducts applied research.

GALLAUDET UNIVERSITY

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$125,516,000 |
| Budget estimate, 2013 | 117,541,000 |
| Committee recommendation | 125,000,000 |

The Committee recommends \$125,000,000 for Gallaudet University.

Gallaudet University is a private, nonprofit institution offering undergraduate and continuing education programs for students who are deaf, as well as graduate programs in fields related to deafness for students who are hearing and deaf. The university conducts basic and applied research related to hearing impairments and provides public service programs for the deaf community.

Federal funding also supports the Model Secondary School for the Deaf, which serves as a laboratory for educational experimentation and development; disseminates curricula, materials, and models of instruction for students who are deaf; and prepares adolescents who are deaf for postsecondary academic or vocational education or the workplace. The Kendall Demonstration Elementary School develops and provides instruction for children from infancy through age 15.

The Committee bill includes \$7,000,000 for construction-related activities at Gallaudet University. The administration does not request funds specifically for construction, but allows up to \$7,000,000 to be set aside from operations for construction-related activities.

CAREER, TECHNICAL, AND ADULT EDUCATION

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,737,154,000 |
| Budget estimate, 2013 | 1,737,154,000 |
| Committee recommendation | 1,737,154,000 |

The Committee recommends a total of \$1,737,154,000 for career, technical, and adult education.

Career and Technical Education

The Committee recommends \$1,130,859,000, the same as the comparable fiscal year 2012 level and the budget request, for career and technical education [CTE].

State Grants.—The Committee recommends \$1,123,030,000, the same as the comparable fiscal year 2012 level and budget request, for CTE State grants.

Funds provided under the State grant program assist States, localities, and outlying areas expand and improve their CTE program and help ensure equal access to CTE for populations with special needs. Persons assisted range from secondary students in prevocational courses through adults who need retraining to adapt to changing technological and labor market conditions. Funds are distributed according to a formula based on State population and State per capita income.

Under the Indian and Hawaiian Natives programs, competitive grants are awarded to federally recognized Indian tribes or tribal organizations and to organizations primarily serving and representing Hawaiian Natives for services that are additional to services received by these groups under other provisions of the Perkins Act.

Of the funds available for this program, \$332,030,000 will become available July 1, 2013, and \$791,000,000 will become available on October 1, 2013. These funds will remain available for obligation until September 30, 2014.

National Programs.—The Committee recommends \$7,829,000 for national research programs and other national activities. This amount is the same as the comparable fiscal year 2012 funding level and the budget request.

Funds are used to support the CTE national research center, as well as activities designed to improve the quality of performance data States collect and report to the Department.

Adult Education

The Committee recommends \$606,295,000, the same as the fiscal year 2012 level and the budget request, for adult education.

Adult Education State Grant.—For adult basic and literacy education State grants, the Committee recommends \$594,993,000, the same as the fiscal year 2012 level and the budget request. Funds are used by States for programs to enable adults to acquire basic literacy skills, to enable those who so desire to complete a secondary education, and to make available to adults the means to become more employable, productive, and responsible citizens.

The Committee recommendation continues the English literacy and civics education State grants set-aside within the adult education State grants appropriation. Within the total, \$74,709,000 is available to help States or localities affected significantly by immigration and large limited-English populations to implement programs that help immigrants acquire English literacy skills, gain knowledge about the rights and responsibilities of citizenship, and develop skills that will enable them to navigate key institutions of American life. This set-aside is the same as the fiscal year 2012 level and the budget request.

The budget request also provides a \$15,000,000 set-aside for WIF, to be jointly administered by the Department and DOL. The Committee does not recommend any adult education funds for WIF due to budget constraints. Instead, the Committee provides WIF funding only through DOL.

The budget request includes a general provision that provides the Secretary with the authority to waive statutes and regulations relating to title II of WIA and title I of the Rehabilitation Act of 1973 when the Secretary believes waivers would substantially improve employment and education outcomes. The Committee does not include the general provision.

National Leadership Activities.—The Committee recommends \$11,302,000, the same amount as the fiscal year 2012 level and the budget request, for national leadership activities.

The Committee urges the Department to strengthen adult education programs to increase the focus on adults with the lowest literacy and numeracy skills. A vital component of delivering these services to those individuals are community-based organizations that have successfully implemented strategies for delivering basic adult literacy instruction together with employment training. The Committee encourages the Department to work with DOL to identify promising approaches to succeed in this effort, including approaches that support the Department’s career pathways and post-secondary transition initiatives. In recognition of the critical role adult learners play in advising on successful learner outcomes, the Committee also requests that the Department work with national adult literacy organizations to identify and promote new capacity building initiatives on adult learner leadership and advisory roles in local programs.

STUDENT FINANCIAL ASSISTANCE

| | |
|--------------------------------|------------------|
| Appropriations, 2012 | \$24,535,281,000 |
| Budget estimate, 2013 | 24,685,281,000 |
| Committee recommendation | 24,535,281,000 |

The Committee recommends an appropriation of \$24,535,281,000 for programs under the student financial assistance account.

Federal Pell Grant Program

The Committee recommends \$22,824,000,000 in discretionary funding, the same amount as the fiscal year 2012 level and the budget request, for the Pell grant program. This amount will support an increase in the maximum Pell grant award from \$5,550 to \$5,635—the first increase in the maximum award since fiscal year 2010.

Pell Grants provide need-based financial assistance that helps undergraduate students and their families defray a portion of the costs of postsecondary education and vocational training. Awards are determined according to a statutory need-analysis formula that takes into account a student’s family income and assets, household size, and the number of family members, excluding parents, attending postsecondary institutions.

More than 9.6 million students are expected to receive a Pell grant during the 2012–2013 academic year. Of the 9.3 million students who relied on Pell Grants during the 2010–2011 award year,

74 percent had incomes or came from families with incomes less than or equal to \$30,000.

The Pell grant program is funded partly through the discretionary appropriations process and partly through mandatory funding. The HCERA included additional mandatory money for the program to increase the maximum grant by the Consumer Price Index beginning in academic year 2013–2014 as long as the discretionary portion of the funding is sufficient to support \$4,860 of the maximum award. The Committee recommendation for fiscal year 2013 meets that requirement, so it will trigger enough mandatory funding to add \$775 (\$85 more than in fiscal year 2012) to the maximum award on top of the discretionary portion, for a total maximum award of \$5,635.

In fiscal year 2012, Congress made several programmatic changes to the Pell grant program to close the \$1,362,000,000 funding gap between the estimated cost of maintaining the maximum award and the discretionary funding level provided the previous year. These changes reduced program costs in fiscal year 2012 and into the future, and helped improve the fiscal sustainability of the Pell grant program.

Together with mandatory funding from the HCERA and BCA, plus discretionary funding in the fiscal year 2012 Consolidated Appropriations Act, as well as \$2,087,000,000 in cumulative surplus budget authority from previous fiscal years, the fiscal year 2013 funding level will provide an estimated \$1,839,000,000 more than is needed to support the discretionary base award of \$4,860 and trigger the mandatory increase in the maximum award. This surplus will carry over into fiscal year 2014.

While the Committee's recommendation ensures there will be no funding gap in fiscal year 2013, the Committee is extremely concerned about the funding cliff expected in fiscal year 2014. If the discretionary funding for Pell grants were level funded again in fiscal year 2014, it is estimated that an additional \$6,003,000,000 would be needed to continue supporting the discretionary portion of the maximum award at \$4,860.

Ignoring this looming crisis would be irresponsible. Therefore, the Committee recommends three reforms to the student financial aid programs that will provide offsets that will not only put a down payment on the Pell grant program's funding needs but also incentivize students to complete their education, eliminate excessive payments to guaranty agencies, and reduce fraud related to distance education programs. Together, these changes will produce \$3,517,000,000 in savings in fiscal years 2013 and 2014, all of which will be put back into the Pell grant program to further reduce the funding cliff in fiscal year 2014. The remaining savings from these provisions will be applied in later years.

First, the Committee recommendation includes bill language that limits the duration of a student borrower's in-school interest subsidy to 150 percent of the normal time required to complete the educational program. For example, an undergraduate student enrolled in a 4-year bachelor's degree program will be eligible to receive the in-school interest subsidy for up to 6 years. Currently, subsidized Stafford student loan borrowers receive the in-school interest subsidy the entire time they remain enrolled. The proposal

to limit the subsidy duration will encourage borrowers to complete their educational program in a timelier manner. The Committee recommendation will impact new borrowers only. The administration included a similar proposal in the budget request that would have applied to current borrowers as well.

The second reform recommended by the Committee, and requested by the administration, will reduce the amount of loan rehabilitation funds that may be retained by guaranty agencies.

A student borrower who has defaulted on his or her loan has the opportunity to rehabilitate it by making a series of nine payments over a 10-month period. The guaranty agency then sells the loan to an eligible lender, triggering the removal of the default status. Guaranty agencies are compensated in two ways through the rehabilitation process. First, they receive 18.5 percent of the original defaulted amount, plus an additional 18.5 percent collection fee that is charged to the borrower. This means the guaranty agency retains 37 percent of each loan rehabilitated.

The Committee recommendation includes bill language that eliminates the guaranty agencies' retention of 18.5 percent of the original balance and requires the guaranty agencies to remit the original balance to the Department, as opposed to selling the remaining 81.5 percent of the original balance to an eligible lender. In addition, the fee charged to borrowers will be capped at 16 percent as opposed to 18.5 percent. The Department estimates this policy will reduce borrower fees by \$58,000,000 in fiscal year 2013.

The Committee notes that many guaranty agencies are affiliated with not-for-profit servicers that will benefit from new loan servicing contracts awarded under the HCERA. These new contracts will reduce or even eliminate the financial impact of the proposed reform to the guaranty agencies.

Third, the Committee recommendation includes a reform to limit Pell Grants to cover only tuition, fees, books, and supplies, and not room and board, for students enrolled in programs provided exclusively by distance education. The Committee notes that, with recent statutory changes that removed the restrictions on the eligibility of distance education programs for student financial aid, there has been a significant increase in the number of education programs offered solely online and in the number of students receiving Pell Grants to enroll in such programs. In September 2011, the Department's Inspector General [IG] issued an Investigative Program Advisory Report alerting the Department about the growth of fraud in distance education programs. Specifically, the report noted that since 2005, 215 participants in 42 fraud rings have been convicted and ordered to pay \$7,500,000 in restitution and fines and that 17 percent of the agency's open cases are related to distance education fraud. The IG also expressed concern that the cost of attendance [COA] for distance education students includes an allowance for room and board, which is in contrast to the requirement for students enrolled in correspondence courses. The COA for those students excludes room and board.

Therefore, the Committee includes new bill language that will limit the COA calculation for purposes of determining Pell grant award amounts. Only the costs of tuition, fees, books, and supplies will be included in the COA used to determine the Pell grant

award amount for an individual enrolled in an education program delivered exclusively online. Students enrolled in programs that are taught in an on-campus location, or taught using a mix of both on-campus instruction and instruction through distance education, will be unaffected by this reform.

Protecting Financial Aid for Students and Taxpayers

The Committee is disturbed by recent findings that some colleges and universities are using Federal student financial assistance funding for aggressive marketing, recruitment, and advertising rather than for the programs' intended purpose—to help low- and middle-income students pursue an academic degree.

At a time when Federal resources are scarce and students and families across the Nation are struggling to afford a college education, this practice should not be tolerated.

To that end, the Committee includes bill language that prohibits all colleges and universities receiving funding through the HEA from spending Federal educational program dollars on advertising, marketing, and recruitment. Colleges and universities will continue to be free to spend however much they want on these activities; this provision simply stipulates that they cannot use Federal tax dollars that are intended for student aid and educational programs to do so. This reform will target Federal resources at educating students, as opposed to online advertisements and aggressive recruiters, and help ensure that taxpayers are getting a good return on their investment.

Federal Supplemental Educational Opportunity Grant Program

The Committee recommends \$734,599,000 for the SEOG program. This amount is the same as the fiscal year 2012 level and the budget request.

The SEOG program provides funds to postsecondary institutions for need-based grants to undergraduate students. Institutions must contribute at least 25 percent toward SEOG awards. Students qualify for grants of up to \$4,000 by demonstrating financial need. School financial aid officers have flexibility to determine student awards, though they must give priority to Pell grant recipients with exceptional need.

The budget request recommends reforming the SEOG allocation formula and redirecting SEOG funding from higher-priced and well-endowed institutions to lower-priced public and private institutions that enroll and graduate higher numbers of Pell-eligible students and restrain tuition increases. The budget request does not include any specific recommendations or bill language on how to accomplish these goals. The Committee supports the proposals in principle but believes they deserve more deliberation in Congress.

Federal Work-Study Program

The Committee bill provides \$976,682,000 for the FWS program. This is the same amount as the comparable fiscal year 2012 level. The budget request includes \$1,126,682,000 and directs the \$150,000,000 in new funds to institutions opting to participate in an enhanced work-study partnership with prospective employers.

The budget request also recommends reforming the FWS allocation formula to target and incentivize funding toward institutions that enroll and graduate relatively high numbers of Pell-eligible students as well as offer lower, net tuition prices and fees and/or contain growth in tuition and fees. The budget request does not include bill language on this proposal and no hearings on the topic have been held in the Senate or House. The Committee supports the administration’s goals, but believes the proposal deserves more deliberation in Congress.

This program provides grants to about 3,400 institutions to help an estimated 700,000 undergraduate, graduate, and professional students meet the costs of postsecondary education through part-time employment. Work-study jobs must pay at least the Federal minimum wage and institutions must provide at least 25 percent of student earnings. Institutions also must use at least 7 percent of their grants for community service jobs.

The Committee recognizes that community service opportunities allow students to gain work experience and develop skills that they may be able to use in future careers and encourages the Department to bolster these opportunities at participating FWS institutions.

The Committee expects the Department to provide the same funding from the FWS program appropriation in fiscal year 2013 as in the prior year for the Work Colleges program authorized under section 448 of the HEA.

Federal Perkins Loans

The Federal Perkins loan program supports student loan revolving funds built up with capital contributions to nearly 1,700 participating institutions. Institutions use these revolving funds, which also include Federal capital contributions [FCCs], institutional contributions equal to one-third of the FCCs, and student repayments, to provide low-interest, subsidized loans that help financially needy students pay the costs of postsecondary education.

The Committee recommends no new funds for the Perkins Loans program, as was the case in fiscal year 2012. The budget request proposes to restructure the Perkins Loan program as a mandatory credit program—and to expand institutional participation by up to an additional 2,700 postsecondary education institutions. The Committee bill does not include this proposal.

STUDENT AID ADMINISTRATION

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|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,043,387,000 |
| Budget estimate, 2013 | 1,126,363,000 |
| Committee recommendation | 1,126,363,000 |

The Committee recommends \$1,126,363,000 for the Student Aid Administration account. These funds are available until September 30, 2014, and support the Department’s student aid management expenses.

The HCERA terminated the authority under the HEA to make loans under the Federal Family Education Loan Program as of June 2010. Beginning July 1, 2010, 100 percent of student loans are now made through the William D. Ford Direct Loan Program

and are serviced by private for-profit and not-for-profit servicers under contract with the Department.

The Committee recommendation includes \$726,618,000 for administrative costs and \$399,745,000 for loan servicing activities. The Committee recommendation for these two activities represents a combined \$82,976,000 increase over the fiscal year 2012 level. The Committee recommendation reflects the increased application, origination, and servicing costs associated with the recent legislative changes. These increases are necessary to manage the higher loan volume, ensure the operational integrity of Federal student aid systems, and provide high-quality service to student and parent borrowers.

The budget request includes a general provision transferring the Health Education Assistance Loan program from HHS to the Department. The Committee recommendation includes new bill language authorizing the transfer and provides \$2,807,000 for the costs of managing and servicing outstanding loans.

The Committee directs the Department to continue to provide quarterly reports detailing its obligation plan by quarter for spending mandatory and discretionary funding for student aid administrative activities broken out by servicer, activity, and funding source.

HIGHER EDUCATION

| | |
|--------------------------------|-----------------|
| Appropriations, 2012 | \$1,869,656,000 |
| Budget estimate, 2013 | 2,914,064,000 |
| Committee recommendation | 1,911,348,000 |

The Committee recommends an appropriation of \$1,911,348,000 for higher education programs.

Aid for Institutional Development

The Committee recommends \$531,076,000 for Aid for Institutional Development. This total and the recommended levels for each of the individual programs below are the same as the comparable levels for fiscal year 2012 and the budget request.

Strengthening Institutions.—The Committee bill recommends \$80,623,000 to provide competitive, 1-year planning and 5-year development grants for institutions with a significant percentage of financially needy students and low educational and general expenditures per student in comparison with similar institutions. Applicants may use these funds to develop faculty, strengthen academic programs, improve institutional management, and expand student services.

Hispanic-Serving Institutions [HSIs].—The Committee recommends \$100,432,000 for competitive grants to institutions at which Hispanic students make up at least 25 percent of enrollment. Funds may be used for acquisition, rental, or lease of scientific or laboratory equipment; renovation of instructional facilities; development of faculty; support for academic programs; institutional management; and purchase of educational materials. In addition to the Committee-recommended level, the HCERA provides \$100,000,000 of mandatory funding in each fiscal year through 2019 to support HSIs in the development of STEM and articulation programs.

Promoting Postbaccalaureate Opportunities for Hispanic Americans.—The Committee recommends \$9,011,000 for competitive 5-year grants to HSIs to help Hispanic Americans gain entry into and succeed in graduate study. Institutions may use funding to support low-income students through outreach programs; academic support services; mentoring and financial assistance; acquisition, rental, or lease of scientific or laboratory equipment; construction and other facilities improvements; and purchase of educational materials.

Strengthening Historically Black Colleges and Universities.—The Committee recommends \$227,980,000 for the strengthening HBCUs program. The program makes formula grants to HBCUs that may be used to purchase equipment, construct and renovate facilities, develop faculty, support academic programs, strengthen institutional management, enhance fundraising activities, provide tutoring and counseling services to students, and conduct outreach to elementary and secondary school students. In addition to the Committee-recommended level, this program will receive \$85,000,000 of mandatory funding through the HCERA in each fiscal year through 2019.

Strengthening Historically Black Graduate Institutions [HBGIs].—The Committee recommends \$58,958,000 for the Strengthening HBGIs program. This program provides 5-year grants to provide scholarships for low-income students and academic and counseling services to improve student success. Funds may also be used for construction, maintenance and renovation activities, the purchase or lease of scientific and laboratory equipment, and the establishment of an endowment.

Strengthening Predominately Black Institutions [PBIs].—The Committee recommends \$9,262,000 for the Strengthening PBIs program. This program provides 5-year grants to PBIs to plan and implement programs to enhance the institutions' capacity to serve more low- and middle-income Black American students. In addition to the Committee-recommended level, the HCERA provides \$15,000,000 of mandatory funding in each fiscal year through 2019 to support programs at PBIs in the areas of STEM, health education, internationalization or globalization, teacher preparation, and improving the educational outcomes of African-American males.

Strengthening Asian American and Native American Pacific Islander-Serving Institutions [AANAPISIs].—The Committee recommends \$3,119,000 for competitive grants to AANAPISIs that have an enrollment of undergraduate students that is at least 10 percent Asian American or Native American Pacific Islander students. Grants may be used to improve their capacity to serve Asian American and Native American Pacific Islander students and low-income individuals. In addition to the Committee-recommended level, AANAPISIs will receive \$5,000,000 of mandatory funding through the HCERA in each fiscal year through 2019 to develop faculty, strengthen academic programs, improve institutional management, and expand student services. AANAPISIs may also use mandatory funds for construction of classrooms, libraries, laboratories, and other instructional facilities.

Strengthening Alaska Native and Native Hawaiian-Serving Institutions.—The Committee recommends \$12,859,000 for this program. In addition to the Committee-recommended level, these institutions receive \$15,000,000 of mandatory funding through the HCERA in each fiscal year through 2019.

The purpose of this program is to improve and expand the capacity of institutions serving Alaska Native and Native Hawaiian students and low-income individuals. Funds may be used to plan, develop, and implement activities that encourage faculty and curriculum development, better fund administrative management, renovation, and improvement of educational facilities, enhanced student services, the purchase of library and other educational materials, and education or counseling services designed to improve the financial and economic literacy of students or their families.

Strengthening Native American-Serving Nontribal Institutions.—The Committee recommends \$3,119,000 for this program, which serves institutions that enroll at least 10 percent Native American students and at least 50 percent low-income students. In addition to the Committee-recommended level, these institutions receive \$5,000,000 of mandatory funding through the HCERA in each fiscal year through 2019 to help institutions plan, develop, and implement activities that encourage faculty and curriculum development, better fund administrative management, renovation, and improvement of educational facilities, enhanced student services, and the purchase of library and other educational materials.

Strengthening Tribally Controlled Colleges and Universities.—The Committee recommends \$25,713,000 for this program. Tribal colleges and universities rely on a portion of the funds provided to address developmental needs, including faculty development, curriculum, and student services. In addition to the Committee-recommended level, this program receives \$30,000,000 of mandatory funding through the HCERA in each fiscal year through 2019.

International Education and Foreign Language Studies

The bill includes a total of \$75,729,000, the same as the budget request, for international education and foreign language programs. The comparable fiscal year 2012 level is \$74,037,000.

Funds are used to support visits and study in foreign countries by individuals who plan to utilize their language skills in areas vital to U.S. national security in the fields of government, international development, and the professions.

Domestic Programs.—The Committee recommends \$68,278,000 for domestic program activities related to international education and foreign language studies under title VI of the HEA. This amount is the same as the budget request. The fiscal year 2012 level is \$66,586,000. Funding will support continuation awards in the national resource centers, foreign language and area studies fellowships, international business education projects and centers, language resource centers, and American overseas research centers. The Committee urges the Secretary to preserve the program's longstanding focus on activities and institutions that address the Nation's need for a strong training and research capacity in foreign languages and international studies, including increasing the pool

of international experts in areas that are essential to national security and economic competitiveness.

The increase in funds over the fiscal year 2012 level should be used to support new awards in the Undergraduate International Studies and Foreign Language program. The Committee recognizes that study abroad helps prepare students to function effectively in a global environment and recommends funding to expand access to study abroad, as authorized by section 604(b) of the HEA, particularly for underserved student populations and to nontraditional destinations, especially in developing countries.

Overseas Programs.—The Committee recommends \$7,451,000 for overseas programs authorized under the Mutual Educational and Cultural Exchange Act of 1961, popularly known as the Fulbright-Hays Act. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. Funding is provided for group, faculty, or doctoral dissertation research abroad as well as special bilateral projects. Grants focus on training American instructors and students in order to improve foreign language and area studies education in the United States.

Fund for the Improvement of Postsecondary Education

The Committee recommends \$43,494,000 for FIPSE. The comparable fiscal year 2012 funding level is \$3,494,000 and the budget request for this program is \$70,000,000.

The Committee includes \$39,000,000 to create the First in the World initiative, which will be modeled after the Investing in Innovation program. The budget request includes \$55,500,000 for this new program. The initiative will help ensure institutions of higher education have access to and implement innovative strategies and practices that have been shown to be effective in improving educational outcomes and making college more affordable for students and families. The Committee recommends that up to \$14,000,000 be set aside for minority-serving institutions to improve their students' persistence and completion rates while keeping costs under control. The Committee is particularly interested in supporting programs that target innovative strategies at low-income students.

Training for Realtime Writers.—Within the total for FIPSE, the Committee recommendation includes \$1,128,000 for the Training for Realtime Writers program authorized by section 872 of the HEA. This amount is the same as the fiscal year 2012 level. The budget request does not include funding for this program, which provides grants to institutions of higher education to establish programs to train realtime writers. Eligible activities include curriculum development, student recruitment, distance learning, mentoring, and scholarships. The program places a priority on encouraging individuals with disabilities to pursue careers in realtime writing. More than 30 million Americans are considered deaf or hard of hearing, and many require captioning services to participate in mainstream activities and gain access to emergency broadcasts. Federal law requires that all television broadcasts be closed captioned, yet a shortage of trained captioners is contributing to the barrier to full-quality captioning of realtime television programming such as news, weather, and emergency messaging.

Low-Income Single Parents.—The Committee recognizes the importance of providing targeted, supportive services to low-income, single-parent students, such as on-campus housing, child care, counseling, advising, internship opportunities, financial aid, and financial aid counseling and assistance. The Committee continues to encourage the Department to promote replication of best practices that have proven to successfully provide postsecondary degree completion opportunities for low-income single parents.

The Committee includes new bill language, as proposed in the budget, allowing any funds from title III (Institutional Aid), title V (Developing Institutions), and part AA of title VIII (Masters and Postbaccalaureate Programs) of the HEA that would otherwise lapse to carry out an initiative to improve college completion rates at minority-serving institutions.

Analysis of Federal Regulations and Reporting Requirements on Institutions of Higher Education.—The Committee directs \$1,000,000 for the Secretary to enter into an agreement with the National Research Council of the National Academy of Sciences to conduct a study on the impacts of Federal regulations and reporting requirements on institutions of higher education as authorized under section 1106 of the Higher Education Opportunity Act of 2008. The study shall include information describing, by agency, the number of Federal regulations and reporting requirements affecting institutions of higher education, the estimated time required and costs to institutions of higher education (disaggregated by types of institutions) to comply with the regulations and reporting requirements affecting institutions of higher education, and recommendations for consolidating, streamlining, and eliminating redundant and burdensome Federal regulations and reporting requirements affecting institutions of higher education. The study shall be submitted to the Senate and House Committees on Appropriations, as well as the Committee on HELP and the Committee on Education and the Workforce not later than 1 year after the date of enactment of this act.

Model Comprehensive Transition and Postsecondary Programs for Students With Intellectual Disabilities

The Committee recommendation includes \$10,957,000 for this program as authorized by section 769 of the HEA. This is the same level that was provided in fiscal year 2012. The budget request includes \$10,978,000 for this purpose within FIPSE rather than as a distinct program.

These funds provide competitive grants to postsecondary institutions to establish model programs to help students with intellectual disabilities transition to and complete college. Funds may be used for student support services; academic enrichment, socialization, or independent living; integrated work experiences; and partnerships with LEAs to support students with intellectual disabilities participating in the model program who are still eligible for special education and related services under the IDEA.

Funds also support a national coordinating center that is charged with conducting and disseminating research on strategies to promote positive academic, social, employment, and independent living outcomes for students with intellectual disabilities.

The Committee is aware that the national coordinating center has been unable to collect data about the characteristics of students served, course access, employment, and costs associated with creating these services because its evaluation system has yet to be approved. It is important for the Committee to learn which supports are successful in improving educational and employment outcomes for students with intellectual disabilities. Therefore, the Committee urges the Department, in coordination with OMB, to finalize the national coordinating center's evaluation system, so that data can be captured in a timely manner.

Minority Science and Engineering Improvement

The Committee recommends \$9,466,000 for the Minority Science and Engineering Improvement program. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. Funds are used to provide discretionary grants to institutions with minority enrollments greater than 50 percent to purchase equipment, develop curricula, and support advanced faculty training. Grants are intended to improve science and engineering education programs and increase the number of minority students in the fields of science, mathematics, and engineering.

Tribally Controlled Postsecondary Career and Technical Institutions

The Committee recommends \$8,131,000 for tribally controlled postsecondary vocational institutions. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. This program provides grants for the operation and improvement of tribally controlled postsecondary vocational institutions to ensure continued and expanding opportunities for Indian students.

Federal TRIO Programs

The Committee recommends \$839,932,000, the same amount as the fiscal year 2012 level and budget request, for Federal TRIO programs.

TRIO programs provide a variety of services to improve postsecondary education opportunities for low-income individuals and first-generation college students. Upward Bound offers disadvantaged high school students academic services to develop the skills and motivation needed to pursue and complete a postsecondary education; Student Support Services provides developmental instruction, counseling, summer programs, and grant aid to disadvantaged college students to help them complete their postsecondary education; Talent Search identifies and counsels individuals between ages 11 and 27 regarding opportunities for completing high school and enrolling in postsecondary education; Educational Opportunity Centers provide information and counseling on available financial and academic assistance to low-income adults who are first-generation college students; and the Ronald E. McNair Postbaccalaureate Achievement Program supports research internships, seminars, tutoring, and other activities to encourage disadvantaged college students to enroll in doctoral programs.

The Committee is aware that the Department plans to reallocate fiscal year 2012 funds from the McNair Postbaccalaureate Achieve-

ment program to the Upward Bound Math-Science program. Recognizing the importance of increasing attainment of doctoral degrees by students from disadvantaged backgrounds, the Committee directs the Department to submit a report, not later than 90 days after enactment of this act, on the impact of any proposed reduction on preparing and assisting students in the pursuit of doctoral degrees. Additionally, the Committee expects to be notified in advance of the obligation of any Federal TRIO funds for fiscal year 2013 and urges the Department to restore any proposed reduction in funding to the McNair Postbaccalaureate Achievement program within available resources.

Gaining Early Awareness and Readiness for Undergraduate Programs

The Committee recommends \$302,244,000 for GEAR UP. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. GEAR UP funds are used by States and partnerships of colleges, middle and high schools, and community organizations to assist cohorts or students in middle and high schools serving a high percentage of low-income students. Services provided help students prepare for and pursue a postsecondary education.

Graduate Assistance in Areas of National Need and Javits Fellowships

The Committee recommends \$30,909,000, the same amount as the fiscal year 2012 level and the budget request, to support the GAANN and Javits Fellowships programs.

GAANN awards competitive grants to graduate academic departments and programs for fellowship support in areas of national need as determined by the Secretary. Javits Fellowships are awarded to students of superior ability who are pursuing doctoral degrees in the arts, humanities, and social sciences. Each fellowship consists of a student stipend to cover living costs and an institutional payment to cover each fellow's tuition and other expenses.

In fiscal year 2012, Congress consolidated the GAANN and Javits Fellowships programs, as proposed by the administration. The Committee recommendation for fiscal year 2013 includes new bill language allowing funds awarded under GAANN to be used to fund continuation costs for the Javits Fellowships program.

The Committee urges the Department to ensure that the arts, humanities, and social science disciplines supported by the current Javits program are eligible fields for new and continuing grant competitions under the consolidated GAANN and Javits programs. The Committee requests that the Department provide a plan for the implementation of the consolidation. The report should be submitted to the Committee within 30 days of the enactment of this act.

Teacher Quality Partnership Program

The Committee recommends \$42,833,000, the same as the fiscal year 2012 level, for the teacher quality partnership program. The budget request consolidates this program into a proposed new Teacher and Leader Pathways authority as part of the administra-

tion's plan for reauthorizing the ESEA. The Teacher Quality Partnership 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.

Child Care Access Means Parents in Schools

The Committee recommends an appropriation of \$15,970,000 for CCAMPIS. This amount is the same as the comparable fiscal year 2012 funding level and the budget request. CCAMPIS supports the efforts of a growing number of nontraditional students who are struggling to complete their college degrees at the same time that they take care of their children. Discretionary grants of up to 4 years are made to institutions of higher education to support or establish a campus-based child care program primarily serving the needs of low-income students enrolled at the institution.

GPRA/Higher Education Act Program Evaluation

The Committee recommends \$607,000 to collect data associated with the Government Performance and Results Act and to evaluate programs authorized by the HEA. This amount is the same as the comparable fiscal year 2012 funding level and the budget request.

Hawkins Centers of Excellence

Because of budget constraints, the Committee does not recommend funding for the proposed new Hawkins Centers of Excellence. The budget request includes \$30,000,000 for this program as a way to increase the talent pool of effective minority educators by expanding and reforming teacher education programs at minority-serving institutions.

Race to the Top: College Affordability and Completion

The budget request includes \$1,000,000,000 to create the proposed Race to the Top: College Affordability and Completion initiative, which would provide competitive grants to States with strong records of, and commitments to, increasing college affordability, quality, and value. The Committee recognizes the importance of addressing rapidly increasing college costs and encouraging State-level reform of higher education policies, but it does not include funding for this program because of budget constraints. The Committee also notes that the Senate and House authorizing committees have held no hearings on this proposed initiative.

The Committee notes that the concerns the administration has raised about rising college costs are very serious ones, and agrees that action is needed to reduce burdens on families and improve outcomes for students. The Committee bill funds the First in the World competition requested in the President's budget as a first step toward tackling the challenges of college affordability and completion at the State and institution level. While the administration's request for a new Race to the Top cannot be accommodated in this year's bill, the Committee believes it is important for States to adopt reforms to higher education policies and practices that will reduce college costs for students. The Committee will continue to support these efforts and consider the Race to the Top proposal in the future, after additional deliberation in Congress.

HOWARD UNIVERSITY

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|--------------------------------|---------------|
| Appropriations, 2012 | \$234,064,000 |
| Budget estimate, 2013 | 234,064,000 |
| Committee recommendation | 234,064,000 |

The Committee recommends an appropriation of \$234,064,000 for Howard University. Howard is located in the District of Columbia and offers undergraduate, graduate, and professional degrees through 12 schools and colleges. The university also administers the Howard University Hospital. Federal funds from this account support approximately 43 percent of the university's projected educational and general expenditures, excluding the hospital. The Committee recommends, within the funds provided, not less than \$3,593,000 for the endowment program.

Howard University Hospital.—Within the funds provided, the Committee recommends \$28,834,000 for the Howard University Hospital. The hospital provides inpatient and outpatient care, as well as training in the health professions. It also serves as a major acute and ambulatory care center for the District of Columbia and functions as a major teaching facility attached to the university. The Federal appropriation provides partial funding for the hospital's operations.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS PROGRAM

| | |
|--------------------------------|-----------|
| Appropriations, 2012 | \$459,000 |
| Budget estimate, 2013 | 459,000 |
| Committee recommendation | 459,000 |

Federal Administration.—The Committee bill includes \$459,000 for Federal administration of the CHAFL program. These funds will be used to reimburse the Department for expenses incurred in managing the existing CHAFL loan portfolio during fiscal year 2013. These expenses include salaries and benefits, travel, printing, contracts, and other expenses directly related to the administration of the CHAFL program.

HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL
FINANCING PROGRAM ACCOUNT

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$20,502,000 |
| Budget estimate, 2013 | 20,502,000 |
| Committee recommendation | 20,502,000 |

The Committee recommends \$20,502,000 for the HBCU Capital Financing Program.

The Committee recommendation includes \$20,150,000 to pay the loan subsidy costs in guaranteed loan authority under this program. This amount will support \$320,350,000 in new loan volume in fiscal year 2013. The remaining \$352,000 will be used for administrative expenses.

The HBCU Capital Financing Program makes capital available to HBCUs for construction, renovation, and repair of academic facilities by providing a Federal guarantee for private sector construction bonds. Construction loans will be made from the proceeds of the sale of the bonds. As requested by the administration, the Committee retains bill language allowing the program to make

loans to public and private HBCUs without regard to the limitations within section 344(a) of the HEA.

The Committee recommendation includes new bill language, as proposed in the budget request, that allows the loan subsidy funding to be available for 2 fiscal years. The Department has found that the 1-year timeframe to insure loans constrains the planning process for new program loans, decreasing the number of projects that can be considered for funding and limiting the Department's ability to achieve the statutory mandate of ensuring that loans are fairly allocated among as many eligible institutions as possible.

INSTITUTE OF EDUCATION SCIENCES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$593,664,000 |
| Budget estimate, 2013 | 621,150,000 |
| Committee recommendation | 618,661,000 |

The Committee recommends \$618,661,000 for IES. This account supports education research, development, dissemination, and evaluation; data collection and analysis activities; and the assessment of student progress.

The Committee commends IES's attempts to improve the rigor, relevance, and utilization of education research that leads to enhanced education policy and classroom practices. The Committee urges IES to continue its efforts in these areas, particularly through the regional educational laboratories and the research, development, and dissemination program.

RESEARCH, DEVELOPMENT, AND DISSEMINATION

The Committee recommends \$189,787,000, the same as the fiscal year 2012 level, for education research, development, and national dissemination activities. The budget request is \$202,273,000. Funds are available for obligation for 2 fiscal years. These funds support 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.

The Committee directs IES to continue support for research and development activities related to gifted and talented education that directly support learning and improve the academic achievement of gifted and talented students, including those who may not be formally identified as gifted and those who are from underrepresented populations. The Committee also directs IES to support a National Research Center on the Gifted and Talented and to ensure that gifted and talented education is reported in national reports produced by IES.

The Committee is particularly supportive of IES' research partnership work, which seeks to leverage investments in statewide, longitudinal data systems in supporting reform and data-based decisionmaking. The Committee believes that this work should include local partnerships that seek to integrate these statewide systems with local and State health and human service data systems for policy- and practice-relevant research on educational risk and resilience among disadvantaged students.

The Committee continues to support IES research announcements that provide an opportunity for researchers to explore how

closed captions could be best used to increase literacy and to evaluate whether changes to closed captions might enhance their effect.

STATISTICS

The Committee recommends \$114,745,000 for data gathering and statistical analysis activities at NCES. The increase of \$5,997,000 provided above the fiscal year 2012 level will allow NCES to provide partial support to States that would like to benchmark their student performance against countries that participate in the Program for International Student Assessment. The budget request includes \$114,745,000 for NCES.

NCES collects, analyzes, and reports statistics on education in the United States. Activities are carried out directly and through grants and contracts. The Center collects data on educational institutions at all levels, longitudinal data on student progress, and data relevant to public policy. NCES also provides technical assistance to SEAs, LEAs, and postsecondary institutions.

REGIONAL EDUCATIONAL LABORATORIES

The Committee recommends \$57,426,000 to continue support for the regional educational laboratories. This amount is the same as the fiscal year 2012 level and the budget request. Funds available in this bill will continue to support a network of 10 laboratories. The laboratories are responsible for promoting the use and development of knowledge and evidence in broad-based systemic strategies to increase student learning and further school improvement efforts. The Committee appreciates the efforts of IES to strengthen the connections between practitioners and the research community, so that federally supported research is practical and meets the needs of the field.

RESEARCH AND INNOVATION IN SPECIAL EDUCATION

The Committee recommends \$59,905,000, an increase of \$10,000,000 over the fiscal year 2012 funding level and the budget request, for research and innovation in special education conducted by the National Center for Special Education Research [NCSER]. At the Committee-recommended funding level, NCSEER should be able to fund roughly \$20,000,000 in new awards in fiscal year 2013.

The Center addresses gaps in scientific knowledge in order to improve special education and early intervention services and outcomes for infants, toddlers, and children with disabilities. Funds provided to the center are available for obligation for 2 fiscal years.

Under the Individuals with Disabilities Education Improvement Act of 2004, Congress established NCSEER to improve the overall quality and rigor of the special education research conducted by the Department, and to ensure that the needs of children with disabilities are included throughout other research programs, data collection efforts, and related activities conducted at IES, OSEP, and other offices of the Department. The Committee therefore directs the Director to submit a report within 90 days of enactment on the Institute's plans for a comprehensive research agenda for special education.

SPECIAL EDUCATION STUDIES AND EVALUATIONS

The Committee recommends \$11,415,000 for special education studies and evaluations. This amount is the same as the fiscal year 2012 level and the budget request.

This program supports competitive grants, contracts, and cooperative agreements to assess the implementation of IDEA. Funds are also used to evaluate the effectiveness of State and local efforts to deliver special education services and early intervention programs. Funds are available for obligation for 2 fiscal years.

STATEWIDE DATA SYSTEMS

The Committee recommendation includes \$53,077,000, the same amount as the budget request, for statewide data systems. The fiscal year 2012 level is \$38,077,000.

This program supports competitive grants to SEAs to enable such agencies to design, develop, and implement statewide, longitudinal data systems to manage, analyze, disaggregate, and use individual data for students of all ages. Early childhood, postsecondary, and workforce information systems may be linked to such systems or developed with program funds. The Committee believes the Department should continue its efforts to ensure every State has the base support necessary to develop effective systems. Funds are available for obligation for 2 fiscal years.

The Committee bill allows up to \$20,000,000 to be used for awards to public or private agencies or organizations to support activities to improve data coordination, quality, and use at the local, State, and national levels. The Committee requests that, prior to obligating any funds for this purpose, the Department provide to the Committee an operating plan describing the proposed purpose and use of such funds.

ASSESSMENT

The Committee recommends \$132,306,000, the same amount as the budget request, to provide support for NAEP, a congressionally mandated assessment created to measure and report the educational achievement of American students in a range of subjects and analyze trends over time. The comparable fiscal year 2012 amount is \$138,306,000.

Within the funds appropriated, the Committee recommends \$7,690,000, the same amount as the budget request, for NAGB. The comparable fiscal year 2012 level is \$8,690,000. NAGB is responsible for formulating policy for NAEP.

DEPARTMENTAL MANAGEMENT

PROGRAM ADMINISTRATION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$446,259,000 |
| Budget estimate, 2013 | 463,815,000 |
| Committee recommendation | 448,470,000 |

The Committee recommends \$448,470,000 for program administration.

Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, auto-

mated data processing, and other services required to award, administer, and monitor Federal education programs. Support for program evaluation and studies and advisory councils also is provided under this account.

The Committee recommendation includes \$2,211,000, the same amount as the budget request, for building modernization activities for the Department. The fiscal year 2012 bill did not provide any resources for this purpose.

The Committee is concerned with deficiencies in geography education at the elementary and secondary education levels and geographic education research in the United States. The Committee recognizes that a sound understanding of geography is critical to ensuring that the American workforce is qualified for jobs in geospatial technologies and other emerging industries. The Committee directs GAO to conduct a study on the status of geographic education and the ability of U.S. graduates to fill and retain skilled jobs, particularly in geospatial technologies. Additionally, recognizing fiscal constraints on States and LEAs, the Committee requests GAO to report on the challenges elementary and secondary schools face in providing geographic education within limited resources.

OFFICE FOR CIVIL RIGHTS

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$102,624,000 |
| Budget estimate, 2013 | 105,318,000 |
| Committee recommendation | 102,624,000 |

The Committee recommends \$102,624,000 for OCR.

OCR is responsible for the enforcement of laws that prohibit discrimination on the basis of race, color, national origin, sex, disability, and age in all programs and institutions that receive financial assistance from the Department. To carry out this responsibility, OCR investigates and resolves discrimination complaints, monitors desegregation and equal educational opportunity plans, reviews possible discriminatory practices by recipients of Federal education funds, and provides technical assistance to recipients of funds to help them meet these civil rights requirements.

The Committee finds troubling the continued high rates of out-of-school suspension and expulsion evidenced in the Civil Rights Data Collection [CRDC]. Research demonstrates that over-reliance on suspension and expulsion does not improve school safety, does little to correct misbehavior, is associated with worse school-wide educational outcomes, and increases the likelihood of a student dropping out and having contact with the juvenile justice system. However, as the CRDC shows, some schools have successfully lowered suspension and expulsion rates and have demonstrated academic improvement in the process.

The Committee applauds the Department for its recent expansion of the CRDC to include more data related to school discipline and climate. The Committee recommends further expansion of the CRDC to include a comprehensive set of school discipline data indicators such as: the grade level of students subject to discipline, the length of time of any exclusionary discipline action, and disaggregation by the general types of incidents giving rise to disciplinary action. Adequate collection and reporting of this informa-

tion will engender the implementation of the types of evidence-based approaches to improving school discipline and climate that improve academic performance, student attendance, and perceptions of school safety while lowering disciplinary rates.

OFFICE OF THE INSPECTOR GENERAL

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$59,820,000 |
| Budget estimate, 2013 | 62,401,000 |
| Committee recommendation | 59,820,000 |

The Committee recommends \$59,820,000 for OIG.

OIG has the authority to investigate all departmental programs and administrative activities, including those under contract or grant, to prevent and detect fraud and abuse, and to ensure the quality and integrity of those programs. The Office investigates alleged misuse of Federal funds and conducts audits to determine compliance with laws and regulations, efficiency of operations, and effectiveness in achieving program goals.

GENERAL PROVISIONS

Section 301. The bill continues a provision prohibiting the use of funds for the transportation of students or teachers in order to overcome racial imbalance.

Section 302. The bill continues a provision prohibiting the involuntary transportation of students other than to the school nearest to the student's home.

Section 303. The bill continues a provision prohibiting the use of funds to prevent the implementation of programs of voluntary prayer and meditation in public schools.

Section 304. The bill continues a provision giving the Secretary authority to transfer up to 1 percent of any discretionary funds between appropriations.

Section 305. The bill continues a provision that allows the outlying areas to consolidate funds under title V of the ESEA.

Section 306. The bill continues a provision that allows the Republic of Palau to receive certain Federal funds.

Section 307. The bill includes a new provision changing the name of the Office of Vocational and Adult Education to the Office of Career, Technical, and Adult Education.

Section 308. The bill contains a new provision that clarifies the Department's authority to reserve up to 0.5 percent of each ESEA appropriation in the bill for evaluation of ESEA programs funded in this act. These resources are in addition to any funds specifically provided for evaluation purposes. The Department shall provide the Committees on Appropriations and HELP with an evaluation plan not later than 10 days before any funds are obligated under the provision.

Section 309. The bill includes a new provision prohibiting all colleges and universities that receive funding through HEA from spending Federal educational program dollars on advertising, marketing, and recruitment.

Section 310. The bill includes a new provision that reforms the student aid programs by eliminating the interest subsidy for new borrowers who remain in-school beyond 150 percent of their pro-

gram length, reducing subsidies for guaranty agencies that rehabilitate defaulted loans, and reducing fraud related to distance education programs. The savings from these reforms are reappropriated into the Pell grant program. The provision will also allow certain students to become eligible for Pell grants through the ability to benefit option and to limit the number of not-for-profit student loan servicers.

TITLE IV
RELATED AGENCIES

COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR
SEVERELY DISABLED

SALARIES AND EXPENSES

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | \$5,375,000 |
| Budget estimate, 2013 | 5,396,000 |
| Committee recommendation | 5,375,000 |

The Committee recommends \$5,375,000 for the Committee for Purchase from People Who Are Blind or Severely Disabled.

The primary purpose of this program is to increase the employment opportunities for people who are blind or have other severe disabilities and, whenever possible, to prepare them to engage in competitive employment.

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

OPERATING EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$750,252,000 |
| Budget estimate, 2013 | 760,498,000 |
| Committee recommendation | 760,498,000 |

The Committee recommends \$760,498,000 for the operating expenses of CNCS.

The Committee recommendation is sufficient to maintain the number of AmeriCorps members at over 82,000.

The Committee bill includes a consolidation of the Training and Technical Assistance grants into the State Commission grants. The Committee believes that this consolidation will create efficiencies at both the Federal and State levels of government by combining two State grants with overlapping purposes.

CNCS, a corporation owned by the Federal Government, was established to enhance opportunities for national and community service. The Corporation makes grants to States, institutions of higher education, public and private nonprofit organizations, and others to create service opportunities for students, out-of-school youth, and adults.

CNCS administers programs authorized under the Domestic Volunteer Service Act, the National and Community Service Trust Act, and the SERVE America Act.

VISTA

The Committee recommends \$95,300,000, the same as the budget request, for VISTA. The fiscal year 2012 level is \$94,820,000.

VISTA 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 activities.

NATIONAL SENIOR VOLUNTEER CORPS

The Committee recommends \$208,883,000 for the National Senior Volunteer Corps Programs. The fiscal year 2012 comparable level is \$207,491,000 and the budget request is \$207,883,000.

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. Programs include the Retired Senior Volunteer Program, the Foster Grandparent Program, and the Senior Companion Program.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 request | Committee recommendation |
|--|-----------------------------|--------------------------|--------------------------|
| Retired Senior Volunteer Program | 50,204 | 50,299 | 51,299 |
| Foster Grandparent Program | 110,565 | 110,774 | 110,774 |
| Senior Companion Program | 46,722 | 46,810 | 46,810 |

The Committee includes \$1,000,000 above the request in the Retired Senior Volunteer Program [RSVP] to provide training and technical assistance to grantees as they begin to undergo the grant competition process set out in the SERVE America Act, scheduled to begin in fiscal year 2013.

AMERICORPS STATE AND NATIONAL GRANTS

The Committee recommends \$346,368,000 for AmeriCorps State and National Grants. The fiscal year 2012 level is \$344,348,000. The budget request is \$345,000,000.

AmeriCorps State and National Grants provide funds to local and national organizations and agencies to address community needs in education, public safety, health, and the environment. Each of these organizations and agencies, in turn, uses its AmeriCorps funding to recruit, place, and supervise AmeriCorps members. AmeriCorps members receive a modest living allowance and other benefits proportional to their level of time commitment.

In fiscal year 2009, Congress removed a long-standing provision capping the amount of funding that could be awarded as national direct grants. Fiscal year 2012 was the fourth year in which CNCS determined the funding balance between State and national direct awardees. The Committee requests a report, no later than 60 days after the beginning of fiscal year 2013, on the balance of awards between national direct grants, State competitive grants, and State formula awards for the 4 years prior to and the 4 years subsequent to the elimination of the statutory cap. The report should include a State-by-State analysis that includes number of members, number of grants, and dollar amounts for each State.

The Committee is very supportive of the work being done by members supported by the national direct program; however, the Committee is concerned by the lack of support for rural America

in this program. The Committee directs CNCS to develop an action plan for how to create a more appropriate balance between urban and rural communities in the national direct program. The Committee encourages CNCS to engage organizations that specialize in addressing rural needs to determine the type of technical assistance that might increase their participation in this important program.

National Civilian Community Corps [NCCC]

The Committee recommendation includes \$30,742,000 for NCCC. The comparable fiscal year 2012 level is \$31,882,000 and the budget request is \$30,110,000. The recommended reduction reflects the completion of one-time relocation activities related to the loss of the Perry Point campus.

NCCC is a full-time, team-based residential program for men and women ages 18 to 24. Members are assigned to 1 of 5 campuses for a 10-month service commitment.

The Committee is pleased by the creation of FEMA Corps, a new partnership between CNCS and the Federal Emergency Management Agency [FEMA]. This partnership is a welcome recognition of the significant contribution that NCCC teams have made to communities hardest hit by natural disasters. FEMA Corps will broaden this traditional mission of NCCC by creating a new Corps with additional responsibilities and training. Given that NCCC has routinely executed task orders from FEMA in the past, the Committee believes that allowing FEMA to deploy NCCC members directly will create sorely needed efficiencies in times of crisis.

INNOVATION, DEMONSTRATION, AND ASSISTANCE ACTIVITIES

The Committee recommendation includes \$54,215,000 for Innovation, Demonstration, and Assistance Activities. The comparable fiscal year 2012 level is \$53,280,000. The budget request is \$53,215,000.

Within the funds provided for the Innovation account, the Committee includes \$45,000,000 for the Social Innovation fund authorized under section 1807 of the SERVE America Act. The fiscal year 2012 comparable level is \$44,815,000. The budget request is \$50,000,000.

In addition, \$5,000,000 is included for the Volunteer Generation Fund authorized under section 198P of the SERVE America Act, and \$1,000,000 for MLK Service Day. The fiscal year 2012 comparable levels are \$3,984,000 and \$992,000, respectively. The budget request does not include funds for either activity.

EVALUATION

The Committee recommendation includes \$5,000,000, the same as the budget request, for CNCS evaluation activities. The fiscal year 2012 level is \$2,994,000.

The Committee intends that part of the increase in evaluation funds be used to continue the Civic Health Assessment, which is funded in Training and Technical Assistance in fiscal year 2012.

STATE COMMISSION GRANTS

The Committee includes \$19,990,000 for State Commission grants. The fiscal year 2012 level is \$15,437,000 and the budget request is \$20,990,000.

The recommended increase over the budget request reflects the Committee’s intention to consolidate the training and technical assistance grants into the State Commission Grants. The Committee believes that this consolidation will create efficiencies at both the Federal and State levels of government by combining two State grants with overlapping purposes. The Committee expects CNCS to develop measures to ensure that States adequately train new applicants and newly awarded grantees in accountability procedures.

The Committee does not continue a provision in the fiscal year 2012 bill that lowered the State minimum award to \$200,000 from the \$250,000 level prescribed in the SERVE America Act.

The Committee is concerned that Commission grants are awarded based on a formula that does not take into account either the number of grants, the number of members, or the dollar amounts administered by any of the State commissions. As CNCS moves to consolidate training and technical assistance into this funding stream, the Committee encourages CNCS to consider linking the State Commission Grants more closely to their federally mandated workload.

PAYMENT TO THE NATIONAL SERVICE TRUST

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$211,797,000 |
| Budget estimate, 2013 | 208,744,000 |
| Committee recommendation | 208,744,000 |

The Committee recommends an appropriation of \$208,744,000 for making payments to the National Service Trust.

The National Service Trust makes payments of 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 CNCS.

The recommended funding level is sufficient to support no less than the same number of servicemembers as were enrolled in fiscal year 2012.

The Committee is aware that some institutions of higher education, in recognition and appreciation of members’ service, have agreed to match the Segal educational award either financially or through some other inducement. This is a practice that the Committee applauds and would like to encourage due to the increasing costs of higher education and limited resources for financial aid. To that end, the Committee directs CNCS to include in members’ end-of-service packet of information a list of all institutions and programs in the country that match the educational award. The Committee further directs CNCS to make a current list available on its Web site and in the AmeriCorps portal.

SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$82,843,000 |
| Budget estimate, 2013 | 88,000,000 |
| Committee recommendation | 88,000,000 |

The Committee recommends an appropriation of \$88,000,000 for CNCS salaries and expenses.

The salaries and expenses appropriation provides funds for staff salaries, benefits, travel, training, rent, equipment, and other operating expenses necessary for management of CNCS programs and activities.

The Committee strongly supports efforts to redesign the outreach activities meant to recruit and support national service members with disabilities. The program should build on successful models of integration of persons with disabilities. The Committee notes that section 129(k) of the National and Community Service Act of 1990 requires CNCS to reserve 2 percent of funds for disability training and support activities. Though flexibility exists to use excess funds in other ways, the Congress clearly intended this effort to be robust. Therefore, the Committee requests that CNCS begin to report in the annual congressional budget justification the amount for disability training and support activities proposed for the current fiscal year and the amount obligated in the 5 prior fiscal years.

The Committee remains strongly supportive of service learning. The Committee encourages CNCS to work with the heads of State service commissions, former Learn and Serve America grantees, SEAs, and other relevant stakeholders to formulate a plan to advance service learning. The Committee further encourages CNCS to become a national resource on service learning by collecting and disseminating model curricula and public information on school districts that provide service learning opportunities for school-aged children.

OFFICE OF INSPECTOR GENERAL

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | \$3,992,000 |
| Budget estimate, 2013 | 5,400,000 |
| Committee recommendation | 5,400,000 |

The Committee recommends an appropriation of \$5,400,000 for the CNCS OIG.

The OIG's goals are to increase organizational efficiency and effectiveness within the Corporation and to prevent fraud, waste, and abuse.

The recommended level of funding should allow the IG to hire three new criminal investigators, one criminal analyst, two auditors and an audit manager.

ADMINISTRATIVE PROVISIONS

The Committee retains language in previous bills concerning four administrative provisions: requiring the Corporation to make any significant changes to program requirements or policy through rule-making (section 401), stipulating minimum share requirements (section 402), requiring that donations supplement and not supplant operations (section 403), and aligning requirements regarding the use of Education Awards at GI bill-eligible institutions

(section 404). The Committee bill does not include language requested by the administration to modify the SERVE America Act with respect to the Senior Corps grant award process.

CORPORATION FOR PUBLIC BROADCASTING

| | |
|--------------------------------------|---------------|
| Appropriations, 2012 | \$444,159,000 |
| Appropriations, 2013 | 445,000,000 |
| Appropriations, 2014 | 445,000,000 |
| Budget estimate, 2015 | 445,000,000 |
| Committee recommendation, 2015 | 445,000,000 |

The Committee recommends \$445,000,000 for CPB as an advance appropriation for fiscal year 2015. Two-year advance funding has been in place since 1975 to ensure the independence of public broadcasting programming.

The majority of these funds go directly to local public television and radio stations to support their programming. CPB funds also support the creation of content for radio, television, and other platforms; system support activities that benefit the entire public broadcasting community; and CPB's administrative costs.

FEDERAL MEDIATION AND CONCILIATION SERVICE

SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$46,163,000 |
| Budget estimate, 2013 | 47,045,000 |
| Committee recommendation | 46,163,000 |

The Committee recommends \$46,163,000 for the Federal Mediation and Conciliation Service [FMCS]. FMCS provides mediation, conciliation, and arbitration services to labor and management organizations to prevent and minimize work stoppages and promote stable labor-management relationships. FMCS is also authorized to provide dispute resolution consultation and training to all Federal agencies.

Within the total, the Committee recommendation includes up to \$400,000, the same amount as the budget request, for labor-management partnership grants. This program was not funded in fiscal year 2012. These grants support innovative approaches to collaborative labor-management relationships to resolve potential problems, explore ways to improve productivity, and avert serious work stoppages.

FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$17,604,000 |
| Budget estimate, 2013 | 16,000,000 |
| Committee recommendation | 17,000,000 |

The Committee recommends \$17,000,000 for FMSHRC. FMSHRC provides administrative trial and appellate review of legal disputes under the Federal Mine Safety and Health Act of 1977. Most cases involve civil penalties proposed by MSHA. FMSHRC's administrative law judges [ALJs] decide cases at the trial level and the five-member Commission provides review of the ALJ decisions.

The comparable fiscal year 2012 funding level includes \$2,680,000 in one-time costs associated with developing an electronic case management system and moving FMSHRC to new office space. Excluding these one-time costs, the Committee recommendation represents a \$2,076,000 increase over the comparable fiscal year 2012 operating level.

This increase in funding, and corresponding increases at DOL, supports continued Federal efforts to reduce the backlog of appealed cases up for review at FMSHRC. The rate of contested MSHA citations has more than quadrupled since 2006, resulting in a corresponding fourfold increase in the number of cases appealed to FMSHRC annually. For many years FMSHRC’s funding did not keep up with this added workload resulting in a significant increase in the number of backlogged cases awaiting review and the time it takes to process cases. This has created a dangerous incentive for mine operators to contest violations solely to delay enforcement. Congress provided additional resources over the last several years to increase capacity to process contested cases but at current funding levels FMSRHC is still only able to keep up with incoming cases. As a result, pending cases and processing times are expected to remain at approximately their current levels. The Committee recommendation allows FMSHRC to decrease the number of pending cases and the time it takes to process cases.

INSTITUTE OF MUSEUM AND LIBRARY SERVICES

OFFICE OF MUSEUM AND LIBRARIES: GRANTS AND ADMINISTRATION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$231,954,000 |
| Budget estimate, 2013 | 231,954,000 |
| Committee recommendation | 231,954,000 |

The Committee recommends \$231,954,000 for IMLS. IMLS supports programs for museums and libraries that encourage innovation, provide lifelong learning opportunities, promote cultural and civic engagement, and improve access to a variety of services and information.

The budget request proposes to consolidate the Conservation Project Support program with the Museums for America program and the 21st Century Museum Professionals program with the National Leadership program, for the purpose of simplifying and streamlining the grantee application process and IMLS’ management of these programs. The Committee supports these consolidations.

The Committee encourages IMLS to consider allowing museums, as appropriate, to be considered as organizations that primarily serve and represent Native Hawaiians for eligibility purposes under the Native American/Native Hawaiian Museum Services program.

Within the total for IMLS, the Committee recommendation includes the amounts below:

[in thousands of dollars]

| Budget activity | Fiscal year 2012 comparable | Fiscal year 2013 budget request | Fiscal year 2013 Committee recommendation |
|--|--------------------------------|------------------------------------|---|
| Library Services Technology Act: | | | |
| Grants to States | 156,365 | 156,365 | 156,365 |
| Native American Library Services | 3,869 | 3,869 | 3,869 |
| National Leadership: Libraries | 11,946 | 12,000 | 12,000 |
| Laura Bush 21st Century Librarian | 12,524 | 12,470 | 12,470 |
| Subtotal, LSTA | 184,704 | 184,704 | 184,704 |
| Museums Services Act: | | | |
| Museums for America | 18,030 | 20,643 | 20,643 |
| 21st Century Museum Professionals | 1,969 | ..... | ..... |
| Conservation Project Support | 2,675 | ..... | ..... |
| Native American/Hawaiian Museum Services | 926 | 926 | 926 |
| National Leadership: Museums | 5,911 | 7,880 | 7,880 |
| Subtotal, MSA | 29,449 | 29,449 | 29,449 |
| African American History and Culture Act | 1,410 | 1,410 | 1,410 |
| Administration | 14,505 | 14,505 | 14,505 |
| Research, Analysis, and Data Collection | 1,886 | 1,886 | 1,886 |

MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION

SALARIES AND EXPENSES

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | \$5,989,000 |
| Budget estimate, 2013 | 11,000,000 |
| Committee recommendation | 9,500,000 |

The Committee recommends \$9,500,000 for MACPAC. MACPAC was established in the Children's Health Insurance Program Reauthorization Act of 2009 and is tasked with reviewing State and Federal Medicaid and Children's Health Insurance Program access and payment policies and making recommendations to Congress, the Secretary of HHS, and the States on a wide range of issues affecting those programs. The Committee recommendation will allow MACPAC to continue to build capacity to carry out these activities.

MEDICARE PAYMENT ADVISORY COMMISSION

SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$11,778,000 |
| Budget estimate, 2013 | 12,210,000 |
| Committee recommendation | 11,778,000 |

The Committee recommends \$11,778,000 for MedPAC, which provides independent policy and technical advice on issues affecting the Medicare program.

NATIONAL COUNCIL ON DISABILITY

SALARIES AND EXPENSES

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | \$3,258,000 |
| Budget estimate, 2013 | 3,258,000 |
| Committee recommendation | 3,258,000 |

The Committee recommends \$3,258,000 for the National Council on Disability [NCD]. NCD is mandated to make recommendations

to the President, Congress, the RSA, and NIDRR on issues of concern to individuals with disabilities. The Council gathers information on the implementation, effectiveness, and impact of the Americans with Disabilities Act and examines emerging policy issues as they affect persons with disabilities and their ability to enter or re-enter the Nation's workforce and to live independently.

NATIONAL HEALTH CARE WORKFORCE COMMISSION

SALARIES AND EXPENSES

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | |
| Budget estimate, 2013 | \$3,000,000 |
| Committee recommendation | 3,000,000 |

The Committee recommendation includes \$3,000,000 for the National Health Care Workforce Commission, which was authorized in PPACA but has not yet been funded.

The Commission will serve as a resource to Congress, the President, and State and local entities in evaluating healthcare workforce needs, including assessing education and training activities to determine to what extent the demand for health workers is being met; identifying barriers to improved coordination at the Federal, State and local levels; and recommending changes to address those barriers.

NATIONAL LABOR RELATIONS BOARD

SALARIES AND EXPENSES

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$278,306,000 |
| Budget estimate, 2013 | 292,800,000 |
| Committee recommendation | 288,306,000 |

The Committee recommends \$288,306,000 for NLRB, which administers and enforces the National Labor Relations Act and protects employee and employer rights provided under that act.

The Committee recommends an increase of \$10,000,000 for planned relocation costs in fiscal year 2013. The General Services Administration has recommended that NLRB reduce its headquarters space and estimates that \$10,000,000 will be needed for those associated costs. In future years this reduction in space is expected to reduce NLRB's rent costs by approximately 30 percent, or \$4,600,000 annually.

NATIONAL MEDIATION BOARD

SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$13,411,000 |
| Budget estimate, 2013 | 13,530,000 |
| Committee recommendation | 14,411,000 |

The Committee recommends \$14,411,000 for the National Mediation Board [NMB], which mediates labor-management relations in the railroad and airline industries under the Railway Labor Act. The NMB mediates collective bargaining disputes, conducts elections to determine the choice of employee bargaining representatives, and administers arbitration of employee grievances. The Committee recommendation includes an increase over the com-

parable fiscal year 2012 funding level to prevent backlogs of key workloads and to respond to oversight and reporting requirements included in the FAA Modernization and Reform Act of 2012.

OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

SALARIES AND EXPENSES

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$11,667,000 |
| Budget estimate, 2013 | 11,965,000 |
| Committee recommendation | 11,667,000 |

The Committee recommends \$11,667,000 for the Occupational Safety and Health Review Commission [OSHRC]. OSHRC serves as a court to resolve disputes between OSHA and employers charged with violations of health and safety standards enforced by OSHA.

RAILROAD RETIREMENT BOARD

The Railroad Retirement Board [RRB] administers the retirement/survivor and unemployment/sickness insurance benefit programs for railroad workers and their families under the Railroad Retirement Act and Railroad Unemployment Insurance Act.

DUAL BENEFITS PAYMENTS ACCOUNT

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$50,904,000 |
| Budget estimate, 2013 | 45,000,000 |
| Committee recommendation | 45,000,000 |

The Committee recommends \$45,000,000 for the Dual Benefits Payments Account. This amount includes an estimated \$3,000,000 derived from income taxes on vested dual benefits. This appropriation provides for vested dual benefit payments to beneficiaries covered under both the railroad retirement and Social Security systems.

FEDERAL PAYMENTS TO THE RAILROAD RETIREMENT ACCOUNT

| | |
|--------------------------------|-----------|
| Appropriations, 2012 | \$150,000 |
| Budget estimate, 2013 | 150,000 |
| Committee recommendation | 150,000 |

The Committee recommends \$150,000 for Federal payments to the railroad retirement account. These funds reimburse the railroad retirement trust funds for interest earned on non-negotiated checks.

LIMITATION ON ADMINISTRATION

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$108,649,000 |
| Budget estimate, 2013 | 112,415,000 |
| Committee recommendation | 111,649,000 |

The Committee recommends \$111,649,000 for RRB's costs associated with the administration of railroad retirement/survivor and unemployment/sickness benefit programs. This account limits the amount of funds in the railroad retirement and railroad unemployment insurance trust funds that may be used by the Board for administrative expenses. The Committee recommendation includes an increase over the comparable fiscal year 2012 funding level to support RRB's transition to a new financial management system.

LIMITATION ON THE OFFICE OF THE INSPECTOR GENERAL

| | |
|--------------------------------|-------------|
| Appropriations, 2012 | \$8,155,000 |
| Budget estimate, 2013 | 8,820,000 |
| Committee recommendation | 8,155,000 |

The Committee recommends \$8,155,000 for the RRB OIG. This Office conducts audits and investigations to protect the integrity of the RRB trust funds and provides comprehensive oversight of all RRB operations and programs.

SOCIAL SECURITY ADMINISTRATION

PAYMENTS TO SOCIAL SECURITY TRUST FUNDS

| | |
|--------------------------------|--------------|
| Appropriations, 2012 | \$20,404,000 |
| Budget estimate, 2013 | 20,402,000 |
| Committee recommendation | 20,402,000 |

The Committee recommends \$20,402,000 in mandatory funds for payments to Social Security trust funds. This account reimburses the Old Age and Survivors Insurance [OASI] and Disability Insurance [DI] trust funds for special payments to certain uninsured persons, costs incurred administering pension reform activities, and the value of the interest for benefit checks issued but not negotiated. This appropriation restores the trust funds to the same financial position they would have been in had they not borne these costs and they were properly charged to general revenues.

SUPPLEMENTAL SECURITY INCOME PROGRAM

| | |
|--------------------------------|------------------|
| Appropriations, 2012 | \$37,823,550,000 |
| Budget estimate, 2013 | 40,043,000,000 |
| Committee recommendation | 40,043,000,000 |

The Committee recommends \$40,043,000,000 in fiscal year 2013 mandatory funds for the SSI program. In addition, the Committee recommends \$19,300,000,000, the same as the budget request, in advance funding for the first quarter of fiscal year 2014. The comparable advance provided last year for the first quarter of fiscal year 2013 is \$18,200,000,000. The SSI program guarantees a minimum level of income to individuals who are disabled, blind, or older than age 65, and meet certain income and resource limitations.

Federal Benefit Payments

The Committee recommendation includes a fiscal year 2013 program level of \$54,245,000,000, the same as the budget request, for Federal benefit payments. This includes a regular fiscal year 2013 mandatory appropriation of \$36,045,000,000 and a mandatory advance appropriation provided last year for the first quarter of fiscal year 2013 of \$18,200,000,000. The comparable fiscal year 2012 program level is \$47,557,000,000. The increase in fiscal year 2013 is largely the result of having 13 Federal monthly benefit payments compared with 11 in fiscal year 2012. Monthly SSI benefit payments are typically made on the first day of the month. But if the first day of the month falls on a weekend or holiday, the payment is accelerated to the previous business day. As a result, the number of monthly payments in some fiscal years can vary. In fiscal year

2013 the SSI program will provide an average monthly benefit of \$544 to 8.2 million recipients.

Beneficiary Services

As in the budget request, the Committee recommendation does not include new mandatory budget authority for beneficiary services. The comparable fiscal year 2012 funding level is \$47,000,000. Carryover of prior year unobligated balances will be sufficient to fund these activities in fiscal year 2013 and will support a fiscal year 2013 program level of \$59,000,000. The comparable fiscal year 2012 program level is \$52,000,000.

These funds reimburse VR agencies for successfully rehabilitating disabled SSI recipients by helping them achieve and sustain productive, self-supporting work activity. Funds also support the Ticket to Work program that provides SSI recipients with a ticket to offer employment networks [ENs], including VR agencies, in exchange for employment and support services. Instead of reimbursing ENs for specific services, the Ticket to Work program pays ENs based on recipients achieving certain milestones and outcomes.

Research and Demonstration

The Committee recommendation includes \$48,000,000, the same as the budget request, in mandatory funds for research and demonstration projects conducted under sections 1110, 1115, and 1144 of the Social Security Act. The comparable fiscal year 2012 funding level is \$7,998,000. Because of the availability of unobligated balances, these funds will support a fiscal year 2013 program level of \$57,270,000, compared to \$51,422,000 in fiscal year 2012.

These funds support a variety of research and demonstration projects designed to improve the disability process, promote self-sufficiency and assist individuals in returning to work, encourage savings and retirement planning through financial literacy, and generally provide analytical and data resources for use in preparing and reviewing policy proposals.

Within the total for research and demonstration, the Committee recommends \$7,200,000, the same amount as the budget request, for the PROMISE program. The comparable fiscal year 2012 funding level is \$2,800,000. This demonstration program is jointly administered by SSA and the Department of Education and includes interagency collaboration with the Departments of HHS and Labor. The goal of the PROMISE program is to test interventions that improve health, education, postsecondary, employment, and family outcomes for children receiving SSI by encouraging innovation and improving coordination between existing programs and services. In fiscal year 2013, the Department of Education expects to award competitive grants to a small number of States to test promising strategies. These funds at SSA will support program design and evaluation activities.

Within the total for research and demonstration the Committee recommends \$3,000,000 for a new demonstration program to test the impact of providing financial literacy information on the OASI, DI, and SSI programs to high school-aged youth.

Administrative Expenses

The Committee recommendation includes \$3,950,000,000, the same as the budget request, for SSI program administrative expenses. The comparable fiscal year 2012 funding level is \$3,611,552,000. This appropriation funds the SSI program's share of administrative expenses incurred through the Limitation on Administrative Expenses [LAE] account.

LIMITATION ON ADMINISTRATIVE EXPENSES

| | |
|--------------------------------|------------------|
| Appropriations, 2012 | \$11,445,192,000 |
| Budget estimate, 2013 | 11,755,000,000 |
| Committee recommendation | 11,735,544,000 |

The Committee recommends \$11,735,544,000 for SSA's LAE account. This account provides resources for SSA to administer the OASI, DI, and SSI programs, and to support CMS in administering the Medicare program. The LAE account is funded by the Social Security and Medicare trust funds for their share of administrative expenses, the general fund for the SSI program's share of administrative expenses, and applicable user fees. The majority of these funds are used to process retirement and disability claims, which SSA expects will stay at near-record levels in fiscal year 2013.

The Committee applauds the work SSA has done in recent years to reduce the disability hearings backlog and the time it takes to process disability hearings. SSA has reduced the average time it takes to process a disability hearing from 532 days in 2008 to 354 days in 2012, despite a record increase in disability hearings over that period. SSA has also greatly improved the parity of processing times across the country. In fiscal year 2008 some hearing offices had average processing times over 900 days but this year no hearing office has a processing time over 475 days.

Work Incentives Planning and Assistance [WIPA] and Protection and Advocacy for Beneficiaries of Social Security [PABSS].—The WIPA and PABSS programs provide valuable services to disabled beneficiaries, particularly in helping them return to work. However, because of a delay in the reauthorization process, WIPA grantees have been told they will have to shut down at the end of June 2012 and PABSS grantees at the end of September 2012. The Committee strongly encourages SSA to use fiscal year 2012 funds, and the broad authority provided in annual appropriations language, to continue these programs. Specifically, the Committee encourages SSA to extend current WIPA and PABSS grants as soon as possible for a short period of time, up to 1 year, to prevent any disruption in services. If there are subsequent changes to the programs, through reauthorization or otherwise, this would give the Agency ample time to run a new competition and make new awards without unnecessarily creating a gap in services. In addition, the Committee recommendation for fiscal year 2013 includes \$23,000,000 for WIPA and \$7,000,000 for PABSS.

Representative Payee Oversight.—The Committee recommendation includes not less than \$2,500,000 for SSA to continue to partner with outside organizations to improve representative payee oversight. SSA assigns representative payees when beneficiaries are unable to financially manage their own benefit payments.

These funds support activities to identify and prevent fraud and abuse within the program.

Social Security Advisory Board.—The Committee recommendation includes not less than \$2,150,000, the same as the budget request, for the Social Security Advisory Board. The comparable fiscal year 2012 funding level is \$2,146,000. The Social Security Advisory Board advises the Commissioner of Social Security and makes recommendations to Congress and the President on policies relating to the OASI, DI, and SSI programs.

Social Security Annual Statements.—The Committee believes that Social Security Annual Statements, required by statute to be provided to everyone older than age 25, provide valuable information to workers on their benefits under the OASI and DI programs. In addition, they allow workers to check their earnings history and notify SSA of any errors in a timely fashion. Earnings discrepancies identified years later can often be complicated and time-consuming to resolve. Therefore, the Committee directs SSA to resume the mailing of annual Social Security Account Statements in accordance with section 1143(c)(2) of the Social Security Act.

Field Office Closings.—The Committee directs SSA to submit a report to the Committee on Appropriations of the Senate within 90 days of enactment of this act on its policies and procedures for closing and consolidating field offices. The report should include a detailed description of the process SSA uses and the factors it considers when deciding which offices to close, and its process for notifying the public of such closures. It should also include an analysis of the offices closed in fiscal year 2012 based on those factors. Finally, the Committee directs SSA to provide a readily available public notice of proposed field office closures. Such notice should be provided not less than 90 days prior to closing any field office.

Administrative Law Judge Disclosure Policy.—The Committee is concerned about SSA's new policy to not disclose the name of the ALJ who will preside over a disability appeal until the day of the hearing. The Committee notes SSA's concern with the possibility of claimant representatives abusing the process, specifically as it relates to declining a video hearing or postponing other hearings simply to search for judges they believe are more likely to allow a case. This abuse challenges the integrity of the process and can cause administrative delays. However, such a broad policy change could have unintended consequences. The Committee strongly encourages SSA to consider policies more targeted at suspected abuse, such as sanctions against individual representatives or changes to regulations to prevent representatives from canceling a video hearing close to the hearing date without due cause. The Committee directs SSA to submit a report to the Committee on Appropriations of the Senate no later than November 1, 2012, detailing the type and scope of abuse under the previous policy and alternative policies that were considered or could otherwise be used to address the issue.

Program Integrity

Within the total for LAE, the Committee recommendation includes \$1,024,000,000, the same as the budget request, for program integrity activities. This includes \$273,000,000 in base funding and

\$751,000,000 in cap adjustment funding allowed under the Budget Control Act of 2011. The comparable fiscal year 2012 funding level is \$756,052,000. These funds support program integrity activities such as continuing disability reviews [CDRs] and redeterminations of nonmedical eligibility under the SSI program. This increase in funding in fiscal year 2013 will allow SSA to conduct approximately 650,000 full medical CDRs, 215,000 more than in fiscal year 2012, and 2,622,000 SSI redeterminations, the same amount as in fiscal year 2012. In total, these activities are projected to save approximately \$8,100,000,000 over 10 years to the Social Security, Medicare, and Medicaid programs.

User Fees

Within the total for LAE, the Committee recommendation includes up to \$166,500,000 for administrative activities funded from user fees. This includes \$166,000,000 in fees paid to SSA by States that request SSA to administer State SSI supplementary payments and up to \$500,000 from a fee payment process for nonattorney representatives of claimants.

OFFICE OF THE INSPECTOR GENERAL

| | |
|--------------------------------|---------------|
| Appropriations, 2012 | \$102,283,000 |
| Budget estimate, 2013 | 107,600,000 |
| Committee recommendation | 102,283,000 |

The Committee recommends \$102,283,000, the same as the comparable fiscal year 2012 funding level, for OIG. The budget request is \$107,600,000. The recommendation includes \$73,396,000 funded from the OASI and DI trust funds for those programs' share of inspector general expenses and \$28,887,000 funded from general revenues for the SSI program's share of expenses.

TITLE V—GENERAL PROVISIONS

Section 501. The bill continues a provision authorizing transfers of unexpended balances.

Section 502. The bill continues a provision limiting funding to 1-year availability unless otherwise specified.

Section 503. The bill modifies a provision limiting lobbying and related activities.

Section 504. The bill continues a provision limiting official representation expenses.

Section 505. The bill continues a provision clarifying Federal funding as a component of State and local grant funds.

Sections 506 and 507. The bill continues provisions limiting the use of funds for abortion.

Section 508. The bill continues a provision restricting human embryo research.

Section 509. The bill continues a provision limiting the use of funds for promotion of legalization of controlled substances.

Section 510. The bill continues a provision prohibiting the use of funds to promulgate regulations regarding the individual health identifier.

Section 511. The bill continues a provision limiting the use of funds to enter into or review contracts with entities subject to the requirement in section 4212(d) of title 38, United States Code, if the report required by that section has not been submitted.

Section 512. The bill continues a provision prohibiting the transfer of funds made available in this act to any department, agency, or instrumentality of the U.S. Government, except as otherwise provided by this or any other act.

Section 513. The bill continues a provision prohibiting Federal funding in this act for libraries unless they are in compliance with the Children's Internet Protection Act.

Section 514. The bill continues a provision maintaining a procedure for reprogramming of funds.

Section 515. The bill continues a provision prohibiting candidates for scientific advisory committees from having to disclose their political activities.

Section 516. The bill continues a provision requiring each department and related agency to submit an operating plan.

Section 517. The bill continues a provision requiring the Secretaries of Labor, Health and Human Services, and Education to submit a report on the number and amounts of contracts, grants, and cooperative agreements awarded by the Departments on a non-competitive basis.

Section 518. The bill continues a provision prohibiting the use of funds for a grant or contract exceeding \$5,000,000 unless the prospective contractor or grantee makes certain certifications regarding Federal tax liability.

Section 519. The bill modifies a provision rescinding funds from the State Children's Health Insurance Program performance bonus fund.

Section 520. The bill modifies a provision regarding funding for programs that carry out distribution of sterile needles or syringes.

Section 521. The bill continues a provision requiring each department and SSA to provide quarterly reports on the status of balances of appropriations.

Section 522. The bill adds a new provision authorizing the transfer of the Health Education Assistance Loan program from the Department of Health and Human Services to the Department of Education.

Section 523. The bill adds a new provision establishing Performance Partnership Pilots related to discretionary funds available in this act.

Section 524. The bill adds a new provision requiring departments, agencies, boards, and commissions funded in this act to submit quarterly reports regarding conferences.

Section 525. The bill adds a new provision limiting the attendance of Federal employees at any single international conference.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE
STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee reports on general appropriations bills identify each Committee amendment to the House bill “which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session.”

The Committee is filing an original bill, which is not covered under this rule, but reports this information in the spirit of full disclosure.

The Committee recommends funding for the following programs and activities which currently lack authorization: Elementary and Secondary Education Act; National Center for Special Education Research; parts C and D of the Individuals with Disabilities Education Act; Education Sciences Reform Act; Special Olympics Sport and Empowerment Act of 2004; Workforce Investment Act; Homeless Veterans Reintegration Program; Universal Newborn Hearing Screening; Organ Transplantation; Family Planning; Rural Health programs; Traumatic Brain Injury programs; Combating Autism Act; Public Health Improvement Act; Healthy Start; Telehealth; Health Professions Education Partnership Act; Children’s Health Act; Women’s Health Research and Prevention Amendments of 1998; Birth Defects Prevention, Preventive Health Amendments of 1993; Substance Abuse and Mental Health Services programs, except for Depression Centers of Excellence and grants for Primary and Behavioral Healthcare Integration; Low Income Home Energy Assistance Program; Refugee and Entrant Assistance programs; Adoption Opportunities; Child Welfare Services and Research; Child Care and Development Block Grant; Developmental Disabilities programs; Voting Access for Individuals with Disabilities; Native American Programs; Community Services Block Grant; Rural Facilities; Individual Development Accounts; Community Economic Development; Alzheimer’s Disease Demonstration Grants; Adolescent Family Life; Office of Disease Prevention and Health Promotion; Rehabilitation Services and Disability Research, except sections 4, 5, and 6 of the Assistive Technology Program; Institute of Education Sciences; Corporation for Public Broadcasting; Museum and Library Services Act programs; National Council on Disability; and Older Americans Act.

COMPLIANCE WITH PARAGRAPH 7(c), RULE XXVI OF THE
STANDING RULES OF THE SENATE

Pursuant to paragraph 7(c) of rule XXVI, on June 14, 2012, the Committee ordered favorably reported favorably an original bill (S. 3301) making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the

fiscal year ending September 30, 2013, subject to amendment and subject to its spending allocations, by a recorded vote of 16–14, a quorum being present. The vote was as follows:

| Yeas | Nays |
|------------------|------------------|
| Chairman Inouye | Mr. Cochran |
| Mr. Leahy | Mr. McConnell |
| Mr. Harkin | Mr. Shelby |
| Ms. Mikulski | Mrs. Hutchison |
| Mr. Kohl | Mr. Alexander |
| Mrs. Murray | Ms. Collins |
| Mrs. Feinstein | Ms. Murkowski |
| Mr. Durbin | Mr. Graham |
| Mr. Johnson (SD) | Mr. Kirk |
| Ms. Landrieu | Mr. Coats |
| Mr. Reed | Mr. Blunt |
| Mr. Lautenberg | Mr. Moran |
| Mr. Nelson | Mr. Hoeven |
| Mr. Pryor | Mr. Johnson (WI) |
| Mr. Tester | |
| Mr. Brown | |

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE
STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or a joint resolution repealing or amending any statute include “(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee.”

In compliance with this rule, changes in existing law proposed to be made by the bill are shown as follows: existing law to be omitted is enclosed in black brackets; new matter is printed in italic; and existing law in which no change is proposed is shown in roman.

TITLE 20—EDUCATION

**CHAPTER 28—HIGHER EDUCATION RESOURCES AND
STUDENT ASSISTANCE**

SUBCHAPTER I—GENERAL PROVISIONS

PART A—DEFINITIONS

§ 1011m. Certification regarding the use of certain Federal funds and restrictions on sources of funds for recruiting and marketing activities

(a) Prohibition

* * * * *

(d) Certification

Each institution of higher education or other postsecondary educational institution receiving Federal funding under the Higher Education Act of 1965 (20 U.S.C. 1001 et seq.) [and 42 U.S.C. 2751 et seq.], as a condition for receiving such funding, shall annually certify to the Secretary of Education that the requirements of [subsections (a) through (c)] *subsections (a), (b), (c), and (e)* have been met.

(e) RESTRICTIONS ON SOURCES OF FUNDS FOR RECRUITING AND MARKETING ACTIVITIES.—

(1) IN GENERAL.—An institution of higher education, or other postsecondary educational institution, may not use revenues derived from Federal educational assistance funds for recruiting or marketing activities described in paragraph (2).

(2) COVERED ACTIVITIES.—Except as provided in paragraph (3), the recruiting and marketing activities subject to paragraph (1) shall include the following:

(A) Advertising and promotion activities, including paid announcements in newspapers, magazines, radio, television, billboards, electronic media, naming rights, or any other public medium of communication, including paying for displays or promotions at job fairs, military installations, or college recruiting events.

(B) Efforts to identify and attract prospective students, either directly or through a contractor or other third party, including contact concerning a prospective student's potential enrollment or application for grant, loan, or work assistance under title IV of the Higher Education Act of 1965 (20 U.S.C. 1070 et seq.) or participation in preadmission or advising activities, including—

(i) paying employees responsible for overseeing enrollment and for contacting potential students in-person, by phone, by email, or by other internet communications regarding enrollment; and

(ii) soliciting an individual to provide contact information to an institution of higher education, including websites established for such purpose and funds paid to third parties for such purpose.

(C) Such other activities as the Secretary of Education may prescribe, including paying for promotion or sponsorship of education or military-related associations.

(3) EXCEPTIONS.—Any activity that is required as a condition of receipt of funds by an institution under title IV of the Higher Education Act of 1965 (20 U.S.C. 1070 et seq.), is specifically authorized under such title, or is otherwise specified by the Secretary of Education, shall not be considered to be a covered activity under paragraph (2).

(4) FEDERAL EDUCATIONAL ASSISTANCE FUNDS.—In this subsection, the term “Federal educational assistance funds” means any Federal financial assistance provided under any Federal law, through a grant, contract, subsidy, loan, guarantee, insurance or other means, including Federal financial assistance that is disbursed or delivered to an institution on behalf of a student or to a student to be used to attend the institution.

(5) *RULE OF CONSTRUCTION.*—Nothing in this section shall be construed as a limitation on the use by an institution of revenues derived from sources other than Federal educational assistance funds.

(6) *REPORTING.*—Each institution of higher education, or other postsecondary educational institution, that receives revenues derived from Federal educational assistance funds shall report annually to the Secretary of Education and to Congress the institution’s expenditures on advertising, marketing, and recruiting.

[(e)] (f) Actions to implement and enforce

The Secretary of Education shall take such actions as are necessary to ensure that the provisions of this section are implemented and enforced.

* * * * *

SUBCHAPTER IV—STUDENT ASSISTANCE

PART A—GRANTS TO STUDENTS IN ATTENDANCE AT INSTITUTIONS OF HIGHER EDUCATION

SUBPART 1—FEDERAL PELL GRANTS

§ 1070a. Federal Pell Grants: amount and determinations; applications

(a) Program authority and method of distribution

* * * * *

(b) Purpose and amount of grants

(1) * * *

* * * * *

(7) ADDITIONAL FUNDS.—

(A) IN GENERAL.— * * *

(i) * * *

* * * * *

[(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) \$1,574,000,000 for fiscal year 2017;**
- [(VIII) \$1,382,000,000 for fiscal year 2018;**
- [(IX) \$1,409,000,000 for fiscal year 2019;**
- [(X) \$1,430,000,000 for fiscal year 2020; and**
- [(XI) \$1,145,000,000 for fiscal year 2021 and each succeeding fiscal year.]**

(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) \$10,683,000,000 for fiscal year 2013;**

- (IV) \$1,009,000,000 for fiscal year 2014;
- (V) \$0 for fiscal year 2015;
- (VI) \$0 for fiscal year 2016;
- (VII) \$1,574,000,000 for fiscal year 2017;
- (VIII) \$1,595,000,000 for fiscal year 2018;
- (IX) \$1,622,000,000 for fiscal year 2019;
- (X) \$1,643,000,000 for fiscal year 2020;
- (XI) \$1,358,000,000 for fiscal year 2021 and each succeeding fiscal year.

* * * * *

PART B—FEDERAL FAMILY EDUCATION LOAN PROGRAM

§ 1078–6. Default reduction program

(a) Other repayment incentives

(1) Sale or assignment of loan

(A) In general

Each guaranty agency, upon securing 9 payments made within 20 days of the due date during 10 consecutive months of amounts owed on a loan for which the Secretary has made a payment under paragraph (1) of section 1078(c) of this title, shall—

(i) * * *

[(ii) on or before September 30, 2011, assign the loan to the Secretary if—]

(ii) on or after October 1, 2012, assign the loan to the Secretary if the guaranty agency has been unable to sell the loan under clause (i).

* * * * *

(D) Duties upon sale

With respect to a loan sold under subparagraph (A)(i)—

[(i) the guaranty agency—

[(I) shall repay the Secretary 81.5 percent of the amount of the principal balance outstanding at the time of such sale, multiplied by the reinsurance percentage in effect when payment under the guaranty agreement was made with respect to the loan; and]

(i) the guaranty agency—

(I) shall, in the case of a sale made on or after October 1, 2012, repay the Secretary 100 percent of the amount of the principal balance outstanding at the time of such sale, multiplied by the reinsurance percentage in effect when payment under the guaranty agreement was made with respect to the loan; and

(II) may, in the case of a sale made on or after October 1, 2012, in order to defray collection costs—

(aa) charge to the borrower an amount not to exceed 16 percent of the outstanding prin-

*cipal and interest at the time of the loan sale;
and*

*(bb) retain such amount from the proceeds
of the loan sale; and*

* * * * *

PART C—WILLIAM D. FORD FEDERAL DIRECT LOAN PROGRAM

§ 1087e. Terms and conditions of loans

(a) In general

* * * * *

(p) Disclosures

Each institution of higher education with which the Secretary has an agreement under section 1087c of this title, and each contractor with which the Secretary has a contract under section 1087f of this title, shall, with respect to loans under this part and in accordance with such regulations as the Secretary shall prescribe, comply with each of the requirements under section 1083 of this title that apply to a lender with respect to a loan under part B.

(q) ELIGIBILITY FOR, AND INTEREST CHARGES ON, FEDERAL DIRECT STAFFORD LOANS FOR NEW BORROWERS ON OR AFTER JULY 1, 2013.—

(1) IN GENERAL.—Notwithstanding subsection (a) or any other provision of this title, any borrower who was a new borrower on or after July 1, 2013, shall not be eligible for a Federal Direct Stafford Loan if the period of time for which the borrower has received Federal Direct Stafford loans, in the aggregate, exceeds the period of enrollment described in paragraph (3). Such borrower may still receive any Federal Direct Unsubsidized Stafford Loan for which such borrower is otherwise eligible.

(2) PAYMENT OF INTEREST ON FEDERAL DIRECT STAFFORD LOANS.—Notwithstanding subsection (f)(1)(A) or any other provision of this title and beginning on the date upon which a borrower who is in school becomes ineligible for a Federal Direct Stafford Loan as a result of paragraph (1), interest on all Federal Direct Stafford Loans that were disbursed to such borrower on or after July 1, 2013, shall accrue. Such interest shall be paid or capitalized in the same manner as interest on a Federal Direct Unsubsidized Stafford Loan is paid or capitalized under section 428H(e)(2).

(3) PERIOD OF ENROLLMENT.—

(A) IN GENERAL.—The aggregate period of enrollment referred to in paragraph (1) shall not exceed the lesser of—

(i) a period equal to 150 percent of the published length of the educational program in which the student is enrolled; or

(ii) in the case of a borrower who was previously enrolled in one or more other educational programs that began after July 1, 2013, a period of time equal to the difference between—

(I) 150 percent of the published length of the longest educational program in which the borrower was, or is, enrolled; and

(II) any periods of enrollment in which the borrower received a Federal Direct Stafford Loan.

(B) *LESS THAN FULL-TIME BASIS.*—The Secretary shall specify in regulation how the aggregate period described in subparagraph (A) shall be calculated with respect to a borrower who was or is enrolled on a less than full-time basis.

* * * * *

§ 1087f. Contracts

(a) Contracts for supplies and services

(1) In general

* * * * *

(4) Servicing by eligible not-for-profit servicers

(A) Servicing contracts

(i) In general

The Secretary shall contract with each eligible not-for-profit servicer to service loans originated under this part, if the servicer—”

* * * * *

(B) Allocations

(i) In general

The Secretary shall (except as provided in clause (ii)) allocate to an eligible not-for-profit servicer, subject to the contract of such servicer described in subparagraph (A), the servicing rights for the loan accounts of 100,000 borrowers (including borrowers who borrowed loans in a prior year that were serviced by the servicer).

(ii) Servicer allocation

The Secretary may reallocate, increase, reduce, or terminate an eligible not-for-profit servicer’s allocation of servicing rights under clause (i) based on the performance of such servicer, on the same terms as loan allocations provided by contracts awarded pursuant to paragraph (1).

(5) *SPECIAL RULE FOR NOT-FOR-PROFIT SERVICERS WITH AFFILIATES.*—Notwithstanding any other provision of this section, only an eligible not-for-profit servicer described in clause (i) or (ii) of subsection (c)(1)(B) shall receive a contract with the Secretary under paragraph (4)(A), and an allocation under paragraph (4)(B), except that, if an eligible not-for-profit servicer so described is also a corporation described in subparagraphs (A) and (B) of section 150(d)(2) of the Internal Revenue Code of 1986, then the affiliated entity of that servicer (described in subsection (c)(1)(B)(ii)) shall receive the contract with the Secretary under paragraph (4)(A), and an allocation under para-

graph (4)(B), rather than the eligible not-for-profit servicer described in clause (i) or (ii) of subsection (c)(1)(B).

(6) *SPECIAL RULE FOR NOT-FOR-PROFIT SERVICERS WITH SHARED MANAGEMENT OR COMMON CONTROL.—Notwithstanding any other provision of this section, in the case of entities that otherwise meet the definition of an eligible not-for-profit servicer under this section but 2 or more of the same individuals serve as part of the management, board of directors, or other governing body of more than one such entity, or the Secretary determines that one entity controls, is controlled by, or is under common control with, another such entity, all such entities with that shared management or control shall receive one aggregate allocation under paragraph (4)(B) and be treated for purposes of paragraph (4) as though all of such entities were a single eligible not-for-profit servicer.*

* * * * *

PART E—NEED ANALYSIS

§ 1087U. Cost of attendance

For the purpose of this subchapter and part C of subchapter I of chapter 34 of title 42, the term “cost of attendance” means—

(1) * * *

* * * * *

(3) *except as provided in paragraph (10)(A)(i), an allowance (as determined by the institution) for room and board costs incurred by the student which—*

* * * * *

[(10) for a student receiving all or part of the student’s instruction by means of telecommunications technology, no distinction shall be made with respect to the mode of instruction in determining costs;]

(10)(A) *with respect to the determination of a student’s need for a Federal Pell Grant, in the case of a student who is receiving—*

(i) *all instruction (excluding limited periods in which the student is required to be physically present at the institution for noninstructional purposes, such as orientation or the administration of examinations) by means of telecommunications technology, only tuition and fees, books and supplies; or*

(ii) *part of the student’s instruction by means of telecommunications technology, no distinction shall be made with respect to the mode of instruction in determining costs; and*

(B) *with respect to the determination of a student’s need for assistance under this title other than a Federal Pell Grant, in the case of a student who is receiving all or part of the student’s instruction by means of telecommunications technology, no distinction shall be made with respect to the mode of instruction in determining costs;*

* * * * *

PART F—GENERAL PROVISIONS RELATING TO STUDENT ASSISTANCE
PROGRAMS

§ 1091. Student eligibility

(a) * * *

* * * * *

[(d) Students who are not high school graduates

[In order for a student who does not have a certificate of graduation from a school providing secondary education, or the recognized equivalent of such certificate, to be eligible for any assistance under subparts 1, 3, and 4 of part A and parts B, C, and D of this subchapter and part C of subchapter I of chapter 34 of title 42, the student shall have completed a secondary school education in a home school setting that is treated as a home school or private school under State law.]

(d) STUDENTS WHO ARE NOT HIGH SCHOOL GRADUATES.—

(1) STUDENT ELIGIBILITY.—In order for a student who does not have a certificate of graduation from a school providing secondary education, or the recognized equivalent of such certificate, to be eligible for any assistance under subparts 1, 3, and 4 of part A and parts B, C, D, and E of this title, the student shall meet the requirements of one of the following subparagraphs:

(A) The student is enrolled in an eligible career pathway program and meets one of the following standards:

(i) The student shall take an independently administered examination and shall achieve a score, specified by the Secretary, demonstrating that such student can benefit from the education or training being offered. Such examination shall be approved by the Secretary on the basis of compliance with such standards for development, administration, and scoring as the Secretary may prescribe in regulations.

(ii) The student shall be determined as having the ability to benefit from the education or training in accordance with such process as the State shall prescribe. Any such process described or approved by a State for the purposes of this section shall be effective 6 months after the date of submission to the Secretary unless the Secretary disapproves such process. In determining whether to approve or disapprove such process, the Secretary shall take into account the effectiveness of such process in enabling students without high school diplomas or the equivalent thereof to benefit from the instruction offered by institutions utilizing such process, and shall also take into account the cultural diversity, economic circumstances, and educational preparation of the populations served by the institutions.

(iii) The student shall be determined by the institution of higher education as having the ability to benefit from the education or training offered by the institution of higher education upon satisfactory completion of 6 credit hours or the equivalent coursework that are

applicable toward a degree or certificate offered by the institution of higher education.

(B) The student has completed a secondary school education in a home school setting that is treated as a home school or private school under State law.

(2) ELIGIBLE CAREER PATHWAY PROGRAM.—In this subsection, the term “eligible career pathway program” means a program that—

(A) concurrently enrolls participants in connected adult education and eligible postsecondary programs;

(B) provides counseling and supportive services to identify and attain academic and career goals;

(C) provides structured course sequences that—

(i) are articulated and contextualized; and

(ii) allow students to advance to higher levels of education and employment;

(D) provides opportunities for acceleration to attain recognized postsecondary credentials, including degrees, industry relevant certifications, and certificates of completion of apprenticeship programs;

(E) is organized to meet the needs of adults;

(F) is aligned with the education and skill needs of the regional economy; and

(G) has been developed and implemented in collaboration with partners in business, workforce development, and economic development.

* * * * *

CHAPTER 44—CAREER AND TECHNICAL EDUCATION

SUBCHAPTER I—CAREER AND TECHNICAL EDUCATION ASSISTANCE TO THE STATES

PART A—ALLOTMENT AND ALLOCATION

§ 2324. National activities

(a) Program performance information

* * * * *

(b) Miscellaneous provisions

(1) Collection of information at reasonable cost

The Secretary shall take such action as may be necessary to secure at reasonable cost the information required by this subchapter. To ensure reasonable cost, the Secretary, in consultation with the National Center for Education Statistics, the [Office of Vocational and Adult Education] *Office of Career, Technical, and Adult Education*, and an entity assisted under section 2328 of this title (if applicable), shall determine the methodology to be used and the frequency with which information is to be collected.

* * * * *

CHAPTER 48—DEPARTMENT OF EDUCATION

SUBCHAPTER II—ESTABLISHMENT OF THE DEPARTMENT

§ 3412. Principal officers

(a) Deputy Secretary of Education

* * * * *

(b) Assistant Secretaries and General Counsel

(1) There shall be in the Department—

(A) * * *

* * * * *

(C) an **[Assistant Secretary for Vocational and Adult Education]** *Assistant Secretary for Career, Technical, and Adult Education*;

* * * * *

(h) **Coordination of literacy related functions by [Assistant Secretary for Vocational and Adult Education] Assistant Secretary for Career, Technical, and Adult Education**

The **[Assistant Secretary for Vocational and Adult Education]** *Assistant Secretary for Career, Technical, and Adult Education*, in addition to performing such functions as the Secretary may prescribe, shall have responsibility for coordination of all literacy related programs and policy initiatives in the Department. The **[Assistant Secretary for Vocational and Adult Education]** *Assistant Secretary for Career, Technical, and Adult Education* shall assist in coordinating the related activities and programs of other Federal departments and agencies.

* * * * *

§ 3416. **[Office of Vocational and Adult Education] Office of Career, Technical, and Adult Education**

There shall be in the Department an **[Office of Vocational and Adult Education]** *Office of Career, Technical, and Adult Education*, to be administered by the **[Assistant Secretary for Vocational and Adult Education]** *Assistant Secretary for Career, Technical, and Adult Education* appointed under section 3412(b) of this title. The Assistant Secretary shall administer such functions affecting **[vocational and adult education]** *career, technical, and adult education* as the Secretary shall delegate, and shall serve as principal adviser to the Secretary on matters affecting **[vocational and adult education]** *career, technical, and adult education*. The Secretary, through the Assistant Secretary, shall also provide a unified approach to rural education and rural family education through the coordination of programs within the Department and shall work with the Federal Interagency Committee on Education to coordinate related activities and programs of other Federal departments and agencies.

TITLE 40—PUBLIC BUILDINGS, PROPERTY, AND WORKS

PART A—GENERAL

CHAPTER 31—GENERAL

SUBCHAPTER IV—WAGE RATE REQUIREMENTS

§ 3144. Authority [of Comptroller General] to pay wages and list contractors violating contracts

(a) PAYMENT OF WAGES.—

(1) IN GENERAL.—[The Comptroller General] *The Secretary of Labor* shall pay directly to laborers and mechanics from any accrued payments withheld under the terms of a contract any wages found to be due laborers and mechanics under this subchapter.

* * * * *

CHAPTER 37—CONTRACT WORK HOURS AND SAFETY STANDARDS

§ 3703. Report of violations and withholding of amounts for unpaid wages and liquidated damages

(a) REPORTS OF INSPECTORS.— * * *

* * * * *

(b) WITHHOLDING AMOUNTS.—

(1) DETERMINING AMOUNT.— * * *

* * * * *

(3) PAYMENT.—[The Comptroller General] *The Secretary of Labor* shall pay the amount administratively determined to be due directly to the laborers and mechanics from amounts withheld on account of underpayments of wages if the amount withheld is adequate. If the amount withheld is not adequate, [the Comptroller General] *the Secretary of Labor* shall pay an equitable proportion of the amount due.

TITLE 42—THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A—PUBLIC HEALTH SERVICE

SUBCHAPTER V—HEALTH PROFESSIONS EDUCATION

PART A—STUDENT LOANS

SUBPART I—INSURED HEALTH EDUCATION ASSISTANCE LOANS TO GRADUATE STUDENTS

§ 2920. Definitions

For purposes of this subpart:

(1) The term “eligible institution” means, with respect to a fiscal year, a school of medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, allied health, or chiropractic, or a graduate program in

health administration or behavioral and mental health practice, including clinical psychology.

* * * * *

(5)(A) The term “default rate”, in the case of an eligible entity, means the percentage constituted by the ratio of—

(i) the principal amount of loans insured under this subpart—

(I) that are made with respect to the entity and that enter repayment status after April 7, 1987; and

(II) for which amounts have been paid under section 292f(a) of this title to insurance beneficiaries, exclusive of any loan for which amounts have been so paid as a result of the death or total and permanent disability of the borrower; exclusive of any loan for which the borrower begins payments to the Secretary on the loan pursuant to section 292f(b) of this title and maintains payments for 12 consecutive months in accordance with the agreement involved (with the loan subsequently being included or excluded, as the case may be, as amounts paid under section 292f(a) of this title according to whether further defaults occur and whether with respect to the default involved compliance with such requirement regarding 12 consecutive months occurs); and exclusive of any loan on which payments may not be recovered by reason of the obligation under the loan being discharged in bankruptcy under title 11; to

(ii) the total principal amount of loans insured under this subpart that are made with respect to the entity and that enter repayment status after April 7, 1987.

(B) For purposes of subparagraph (A), a loan insured under this subpart shall be considered to have entered repayment status if the applicable period described in subparagraph (B) of section 292d(a)(2) of this title regarding the loan has expired (without regard to whether any period described in subparagraph (C) of such section is applicable regarding the loan).

(C) For purposes of subparagraph (A), the term “eligible entity” means an eligible institution, an eligible lender, or a holder, as the case may be.

(D) For purposes of subparagraph (A), a loan is made with respect to an eligible entity if—

(i) in the case of an eligible institution, the loan was made to students of the institution;

(ii) in the case of an eligible lender, the loan was made by the lender; and

(iii) in the case of a holder, the loan was purchased by the holder.

(6) *The term “Secretary” means the Secretary of Education.*

TITLE 48—TERRITORIES AND INSULAR POSSESSIONS
**CHAPTER 18—MICRONESIA, MARSHALL ISLANDS, AND
 PALAU**

SUBCHAPTER I—MICRONESIA AND MARSHALL ISLANDS

PART B—APPROVAL AND IMPLEMENTATION OF COMPACTS, AS
 AMENDED

§ 1921d. Supplemental provisions

(a) Domestic program requirements

* * * * *

(f) Continuing programs and laws

**(1) Federated States of Micronesia and Republic of the
 Marshall Islands**

* * * * *

(A) Emergency and disaster assistance

* * * * *

(B) Treatment of additional programs

(i) Consultation

* * * * *

(ix) Applicability

The government, institutions, and people of Palau shall remain eligible for appropriations and to receive grants under the provisions of law specified in clauses (ii) and (iii) until the end of fiscal year **[2009]** 2013, to the extent the government, institutions, and people of Palau were so eligible under such provisions in fiscal year 2003.

**DEPARTMENT OF EDUCATION ORGANIZATION ACT,
 1980, PUBLIC LAW 96-88**

SECTION 1. This Act may be cited as the “Department of Education Organization Act”.

TABLE OF CONTENTS

TITLE II—ESTABLISHMENT OF THE DEPARTMENT

Sec. 201. Establishment.

* * * * *

[Sec. 206. Office of Vocational and Adult Education]

Sec. 206. Office of Career, Technical, and Adult Education

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC.
308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

| | Budget authority | | Outlays | |
|--|----------------------|----------------|----------------------|----------------------|
| | Committee allocation | Amount in bill | Committee allocation | Amount in bill |
| Comparison of amounts in the bill with Committee allocations to its subcommittees of amounts in the Budget Resolution for 2013: Subcommittee on Labor, Health and Human Services, Education, and Related Agencies: | | | | |
| Mandatory | 594,910 | 594,910 | 594,481 | ¹ 594,481 |
| Discretionary | 157,722 | 158,772 | 168,600 | ¹ 165,542 |
| Security | | | NA | NA |
| Nonsecurity | 157,722 | 158,772 | NA | NA |
| Projections of outlays associated with the recommendation: | | | | |
| 2013 | | | | ² 663,774 |
| 2014 | | | | 73,446 |
| 2015 | | | | 17,804 |
| 2016 | | | | 2,919 |
| 2017 and future years | | | | 642 |
| Financial assistance to State and local governments for | | | | |
| 2013 | NA | 323,132 | NA | 305,979 |

¹ Includes outlays from prior-year budget authority.

² Excludes outlays from prior-year budget authority.

NA: Not applicable.

NOTE.—Consistent with the funding recommended in the bill for continuing disability reviews and redeterminations and for healthcare fraud and abuse control and in accordance with subparagraphs (B) and (C) of section 251(b)(2) of the BBEDCA of 1985 and section 106 of the Deficit Control Act of 2011, the Committee anticipates that the Budget Committee will file a revised section 302(a) allocation for the Committee on Appropriations reflecting an upward adjustment of \$1,050,000,000 in budget authority plus associated outlays.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 2013
 [In thousands of dollars]

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| TITLE I—DEPARTMENT OF LABOR | | | | | |
| EMPLOYMENT AND TRAINING ADMINISTRATION | | | | | |
| TRAINING AND EMPLOYMENT SERVICES | | | | | |
| Grants to States: | | | | | |
| Adult Training, current year | 58,811 | 57,465 | 58,811 | | + 1,346 |
| Advance from prior year | (710,654) | (712,000) | (712,000) | (+ 1,346) | |
| Fiscal year 2014 | 712,000 | 712,000 | 712,000 | | |
| Subtotal | 770,811 | 769,465 | 770,811 | | + 1,346 |
| Youth Training | 824,353 | 824,353 | 824,353 | | |
| Dislocated Worker Assistance, current year | 148,151 | 146,526 | 148,151 | | + 1,625 |
| Advance from prior year | (858,375) | (860,000) | (860,000) | (+ 1,625) | |
| Fiscal year 2014 | 860,000 | 860,000 | 860,000 | | |
| Subtotal | 1,008,151 | 1,006,526 | 1,008,151 | | + 1,625 |
| Subtotal, Grants to States | 2,603,315 | 2,600,344 | 2,603,315 | | + 2,971 |
| Current Year | (1,031,315) | (1,028,344) | (1,031,315) | | (+ 2,971) |
| Fiscal year 2014 | (1,572,000) | (1,572,000) | (1,572,000) | | |
| Federally Administered Programs: | | | | | |
| Dislocated Worker Assistance National Reserve: | | | | | |
| Current year | 24,066 | 23,688 | 24,066 | | + 378 |
| Advance from prior year | (199,622) | (200,000) | (200,000) | (+ 378) | |
| Fiscal year 2014 | 200,000 | 200,000 | 200,000 | | |
| Subtotal | 224,066 | 223,688 | 224,066 | | + 378 |
| Subtotal, Dislocated Worker Assistance | 1,232,217 | 1,230,214 | 1,232,217 | | + 2,003 |

| | | | | | | | |
|---|-------------|-------------|-------------|-------|-------|--------------|--|
| Native Americans | 47,562 | 52,562 | 47,562 | ..... | ..... | - 5,000 | |
| Migrant and Seasonal Farmworker programs | 84,291 | 84,291 | 84,291 | ..... | ..... | + 996 | |
| Women in Apprenticeship | 996 | ..... | 996 | ..... | ..... | ..... |  |
| YouthBuild activities | 79,689 | 79,689 | 79,689 | ..... | ..... | - 50,094 | |
| Workforce Innovation Fund | 49,906 | 100,000 | 49,906 | ..... | ..... | ..... |  |
| Subtotal, Federally Administered Programs (FAP) | 486,510 | 540,230 | 486,510 | ..... | ..... | - 53,720 | |
| Current Year | (286,510) | (340,230) | (286,510) | ..... | ..... | ( - 53,720) | |
| Fiscal year 2014 | (200,000) | (200,000) | (200,000) | ..... | ..... | ..... |  |
| National Activities: | | | | | | | |
| Pilots, Demonstrations, and Research | 6,603 | ..... | ..... | ..... | ..... | - 6,603 | |
| Reintegration of Ex-Offenders | 80,238 | 85,238 | 80,238 | ..... | ..... | - 5,000 | |
| Evaluation | 9,563 | ..... | ..... | ..... | ..... | - 9,563 | |
| Workforce Data Quality Initiative | 6,463 | 6,000 | 6,000 | ..... | ..... | - 463 | |
| Subtotal | 102,867 | 91,238 | 86,238 | ..... | ..... | - 16,629 | |
| Total, Training and Employment Services (TES) | 3,192,692 | 3,231,812 | 3,176,063 | ..... | ..... | - 55,749 | |
| Current Year | (1,420,692) | (1,459,812) | (1,404,063) | ..... | ..... | ( - 16,629) | |
| Fiscal year 2014 | (1,772,000) | (1,772,000) | (1,772,000) | ..... | ..... | ..... |  |
| OFFICE OF JOB CORPS | | | | | | | |
| Administration | 29,077 | 29,132 | 29,132 | ..... | ..... | + 55 | |
| Operations | 1,569,078 | 1,545,872 | 1,569,078 | ..... | ..... | ..... |  |
| Advance from prior year | (589,883) | ..... | ..... | ..... | ..... | ( - 589,883) | |
| Construction, Rehabilitation and Acquisition | 104,792 | 75,000 | 75,000 | ..... | ..... | - 29,792 | |
| Advance from prior year | (99,811) | ..... | ..... | ..... | ..... | ( - 99,811) | |
| Total, Office of Job Corps | 1,702,947 | 1,650,004 | 1,673,210 | ..... | ..... | + 23,206 | |
| Current Year | (1,702,947) | (1,650,004) | (1,673,210) | ..... | ..... | ( + 23,206) | |
| COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS ¹ | 448,251 | ..... | 448,251 | ..... | ..... | + 448,251 | |
| FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES | 1,100,100 | 1,421,000 | 1,421,000 | ..... | ..... | ..... |  |
| STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS | | | | | | | |
| Unemployment Compensation (UI): | | | | | | | |
| State Operations | 3,209,172 | 3,004,912 | 3,004,912 | ..... | ..... | - 204,260 | |
| National Activities | 11,266 | 11,297 | 11,297 | ..... | ..... | + 31 | |
| Subtotal, Unemployment Compensation | 3,220,438 | 3,016,209 | 3,016,209 | ..... | ..... | - 204,229 | |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
[In thousands of dollars]

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Employment Service (ES): | | | | | |
| Allotments to States: | | | | | |
| Federal Funds | 22,595 | 22,638 | 22,638 | + 43 | |
| Trust Funds | 678,247 | 708,204 | 708,204 | + 29,957 | |
| Subtotal | 700,842 | 730,842 | 730,842 | + 30,000 | |
| ES National Activities | 20,912 | 20,952 | 20,952 | + 40 | |
| Subtotal, Employment Service | 721,754 | 751,794 | 751,794 | + 30,040 | |
| Federal Funds | (22,595) | (22,638) | (22,638) | (+ 43) | |
| Trust Funds | (699,159) | (729,156) | (729,156) | (+ 29,957) | |
| Foreign Labor Certification: | | | | | |
| Federal Administration | 50,323 | 50,418 | 50,418 | + 95 | |
| Grants to States | 15,070 | 15,099 | 15,099 | + 29 | |
| Subtotal, Foreign Labor Certification | 65,393 | 65,517 | 65,517 | + 124 | |
| One-Stop Career Centers/Labor Market Information | 63,473 | 115,720 | 63,473 | | - 52,247 |
| Total, State UI and ES | 4,071,058 | 3,949,240 | 3,896,993 | - 174,065 | - 52,247 |
| Federal Funds | (86,068) | (138,358) | (86,111) | (+ 43) | (- 52,247) |
| Trust Funds | (3,984,990) | (3,810,882) | (3,810,882) | (- 174,108) | |
| STATE PAID LEAVE FUND | | 5,000 | | | - 5,000 |
| ADVANCES TO THE UI AND OTHER TRUST FUNDS ² | 171,000 | | | - 171,000 | |
| PROGRAM ADMINISTRATION | | | | | |
| Adult Employment and Training | 46,677 | 47,015 | 46,677 | | - 338 |
| Trust Funds | 8,518 | 8,536 | 8,518 | | - 18 |
| Youth Employment and Training | 12,260 | 12,283 | 12,260 | | - 23 |
| Employment Security | 3,476 | 3,483 | 3,476 | | - 7 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
[In thousands of dollars]

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Trust Funds | (2,120) | (2,134) | (2,120) | | (-14) |
| SPECIAL BENEFITS | | | | | |
| Federal Employees' Compensation Benefits | 347,000 | 393,000 | 393,000 | +46,000 | |
| Longshore and Harbor Workers' Benefits | 3,000 | 3,000 | 3,000 | | |
| Total, Special Benefits | 350,000 | 396,000 | 396,000 | +46,000 | |
| SPECIAL BENEFITS FOR DISABLED COAL MINERS | | | | | |
| Benefit Payments | 177,000 | 158,000 | 158,000 | -19,000 | |
| Administration | 5,227 | 5,220 | 5,220 | -7 | |
| Subtotal, fiscal year 2014 program level | 182,227 | 163,220 | 163,220 | -19,007 | |
| Less funds advanced in prior year | -41,000 | -40,000 | -40,000 | +1,000 | |
| Total, Current Year, fiscal year 2014 | 141,227 | 123,220 | 123,220 | -18,007 | |
| New advances, 1st quarter fiscal year 2014 | 40,000 | 35,000 | 35,000 | -5,000 | |
| Total, Special Benefits for Disabled Coal Miners | 181,227 | 158,220 | 158,220 | -23,007 | |
| ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION FUND | | | | | |
| Part B Administrative Expenses | 52,147 | 54,962 | 54,962 | +2,815 | |
| BLACK LUNG DISABILITY TRUST FUND | | | | | |
| Benefit Payments and Interest on Advances | 242,609 | 250,043 | 250,043 | +7,434 | |
| Workers' Compensation Programs, Salaries and Expenses | 32,906 | 32,906 | 32,906 | | |
| Departmental Management, Salaries and Expenses | 25,217 | 25,217 | 25,217 | | |
| Departmental Management, Inspector General | 327 | 327 | 327 | | |
| Subtotal, Black Lung Disability | 301,059 | 308,493 | 308,493 | +7,434 | |

| | 356 | 356 | 356 | |
|---|-----------|-------------|-----------|------------|
| Treasury Department Administrative Costs | | | | |
| Total, Black Lung Disability Trust Fund | 301,415 | 308,849 | 308,849 | + 7,434 |
| Total, Federal Programs for Workers' Compensation | 1,002,629 | 1,040,221 | 1,035,871 | + 33,242 |
| Federal Funds | 1,000,509 | 1,038,087 | 1,033,751 | + 33,242 |
| Current year | (960,509) | (1,003,087) | (998,751) | (+ 38,242) |
| Fiscal year 2014 | (40,000) | (35,000) | (35,000) | (- 5,000) |
| Trust Funds | 2,120 | 2,134 | 2,120 | - 14 |
| OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION [OSHA] | | | | |
| SALARIES AND EXPENSES | | | | |
| Safety and Health Standards | 19,962 | 21,008 | 20,964 | + 1,002 |
| Federal Enforcement | 207,753 | 207,075 | 207,075 | - 678 |
| Whistleblower enforcement | 15,873 | 20,739 | 18,650 | + 2,777 |
| State Programs | 104,196 | 104,196 | 104,196 | |
| Technical Support | 25,820 | 24,880 | 24,880 | - 940 |
| Compliance Assistance: | | | | |
| Federal Assistance | 76,355 | 73,131 | 75,000 | - 1,355 |
| State Consultation Grants | 57,890 | 57,890 | 57,890 | |
| Training Grants | 10,709 | 10,709 | 11,000 | + 291 |
| Subtotal, Compliance Assistance | 144,954 | 141,730 | 143,890 | - 1,064 |
| Safety and Health Statistics | 34,739 | 34,313 | 34,313 | - 426 |
| Executive Direction and Administration | 11,491 | 11,527 | 11,500 | + 9 |
| Total, OSHA | 564,788 | 565,468 | 565,468 | + 680 |
| MINE SAFETY AND HEALTH ADMINISTRATION | | | | |
| SALARIES AND EXPENSES | | | | |
| Coal Enforcement | 164,500 | 167,859 | 167,859 | + 3,359 |
| Metal/Non-Metal Enforcement | 89,063 | 91,697 | 91,697 | + 2,634 |
| Standards Development | 4,764 | 5,416 | 5,416 | + 652 |
| Assessments | 7,103 | 6,732 | 7,000 | - 103 |
| Educational Policy and Development | 38,325 | 31,682 | 33,555 | - 4,770 |
| Technical Support | 33,613 | 33,791 | 33,555 | + 1,873 |
| Program Evaluation and Information Resources [PEIR] | 18,157 | 17,990 | 17,990 | - 167 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Program Administration | 16,998 | 16,729 | 18,962 | + 1,964 | + 2,233 |
| Total, Mine Safety and Health Administration | 372,523 | 371,896 | 376,270 | + 3,747 | + 4,374 |
| Total, Worker Protection Agencies | 1,611,841 | 1,628,623 | 1,626,937 | + 15,096 | - 1,686 |
| Federal Funds | (1,609,721) | (1,626,489) | (1,624,817) | (+ 15,096) | (- 1,672) |
| Trust Funds | (2,120) | (2,134) | (2,120) | ..... | (- 14) |
| BUREAU OF LABOR STATISTICS | | | | | |
| SALARIES AND EXPENSES | | | | | |
| Employment and Unemployment Statistics | 209,367 | 213,219 | 214,367 | + 5,000 | + 1,148 |
| Labor Market Information | 67,176 | 67,176 | 67,176 | ..... | ..... |
| Prices and Cost of Living | 205,888 | 211,084 | 210,860 | + 4,972 | - 224 |
| Compensation and Working Conditions | 80,391 | 81,545 | 80,391 | ..... | - 1,154 |
| Productivity and Technology | 12,013 | 10,205 | 12,013 | ..... | + 1,808 |
| Executive Direction and Staff Services | 34,236 | 34,978 | 34,236 | ..... | - 742 |
| Total, Bureau of Labor Statistics | 609,071 | 618,207 | 619,043 | + 972 | + 836 |
| Federal Funds | 541,895 | 551,031 | 551,867 | + 972 | + 836 |
| Trust Funds | 67,176 | 67,176 | 67,176 | ..... | ..... |
| OFFICE OF DISABILITY EMPLOYMENT POLICY | | | | | |
| SALARIES AND EXPENSES | 38,879 | 38,953 | 38,953 | + 74 | ..... |
| DEPARTMENTAL MANAGEMENT | | | | | |
| SALARIES AND EXPENSES | | | | | |
| Executive Direction | 32,722 | 32,722 | 32,722 | ..... | ..... |
| Departmental Program Evaluation | 24,360 | 9,000 | 9,000 | - 15,360 | ..... |
| Legal Services | 129,647 | 130,938 | 130,938 | + 1,291 | ..... |
| Trust Funds | 325 | 326 | 326 | + 1 | ..... |

| | | | | | |
|--|-----------|-----------|-----------|-----------|----------|
| International Labor Affairs | 92,309 | 94,984 | 94,984 | +2,675 | ..... |
| Administration and Management | 29,982 | 29,614 | 29,614 | -368 | ..... |
| Adjudication | 29,495 | 29,639 | 29,639 | +144 | ..... |
| Women's Bureau | 11,559 | 9,081 | 9,081 | -2,478 | ..... |
| Civil Rights Activities | 7,260 | 7,273 | 7,273 | +13 | ..... |
| Chief Financial Officer | 5,340 | 5,350 | 5,350 | +10 | ..... |
| Total, Salaries and expenses | 362,999 | 348,927 | 348,927 | -14,072 | ..... |
| Federal Funds | (362,674) | (348,601) | (348,601) | (-14,073) | ..... |
| Trust Funds | (325) | (326) | (326) | (+1) | ..... |
| VETERANS EMPLOYMENT AND TRAINING | | | | | |
| State Administration, Grants | 165,081 | 170,049 | 172,000 | +6,919 | +1,951 |
| Transition Assistance Program | 8,983 | 12,000 | 14,000 | +5,017 | +2,000 |
| Federal Administration | 35,155 | 35,222 | 35,222 | +67 | ..... |
| National Veterans Training Institute | 2,439 | 3,414 | 3,414 | +975 | ..... |
| Homeless Veterans Program | 38,185 | 38,185 | 38,185 | ..... | ..... |
| Veterans Workforce Investment Programs | 14,594 | ..... | ..... | -14,594 | ..... |
| Total, Veterans Employment and Training | 264,437 | 258,870 | 262,821 | -1,616 | +3,951 |
| Federal Funds | 52,779 | 38,185 | 38,185 | -14,594 | ..... |
| Trust Funds | 211,658 | 220,685 | 224,636 | +12,978 | +3,951 |
| INFRASTRUCTURE TECHNOLOGY MODERNIZATION | | | | | |
| Departmental support systems | 11,829 | 8,000 | 7,985 | -3,844 | -15 |
| Infrastructure technology modernization | 7,985 | 13,852 | 11,829 | +3,844 | -2,023 |
| Total, IT Modernization | 19,814 | 21,852 | 19,814 | ..... | -2,038 |
| OFFICE OF INSPECTOR GENERAL | | | | | |
| Program Activities | 77,790 | 79,199 | 77,790 | ..... | -1,409 |
| Trust Funds | 5,898 | 5,909 | 5,898 | ..... | -11 |
| Total, Office of Inspector General | 83,688 | 85,108 | 83,688 | ..... | -1,420 |
| Total, Departmental Management | | | | | |
| Federal Funds | 730,938 | 714,757 | 715,250 | -15,688 | +493 |
| Current Year | 513,057 | 487,837 | 484,390 | -28,667 | -3,447 |
| Trust Funds | (513,057) | (487,837) | (484,390) | (-28,667) | (-3,447) |
| Total | 217,881 | 226,920 | 230,860 | +12,979 | +3,940 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
 FOR FISCAL YEAR 2013—Continued
 (In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Total, Title I, Department of Labor | 14,708,647 | 14,323,238 | 14,680,812 | -27,835 | +357,574 |
| Federal Funds | 10,386,536 | 10,166,086 | 10,519,830 | +133,294 | +353,744 |
| Current Year | (8,574,536) | (8,359,086) | (8,712,830) | (+138,294) | (+353,744) |
| Fiscal Year 2014 | (1,812,000) | (1,807,000) | (1,807,000) | (-5,000) | |
| Trust Funds | 4,322,111 | 4,157,152 | 4,160,982 | -161,129 | +3,830 |
| TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES | | | | | |
| HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA) | | | | | |
| HEALTH RESOURCES AND SERVICES | | | | | |
| Primary Health Care | | | | | |
| Community Health Centers | 1,566,892 | 1,561,803 | 1,566,892 | | +5,089 |
| Free Clinics Medical Malpractice | 40 | 40 | 40 | | |
| National Hansen's Disease Program | 16,045 | 16,045 | 16,045 | | |
| Hansen's Disease Program Buildings and Facilities | 127 | 127 | 127 | | |
| Payment to Hawaii, Treatment of Hansen's | 1,960 | 1,960 | 1,960 | | |
| Subtotal, Primary Health Care | 1,585,064 | 1,579,975 | 1,585,064 | | +5,089 |
| Bureau of Health Professions (BHP) | | | | | |
| Health Workforce | | | | | |
| Health Professions, Training for Diversity: | | | | | |
| Centers of Excellence | 22,909 | 22,909 | 22,909 | | |
| Health Careers Opportunity Program | 14,822 | | | -14,822 | |
| Faculty Loan Repayment | 1,243 | 1,243 | 1,243 | | |
| Scholarships for Disadvantaged Students | 47,452 | 47,452 | 47,452 | | |
| Subtotal, Training for Diversity | 86,426 | 71,604 | 71,604 | -14,822 | |
| Training in Primary Care Medicine | 38,962 | 50,962 | 48,962 | +10,000 | -2,000 |
| Pediatric Loan Repayment | | 5,000 | | | -5,000 |

| | | | | | | |
|--|----------|----------|----------|----------|------------|------------|
| Oral Health Training | 32,392 | 32,392 | 32,392 | ..... | ..... | ..... |
| Interdisciplinary Community-Based Linkages: | | | | | | |
| Area Health Education Centers | 27,220 | 27,220 | 27,220 | ..... | ..... | + 27,220 |
| Geriatric Programs | 30,629 | 30,629 | 30,629 | ..... | ..... | ..... |
| Mental and Behavioral Health | 2,892 | 2,892 | 2,892 | ..... | ..... | ..... |
| Evaluation Tap Funding | (10,000) | (5,000) | (5,000) | ..... | (- 10,000) | (- 5,000) |
| Prevention and Public Health Fund ³ | | | | | | |
| Subtotal, Interdisciplinary Community Linkages | 60,741 | 33,521 | 60,741 | ..... | ..... | + 27,220 |
| Subtotal, Evaluation Tap Funding ..... | ..... | 5,000 | ..... | ..... | ..... | - 5,000 |
| Subtotal, Prevention and Public Health Fund ³ | 10,000 | ..... | ..... | ..... | - 10,000 | ..... |
| Total, Interdisciplinary Community Linkages | 70,741 | 38,521 | 60,741 | - 10,000 | ..... | + 22,220 |
| Workforce Information and Analysis | 2,782 | ..... | 7,782 | + 5,000 | ..... | + 7,782 |
| Evaluation Tap Funding ..... | ..... | (10,000) | ..... | ..... | ..... | (- 10,000) |
| Public Health and Preventive Medicine programs | 8,111 | 9,609 | 10,111 | + 2,000 | ..... | + 502 |
| Prevention and Public Health Fund ³ | (25,000) | (10,000) | (25,000) | ..... | ..... | (+ 15,000) |
| Subtotal | 33,111 | 19,609 | 35,111 | + 2,000 | ..... | + 15,502 |
| Nursing Programs: | | | | | | |
| Advanced Education Nursing | 63,925 | 63,925 | 63,925 | ..... | ..... | ..... |
| Evaluation Tap Funding ..... | ..... | (20,000) | ..... | ..... | ..... | (- 20,000) |
| Nurse Education, Practice, and Retention | 39,182 | 39,182 | 39,182 | ..... | ..... | ..... |
| Nursing Workforce Diversity | 15,819 | 15,819 | 15,819 | ..... | ..... | ..... |
| Loan Repayment and Scholarship Program | 83,135 | 83,135 | 83,135 | ..... | ..... | ..... |
| Comprehensive Geriatric Education | 4,485 | 4,485 | 4,485 | ..... | ..... | ..... |
| Nursing Faculty Loan Program | 24,553 | 24,553 | 24,553 | ..... | ..... | ..... |
| Subtotal, Nursing programs | 231,099 | 231,099 | 231,099 | ..... | ..... | ..... |
| Subtotal, Evaluation Tap Funding ..... | ..... | (20,000) | ..... | ..... | ..... | (- 20,000) |
| Children's Hospitals Graduate Medical Education | 265,171 | 88,000 | 265,171 | ..... | ..... | + 177,171 |
| National Practitioner Data Bank | 28,016 | 28,016 | 28,016 | ..... | ..... | ..... |
| User Fees | - 28,016 | - 28,016 | - 28,016 | ..... | ..... | ..... |
| Subtotal, Bureau of Health Professions | 725,684 | 522,187 | 727,862 | + 2,178 | ..... | + 205,675 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Subtotal, Evaluation Tap Funding | | (35,000) | | | (- 35,000) |
| Subtotal, Prevention and Public Health Fund | (35,000) | (10,000) | (25,000) | (- 10,000) | (+ 15,000) |
| Total, Health Professions Program Level | 760,684 | 567,187 | 752,862 | - 7,822 | + 185,675 |
| Maternal and Child Health | | | | | |
| Maternal and Child Health Block Grant | 638,646 | 640,098 | 640,098 | + 1,452 | |
| Sickle Cell Anemia Demonstration Program | 4,665 | 4,665 | 4,665 | | |
| Traumatic Brain Injury | 9,760 | 9,760 | 9,760 | | |
| Autism and Other Developmental Disorders | 47,142 | 47,142 | 47,142 | | |
| Heritable Disorders | 9,834 | 9,834 | 9,834 | | |
| Healthy Start | 103,532 | 103,532 | 103,532 | | |
| Universal Newborn Hearing | 18,660 | 18,660 | 18,660 | | |
| Emergency Medical Services for Children | 21,116 | 21,116 | 21,116 | | |
| Subtotal, Maternal and Child Health | 853,355 | 854,807 | 854,807 | + 1,452 | |
| Ryan White HIV/AIDS Program | | | | | |
| Ryan White AIDS Programs: | | | | | |
| Emergency Assistance | 666,071 | 671,258 | 666,071 | | - 5,187 |
| Comprehensive Care Programs | 1,360,827 | 1,422,341 | 1,390,827 | + 30,000 | - 31,514 |
| AIDS Drug Assistance Program [ADAP] (NA) | (933,299) | (1,000,000) | (963,299) | (+ 30,000) | (- 36,701) |
| Early Intervention Program | 215,086 | 235,564 | 215,086 | | - 20,478 |
| Children, Youth, Women, and Families | 77,167 | 69,582 | 77,167 | | + 7,585 |
| AIDS Dental Services | 13,485 | 13,485 | 13,485 | | |
| Education and Training Centers | 34,542 | 34,542 | 34,542 | | |
| Subtotal, Ryan White AIDS programs | 2,367,178 | 2,446,772 | 2,397,178 | + 30,000 | - 49,594 |
| Evaluation Tap Funding (NA) | (25,000) | (25,000) | (25,000) | | |

| | (2,392,178) | (2,471,772) | (2,422,178) | (+ 30,000) | (- 49,594) |
|--|-------------|-------------|-------------|------------|-------------|
| Subtotal, Ryan White AIDS program level | | | | | |
| Health Care Systems | | | | | |
| Organ Transplantation | 24,015 | 24,015 | 24,015 | | |
| National Cord Blood Inventory | 11,887 | 11,887 | 11,887 | | |
| Bone Marrow Program | 23,330 | 23,330 | 23,330 | | |
| Office of Pharmacy Affairs | 4,472 | 4,472 | 4,472 | | |
| 340B Drug Pricing User Fees | | 6,000 | 6,000 | + 6,000 | |
| User Fees | | - 6,000 | - 6,000 | - 6,000 | |
| Poison Control | 18,830 | 18,830 | 18,830 | | |
| Subtotal, Health Care Systems | 82,534 | 82,534 | 82,534 | | |
| Rural Health | | | | | |
| Rural Outreach Grants | 55,553 | 55,553 | 57,553 | + 2,000 | + 2,000 |
| Rural Health Research/Policy Development | 9,866 | 9,866 | 9,866 | | |
| Rural Hospital Flexibility Grants | 41,040 | 26,200 | 41,040 | | + 14,840 |
| Rural and Community Access to Emergency Devices | 1,100 | | 5,000 | + 3,900 | + 5,000 |
| State Offices of Rural Health | 10,036 | 10,036 | 10,036 | | |
| Black Lung Clinics | 7,140 | 7,140 | 7,140 | | |
| Radiation Exposure Screening and Education Program | 1,935 | 1,935 | 1,935 | | |
| Telehealth | 11,502 | 11,502 | 11,502 | | |
| Subtotal, Rural Health | 138,172 | 122,232 | 144,072 | + 5,900 | + 21,840 |
| Family Planning | 293,870 | 296,838 | 293,870 | | - 2,968 |
| Program Management | 159,894 | 162,517 | 162,517 | + 2,623 | |
| Total, Health resources & services program level | (6,265,751) | (6,137,862) | (6,297,904) | (+ 32,153) | (+ 160,042) |
| HEALTH EDUCATION ASSISTANCE LOANS PROGRAM ACCOUNT | | | | | |
| HEAL Liquidating Account | (1,000) | (1,000) | (1,000) | | |
| HEAL Program Management | 2,807 | 2,807 | 2,807 | | |
| Total, HEAL | 2,807 | 2,807 | 2,807 | | |
| VACCINE INJURY COMPENSATION PROGRAM TRUST FUND | | | | | |
| Post-fiscal year 1988 Claims | 235,000 | 235,000 | 235,000 | | |
| HRSA Administration | 6,477 | 6,477 | 6,477 | | |
| Total, Vaccine Injury Compensation Trust Fund | 241,477 | 241,477 | 241,477 | | |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued

(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | | |
|---|--------------------|-----------------|--------------------------|--|-----------------|--|
| | | | | 2012 appropriation | Budget estimate | |
| Total, Health Resources & Services Administration | 6,450,035 | 6,312,146 | 6,492,188 | + 42,153 | + 180,042 | |
| Total, Evaluation tap funding | (25,000) | (60,000) | (25,000) | ..... | (- 35,000) | |
| Prevention and Public Health Fund ³ | (35,000) | (10,000) | (25,000) | (- 10,000) | (+ 15,000) | |
| Total, HRSA program level | (6,510,035) | (6,382,146) | (6,542,188) | (+ 32,153) | (+ 160,042) | |
| CENTERS FOR DISEASE CONTROL AND PREVENTION | | | | | | |
| DISEASE CONTROL, RESEARCH, AND TRAINING | | | | | | |
| Immunization and Respiratory Diseases | 576,083 | 583,855 | 576,083 | ..... | - 7,772 | |
| Evaluation Tap Funding | (12,864) | (13,765) | (12,864) | ..... | (- 901) | |
| Pandemic Flu balances (Public Law 111-32) ..... | ..... | (51,049) | ..... | ..... | (- 51,049) | |
| Prevention and Public Health Fund ³ | (190,000) | (72,460) | (190,000) | ..... | (+ 117,540) | |
| Subtotal | (778,947) | (721,129) | (778,947) | ..... | (+ 57,818) | |
| HIV/AIDS, Viral Hepatitis, STD, and TB Prevention | 1,099,934 | 1,145,678 | 1,101,934 | + 2,000 | - 43,744 | |
| Prevention and Public Health Fund ³ | (10,000) | ..... | (10,000) | ..... | (+ 10,000) | |
| Subtotal, HIV/AIDS, Viral Hepatitis, STD & TB | 1,109,934 | 1,145,678 | 1,111,934 | + 2,000 | - 33,744 | |
| Emerging and Zoonotic Infectious Diseases | 252,476 | 279,477 | 269,274 | + 16,798 | - 10,203 | |
| Prevention and Public Health Fund ³ | (51,750) | (51,750) | (51,750) | ..... | ..... |  |
| Subtotal, Emerging and Zoonotic Infectious | 304,226 | 331,227 | 321,024 | + 16,798 | - 10,203 | |
| Chronic Disease Prevention and Health Promotion | 756,377 | 608,019 | 798,445 | + 42,068 | + 190,426 | |
| Evaluation Tap Funding ..... | ..... | (25,000) | ..... | ..... | (- 25,000) | |
| Prevention and Public Health Fund ³ | (427,050) | (511,711) | (457,050) | (+ 30,000) | (- 54,661) | |
| Subtotal, Chronic Disease Prevention | (1,183,427) | (1,144,730) | (1,255,495) | (+ 72,068) | (+ 110,765) | |
| Birth Defects and Developmental Disabilities | 137,287 | 18,476 | 134,500 | - 2,787 | + 116,024 | |

| | | | | | |
|--|-----------|-----------|-----------|-----------|------------|
| Prevention and Public Health Fund ³ | (107,089) | | | | (-107,089) |
| Subtotal, Birth Defects | (137,287) | (125,565) | (134,500) | (-2,787) | (+8,935) |
| Public Health Scientific Services | 143,972 | 35,695 | 143,972 | | +108,277 |
| Evaluation Tap Funding | (247,769) | (379,374) | (247,769) | | (-131,605) |
| Prevention and Public Health Fund ³ | (70,000) | (90,000) | (70,000) | | (-20,000) |
| Subtotal | (461,741) | (505,069) | (461,741) | | (-43,328) |
| Environmental Health | 104,998 | 103,672 | 114,667 | +9,669 | +10,995 |
| Prevention and Public Health Fund ³ | (35,000) | (29,000) | (35,000) | | (+6,000) |
| Subtotal | (139,998) | (132,672) | (149,667) | (+9,669) | (+16,995) |
| Injury Prevention and Control | 137,693 | 137,754 | 137,693 | | -61 |
| Prevention and Public Health Fund ³ | | | (3,000) | (+3,000) | (+3,000) |
| Subtotal | (137,693) | (137,754) | (140,693) | (+3,000) | (+2,939) |
| National Institute for Occupational Safety & Health ³ | 181,864 | | 181,864 | | +181,864 |
| Evaluation Tap Funding | (110,724) | (249,364) | (110,724) | | (-138,640) |
| Subtotal | (292,588) | (249,364) | (292,588) | | (+43,224) |
| Energy Employees Occupational Illness Compensation Program | 55,358 | 55,358 | 55,358 | | |
| Global Health | 347,594 | 362,889 | 362,594 | +15,000 | -295 |
| Public Health Preparedness and Response | 1,299,479 | 1,228,360 | 1,299,479 | | +71,119 |
| Pandemic Flu balances (Public Law 111-32) | (30,000) | (46,776) | | (-30,000) | (-46,776) |
| Subtotal | 1,329,479 | 1,275,136 | 1,299,479 | -30,000 | +24,343 |
| CDC-Wide Activities | 617,913 | 487,648 | 593,193 | -24,720 | +105,545 |
| Prevention and Public Health Fund ³ | (41,200) | (41,200) | (41,200) | | |
| Subtotal, CDC-Wide Activities | (659,113) | (528,848) | (634,393) | (-24,720) | (+105,545) |
| Total, Centers for Disease Control | 6,536,028 | 5,950,091 | 6,627,056 | +91,028 | +676,965 |
| Discretionary | 5,655,670 | 4,991,523 | 5,713,698 | +98,028 | +722,175 |
| Evaluation Tap Funding (NA) | (371,357) | (667,503) | (371,357) | | (-296,146) |
| Pandemic Flu balances (Public Law 111-32) | (30,000) | (97,825) | | (-30,000) | (-97,825) |
| Prevention and Public Health Fund ³ | (825,000) | (903,210) | (858,000) | (+33,000) | (-45,210) |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Total, Centers for Disease Control Program Level | (6,937,385) | (6,715,419) | (6,998,413) | (+ 61,028) | (+ 282,994) |
| NATIONAL INSTITUTES OF HEALTH | | | | | |
| National Cancer Institute | 5,067,396 | 5,068,864 | 5,084,227 | + 16,831 | + 15,363 |
| National Heart, Lung, and Blood Institute | 3,076,115 | 3,076,067 | 3,085,390 | + 9,275 | + 9,323 |
| National Institute of Dental & Craniofacial Research | 410,322 | 408,212 | 409,449 | - 873 | + 1,237 |
| National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK] | 1,795,348 | 1,792,107 | 1,791,539 | + 2,191 | + 5,432 |
| National Institute of Neurological Disorders & Stroke | 1,624,830 | 1,624,707 | 1,629,631 | + 4,801 | + 4,924 |
| National Institute of Allergy and Infectious Diseases | 4,486,473 | 4,495,307 | 4,508,932 | + 22,459 | + 13,625 |
| Global HIV/AIDS Fund Transfer ..... | ..... | ..... | ..... | ..... | ..... |
| Subtotal, NIAD program level | 4,486,473 | 4,495,307 | 4,508,932 | + 22,459 | + 13,625 |
| National Institute of General Medical Sciences | 2,427,742 | 2,378,835 | 2,387,112 | - 40,630 | + 8,277 |
| National Institute of Child Health & Human Development | 1,320,151 | 1,320,600 | 1,324,603 | + 4,452 | + 4,003 |
| National Eye Institute | 702,049 | 693,015 | 695,115 | - 6,934 | + 2,100 |
| National Institute of Environmental Health Sciences | 684,923 | 684,030 | 686,103 | + 1,180 | + 2,073 |
| National Institute on Aging | 1,121,400 | 1,102,650 | 1,124,265 | + 2,865 | + 21,615 |
| National Institute of Arthritis and Musculoskeletal and Skin Diseases | 535,280 | 535,610 | 537,233 | + 1,953 | + 1,623 |
| National Institute on Deafness and Other Communication Disorders | 415,880 | 417,297 | 418,562 | + 2,682 | + 1,265 |
| National Institute of Nursing Research | 144,633 | 144,153 | 144,590 | - 43 | + 437 |
| National Institute on Alcohol Abuse and Alcoholism | 459,085 | 457,104 | 458,489 | - 596 | + 1,385 |
| National Institute on Drug Abuse | 1,052,373 | 1,094,001 | 1,097,196 | + 4,823 | + 3,195 |
| National Institute of Mental Health | 1,478,868 | 1,479,204 | 1,483,687 | + 4,819 | + 4,483 |
| National Human Genome Research Institute | 512,727 | 511,370 | 512,920 | + 193 | + 1,550 |
| National Institute of Biomedical Imaging and Bioengineering | 338,038 | 336,896 | 337,917 | - 121 | + 1,021 |
| National Center for Complementary and Alternative Medicine | 127,937 | 128,318 | 128,318 | + 381 | + 388 |
| National Institute on Minority Health and Health Disparities | 276,179 | 279,389 | 280,236 | + 4,057 | + 847 |
| John E. Fogarty International Center | 69,556 | 69,758 | 69,969 | + 413 | + 211 |
| National Center for Advancing Translation Sciences | 574,823 | 639,033 | 631,346 | + 56,523 | - 7,687 |
| National Library of Medicine [NLM] | 337,322 | 372,651 | 373,781 | + 36,459 | + 1,130 |

| | | | | | | |
|--|--------------|--------------|--------------|--------------|--------------|-------|
| Evaluation Tap Funding | (8,200) | (8,200) | (8,200) | ..... | ..... | ..... |
| Subtotal | 345,522 | 380,851 | 381,981 | + 36,459 | + 1,130 | ..... |
| Office of the Director | 1,458,501 | 1,429,161 | 1,431,341 | - 27,160 | + 2,180 | ..... |
| Common fund | (544,930) | (544,930) | (544,930) | ..... | ..... | ..... |
| Buildings and Facilities | 125,308 | 125,308 | 125,308 | ..... | ..... | ..... |
| Total, National Institutes of Health (NIH) | 30,623,259 | 30,623,259 | 30,723,259 | + 100,000 | + 100,000 | ..... |
| Evaluation Tap Funding | (8,200) | (8,200) | (8,200) | ..... | ..... | ..... |
| Total, NIH Program Level | (30,631,459) | (30,631,459) | (30,731,459) | (+ 100,000) | (+ 100,000) | ..... |
| SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA) | | | | | | |
| SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES | | | | | | |
| Mental Health: | | | | | | |
| Programs of Regional and National Significance | 275,756 | 219,550 | 270,394 | - 5,362 | + 50,844 | ..... |
| Prevention and Public Health Fund ³ | (45,000) | (28,000) | (45,000) | ..... | ( + 17,000) | ..... |
| Subtotal, PRNS | (320,756) | (247,550) | (315,394) | (- 5,362) | (+ 67,844) | ..... |
| Mental Health block grant | 438,717 | 438,717 | 458,717 | + 20,000 | + 20,000 | ..... |
| Evaluation Tap Funding | (21,039) | (21,039) | (21,039) | ..... | ..... | ..... |
| Subtotal, MHBG Program level | (459,756) | (459,756) | (479,756) | (+ 20,000) | (+ 20,000) | ..... |
| Children's Mental Health | 117,315 | 88,557 | 117,315 | ..... | + 28,758 | ..... |
| Grants to States for the Homeless (PATH) | 64,794 | 64,794 | 64,794 | ..... | ..... | ..... |
| Protection and Advocacy | 36,238 | 36,238 | 36,238 | ..... | ..... | ..... |
| State prevention grants ..... | ..... | 55,000 | ..... | ..... | - 55,000 | ..... |
| Subtotal, Mental Health | 932,820 | 902,856 | 947,458 | + 14,638 | + 44,602 | ..... |
| Subtotal, Mental health program level | (998,859) | (951,895) | (1,013,497) | (+ 14,638) | (+ 61,602) | ..... |
| Substance Abuse Treatment: | | | | | | |
| Programs of Regional and National Significance | 398,242 | 334,139 | 368,813 | - 29,429 | + 34,674 | ..... |
| Prevention and Public Health Fund ³ | (25,000) | (30,000) | (25,000) | ..... | ( - 5,000) | ..... |
| Evaluation Tap Funding | (2,000) | ..... | (2,000) | ..... | ( + 2,000) | ..... |
| Subtotal, Program level | (425,242) | (364,139) | (395,813) | (- 29,429) | (+ 31,674) | ..... |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued

[In thousands of dollars]

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Substance Abuse block grant | 1,721,132 | 1,376,906 | 1,741,132 | + 20,000 | + 364,226 |
| Evaluation Tap Funding | (79,200) | (71,724) | (79,200) | | (+ 7,476) |
| Subtotal, Program level | (1,800,332) | (1,448,630) | (1,820,332) | (+ 20,000) | (+ 371,702) |
| Substance abuse prevention grants | | 404,501 | | | - 404,501 |
| Subtotal, Substance Abuse Treatment | 2,119,374 | 2,115,546 | 2,109,945 | - 9,429 | - 5,601 |
| Subtotal, Program level | (2,225,574) | (2,217,270) | (2,216,145) | (- 9,429) | (- 1,125) |
| Substance Abuse Prevention: Programs of Regional and National Significance | 185,956 | 58,877 | 184,433 | - 1,523 | + 125,556 |
| Prevention and Public Health Fund ³ | | (7,000) | | | (- 7,000) |
| Subtotal | 185,956 | 58,877 | 184,433 | - 1,523 | + 125,556 |
| Subtotal, Program Level | (185,956) | (65,877) | (184,433) | (- 1,523) | (+ 118,556) |
| Health Surveillance and Program Support: Program Management | 76,891 | 72,229 | 72,229 | - 4,662 | |
| Health Surveillance | 1,996 | 2,000 | 1,996 | | - 4 |
| Prevention and Public Health Fund ³ | (18,000) | | (18,000) | | (+ 18,000) |
| Evaluation Tap Funding | (27,428) | (45,428) | (27,428) | | (- 18,000) |
| Subtotal, Surveillance, Program level | (47,424) | (47,428) | (47,424) | | (- 4) |
| Military Families | 3,493 | | | - 3,493 | |
| Data Requests and Publications | | 1,500 | 1,500 | + 1,500 | |
| User Fees | | - 1,500 | - 1,500 | - 1,500 | |
| Public Awareness and Support | 13,545 | | 13,545 | | + 13,545 |
| Evaluation Tap Funding | | (13,571) | | | (- 13,571) |
| Performance and Quality Information Systems | 12,940 | | 12,940 | | + 12,940 |

| | | | | | |
|--|--------------|--------------|--------------|-------------|-------------|
| Evaluation Tap Funding | (12,996) | | | | (- 12,996) |
| Tribal Prevention Grants (PPHF) | (40,000) | | | | (- 40,000) |
| Total, Health Surveillance | 108,865 | 74,229 | 100,710 | - 8,155 | + 26,481 |
| Total, Health Surveillance Program Level | 154,293 | 186,224 | 146,138 | - 8,155 | - 40,086 |
| Total, SAMHSA | 3,347,015 | 3,151,508 | 3,342,546 | - 4,469 | + 191,038 |
| Evaluation Tap Funding | (129,667) | (164,758) | (129,667) | | (- 35,091) |
| Prevention and Public Health Fund ³ | (88,000) | (105,000) | (88,000) | | (- 17,000) |
| Total, SAMHSA Program Level | (3,564,682) | (3,421,266) | (3,560,213) | (- 4,469) | (+ 138,947) |
| AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ) | | | | | |
| HEALTHCARE RESEARCH AND QUALITY | | | | | |
| Research on Health Costs, Quality, and Outcomes: | | | | | |
| Evaluation Tap funding | (235,768) | (206,635) | (236,331) | (+ 563) | (+ 29,696) |
| Prevention and Public Health Fund ³ | (12,000) | (12,000) | (12,000) | | |
| Subtotal, Health Costs, Quality, and Outcomes | (247,768) | (218,635) | (248,331) | (+ 563) | (+ 29,696) |
| Medical Expenditures Panel Surveys: | | | | | |
| Evaluation Tap Funding (NA) | (59,300) | (59,300) | (59,300) | | |
| Subtotal, Medical Expenditures Panel Surveys | (59,300) | (59,300) | (59,300) | | |
| Program Support: | | | | | |
| Evaluation Tap Funding (NA) | (73,985) | (68,422) | (68,422) | (- 5,563) | |
| Subtotal | (73,985) | (68,422) | (68,422) | (- 5,563) | |
| Evaluation Tap Funding (NA) | (369,053) | (334,357) | (364,053) | (- 5,000) | (+ 29,696) |
| AHRQ, Prevention and Public Health Fund ³ | (12,000) | (12,000) | (12,000) | | |
| Total, AHRQ Program Level | (381,053) | (346,357) | (376,053) | (- 5,000) | (+ 29,696) |
| Total, Public Health Service (PHS) appropriation | 46,131,337 | 45,133,794 | 46,327,049 | + 195,712 | + 1,193,255 |
| Total, Public Health Service Program Level | (48,148,614) | (47,612,647) | (48,322,326) | (+ 173,712) | (+ 709,679) |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
[In thousands of dollars]

| Item | 2011 appropriation | | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|-----------------|--------------------------|--|-----------------|
| | 2011 appropriation | Budget estimate | | | 2012 appropriation | Budget estimate |
| CENTERS FOR MEDICARE AND MEDICAID SERVICES | | | | | | |
| GRANTS TO STATES FOR MEDICAID | | | | | | |
| Medicaid Current Law Benefits | 253,884,907 | 250,398,918 | 250,398,918 | 250,398,918 | - 3,485,989 | ..... |
| State and Local Administration | 12,808,496 | 14,735,346 | 14,735,346 | 14,735,346 | + 1,926,850 | ..... |
| Vaccines for Children | 4,030,996 | 4,271,015 | 4,271,015 | 4,271,015 | + 240,019 | ..... |
| Subtotal, Medicaid Program Level | 270,724,399 | 269,405,279 | 269,405,279 | 269,405,279 | - 1,319,120 | ..... |
| Less funds advanced in prior year | - 86,445,289 | - 90,614,082 | - 90,614,082 | - 90,614,082 | - 4,168,793 | ..... |
| Total, Grants to States for Medicaid | 184,279,110 | 178,791,197 | 178,791,197 | 178,791,197 | - 5,487,913 | ..... |
| New advance, 1st quarter | 90,614,082 | 106,335,631 | 106,335,631 | 106,335,631 | + 15,721,549 | ..... |
| PAYMENTS TO HEALTH CARE TRUST FUNDS | | | | | | |
| Supplemental Medical Insurance | 178,041,000 | 189,520,000 | 189,520,000 | 189,520,000 | + 11,479,000 | ..... |
| Federal Uninsured Payment | 262,000 | 228,000 | 228,000 | 228,000 | - 34,000 | ..... |
| Program Management | 222,000 | 192,000 | 192,000 | 192,000 | - 30,000 | ..... |
| General Revenue for Part D Benefit | 51,431,000 | 60,744,000 | 60,744,000 | 60,744,000 | + 9,313,000 | ..... |
| General Revenue for Part D Administration | 475,000 | 424,000 | 424,000 | 424,000 | - 51,000 | ..... |
| HC/FAC Reimbursement | 310,378 | 610,000 | 610,000 | 610,000 | + 299,622 | ..... |
| Total, Payments to Trust Funds, Program Level | 230,741,378 | 251,718,000 | 251,718,000 | 251,718,000 | + 20,976,622 | ..... |
| PROGRAM MANAGEMENT | | | | | | |
| Research, Demonstration, Evaluation | 21,160 | ..... | ..... | 23,900 | + 2,740 | + 23,900 |
| Program operations | 2,608,785 | 3,618,487 | 3,618,487 | 3,156,045 | + 547,260 | - 462,442 |
| State Survey and Certification | 375,203 | 387,353 | 387,353 | 375,203 | ..... | - 12,150 |
| High Risk Insurance Pools | 44,000 | 22,004 | 22,004 | 44,000 | ..... | + 21,996 |
| Federal Administration | 770,964 | 792,964 | 792,964 | 770,964 | ..... | - 22,000 |
| Total, Program management, Limitation on new BA | 3,820,112 | 4,820,808 | 4,820,808 | 4,370,112 | + 550,000 | - 450,696 |

| HEALTH CARE FRAUD AND ABUSE CONTROL | | | | | |
|--|---------------|---------------|---------------|---------------|----------------|
| Part D Drug Benefit/Medicare Advantage [MIP] | 219,463 | 362,792 | 362,792 | 362,792 | + 143,329 |
| HHS Office of Inspector General | 29,674 | 102,500 | 102,500 | 102,500 | + 72,826 |
| Medicaid/CHIP | 30,979 | 46,906 | 46,906 | 46,906 | + 15,927 |
| Department of Justice | 29,674 | 97,802 | 97,802 | 97,802 | + 68,128 |
| Total, Health Care Fraud and Abuse Control | 309,790 | 610,000 | 610,000 | 610,000 | + 300,210 |
| Total, Centers for Medicare and Medicaid Services | 509,764,472 | 542,275,636 | 541,824,940 | 541,824,940 | + 32,060,468 |
| Federal funds | 505,634,570 | 536,844,828 | 536,844,828 | 536,844,828 | + 31,210,258 |
| Current year | (415,020,488) | (430,509,197) | (430,509,197) | (430,509,197) | (+ 15,488,709) |
| New advance, fiscal year 2014 | (90,614,082) | (106,335,631) | (106,335,631) | (106,335,631) | (+ 15,721,549) |
| Trust Funds | 4,129,902 | 5,430,808 | 4,980,112 | 4,980,112 | + 850,210 |
| ADMINISTRATION FOR CHILDREN AND FAMILIES | | | | | |
| PAYMENTS TO STATES FOR CHILD SUPPORT ENFORCEMENT AND FAMILY SUPPORT PROGRAMS | | | | | |
| Payments to Territories | 33,000 | 33,000 | 33,000 | 33,000 | |
| Repatriation | 1,000 | 1,000 | 1,000 | 1,000 | |
| Subtotal, Welfare payments | 34,000 | 34,000 | 34,000 | 34,000 | |
| Child Support Enforcement: | | | | | |
| State and Local Administration | 3,484,514 | 3,272,647 | 3,272,647 | 3,272,647 | - 211,867 |
| Federal Incentive Payments | 519,000 | 539,838 | 539,838 | 539,838 | + 20,838 |
| Access and Visitation | 10,000 | 10,000 | 10,000 | 10,000 | |
| Subtotal, Child Support Enforcement | 4,013,514 | 3,822,485 | 3,822,485 | 3,822,485 | - 191,029 |
| Total, Family Support Payments Program Level | 4,047,514 | 3,856,485 | 3,856,485 | 3,856,485 | - 191,029 |
| Less funds advanced in previous years | - 1,200,000 | - 1,100,000 | - 1,100,000 | - 1,100,000 | + 100,000 |
| Total, Family Support Payments, current year | 2,847,514 | 2,756,485 | 2,756,485 | 2,756,485 | - 91,029 |
| New advance, 1st quarter, fiscal year 2014 | 1,100,000 | 1,100,000 | 1,100,000 | 1,100,000 | |
| LOW-INCOME HOME ENERGY ASSISTANCE [LIHEAP] | | | | | |
| Formula Grants | 3,471,672 | 2,820,000 | 3,371,672 | 3,371,672 | - 100,000 |
| Contingency Fund | | 200,000 | 100,000 | 100,000 | + 100,000 |
| Total, LIHEAP, Program Level | 3,471,672 | 3,020,000 | 3,471,672 | 3,471,672 | + 451,672 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| REFUGEE AND ENTRANT ASSISTANCE | | | | | |
| Transitional and Medical Services | 323,195 | 403,000 | 343,000 | + 19,805 | - 60,000 |
| Victims of Trafficking | 9,775 | 9,775 | 9,775 | | |
| Social Services | 115,107 | 153,407 | 153,407 | + 38,300 | |
| Preventive Health | 4,730 | 4,730 | 4,730 | | |
| Targeted Assistance | 20,201 | 48,401 | 48,401 | + 28,200 | |
| Unaccompanied Minors | 284,281 | 175,000 | 235,000 | - 49,281 | + 60,000 |
| Victims of Torture | 11,045 | 11,045 | 11,045 | | |
| Total, Refugee and Entrant Assistance | 768,334 | 805,358 | 805,358 | + 37,024 | |
| PAYMENTS TO STATES FOR THE CHILD CARE AND DEVELOPMENT BLOCK GRANT | | | | | |
| Child Care and Development Block Grant | 2,278,313 | 2,603,313 | 2,438,313 | + 160,000 | - 165,000 |
| SOCIAL SERVICES BLOCK GRANT (TITLE XX) | 1,700,000 | 1,700,000 | 1,700,000 | | |
| CHILDREN AND FAMILIES SERVICES PROGRAMS | | | | | |
| Programs for Children, Youth and Families: | | | | | |
| Head Start, current funded | 7,968,544 | 8,054,000 | 8,038,544 | + 70,000 | - 15,456 |
| Consolidated Runaway, Homeless Youth Program | 97,355 | 97,355 | 97,355 | | |
| Prevention Grants to Reduce Abuse of Runaway Youth | 17,901 | 17,901 | 17,901 | | |
| Child Abuse State Grants | 26,432 | 26,432 | 26,432 | | |
| Child Abuse Discretionary Activities | 25,744 | 25,744 | 25,744 | | |
| Community Based Child Abuse Prevention | 41,527 | 41,527 | 41,527 | | |
| Abandoned Infants Assistance | 11,553 | 11,553 | 11,553 | | |
| Child Welfare Services | 280,650 | 280,650 | 280,650 | | |
| Child Welfare Training/Innovative Approaches to Foster Care | 26,092 | 31,092 | 31,092 | + 5,000 | |
| Adoption Opportunities | 39,179 | 39,179 | 39,179 | | |
| Adoption Incentive | 39,346 | 39,346 | 39,346 | | |
| Social Services and Income Maintenance Research | | 8,000 | | | - 8,000 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Total, payments, current year | 5,153,000 | 4,810,000 | 4,810,000 | -343,000 | ..... |
| New Advance, 1st quarter | 2,100,000 | 2,200,000 | 2,200,000 | +100,000 | ..... |
| Total, Administration for Children & Families | 29,561,880 | 28,918,878 | 29,508,875 | -53,005 | +589,997 |
| Current year | (26,361,880) | (25,618,878) | (26,208,875) | (-153,005) | (+589,997) |
| Fiscal year 2014 | (3,200,000) | (3,300,000) | (3,300,000) | (+100,000) | ..... |
| Evaluation Tap Funding | (5,762) | (5,762) | (5,762) | ..... | ..... |
| Total, ACF Program Level | 29,567,642 | 28,924,640 | 29,514,637 | -53,005 | +589,997 |
| ADMINISTRATION FOR COMMUNITY LIVING | | | | | |
| AGING AND DISABILITY SERVICES PROGRAMS | | | | | |
| Grants to States: | | | | | |
| Home and Community-based Supportive Services | 366,916 | 366,916 | 366,916 | ..... | ..... |
| Preventive Health | 20,945 | 20,945 | 20,945 | ..... | ..... |
| Protection of Vulnerable Older Americans—Title VII | 21,797 | 21,797 | 21,797 | ..... | ..... |
| Subtotal | 409,658 | 409,658 | 409,658 | ..... | ..... |
| Family Caregivers | 153,621 | 153,621 | 153,621 | ..... | ..... |
| Native American Caregivers Support | 6,364 | 6,364 | 6,364 | ..... | ..... |
| Subtotal, Caregivers | 159,985 | 159,985 | 159,985 | ..... | ..... |
| Nutrition: | | | | | |
| Congregate Meals | 439,070 | 439,070 | 439,070 | ..... | ..... |
| Home Delivered Meals | 216,831 | 216,831 | 216,831 | ..... | ..... |
| Nutrition Services Incentive Program | 160,389 | 160,389 | 160,389 | ..... | ..... |
| Subtotal | 816,290 | 816,290 | 816,290 | ..... | ..... |
| Subtotal, Grants to States | 1,385,933 | 1,385,933 | 1,385,933 | ..... | ..... |

| | | | | | | | |
|--|-----------|-----------|-----------|-----------|-------|-----------|------------|
| Grants for Native Americans | 27,601 | 27,601 | 27,601 | 27,601 | ..... | ..... | ..... |
| Aging Network Support Activities | 7,873 | 7,873 | 7,873 | 7,873 | ..... | ..... | ..... |
| Alzheimer's Disease Demonstrations | 4,011 | 9,537 | 4,011 | 4,011 | ..... | ..... | -5,526 |
| Lifespan Respite Care | 2,490 | 2,490 | 4,990 | 4,990 | ..... | +2,500 | +2,500 |
| Chronic Disease Self-Management Program | (10,000) | (10,000) | (10,000) | (10,000) | ..... | ..... | ..... |
| Prevention and Public Health Fund ³ ..... | ..... | ..... | (7,000) | (7,000) | ..... | (+7,000) | (+7,000) |
| Elder Falls ..... | ..... | ..... | 8,000 | 8,000 | ..... | +8,000 | ..... |
| Prevention and Public Health Fund ³ ..... | ..... | ..... | 9,402 | 9,402 | ..... | ..... | ..... |
| Adult Protective Services Demonstration ..... | ..... | 8,000 | 8,000 | 8,000 | ..... | ..... | ..... |
| Senior Medicare Patrol Program | 9,402 | 9,402 | 4,088 | 4,088 | ..... | ..... | ..... |
| Elder Rights Support Activities | 4,088 | 4,088 | 6,457 | 6,457 | ..... | ..... | +6,457 |
| Aging and Disability Resources ..... | ..... | 51,902 | 52,115 | 52,115 | ..... | ..... | +213 |
| State Health Insurance Program | 52,115 | 52,115 | 448,251 | 448,251 | ..... | ..... | -448,251 |
| Community Service Employment for Older Americans ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| Developmental Disabilities Programs: | | | | | | | |
| State Councils | 74,774 | 74,774 | 74,774 | 74,774 | ..... | ..... | ..... |
| Protection and Advocacy | 40,865 | 40,865 | 40,865 | 40,865 | ..... | ..... | ..... |
| Voting Access for Individuals with Disabilities | 5,235 | 5,235 | 5,235 | 5,235 | ..... | ..... | ..... |
| Developmental Disabilities Projects of National Significance | 8,317 | 8,317 | 8,317 | 8,317 | ..... | ..... | ..... |
| University Centers of Excellence | 38,792 | 38,792 | 38,792 | 38,792 | ..... | ..... | ..... |
| Subtotal | 167,983 | 167,983 | 167,983 | 167,983 | ..... | ..... | ..... |
| Program Administration | 29,311 | 29,652 | 29,652 | 29,652 | ..... | +341 | ..... |
| Total, Administration for Community Living | 1,697,264 | 2,152,712 | 1,708,105 | 1,708,105 | ..... | +10,841 | -444,607 |
| Federal funds | 1,645,149 | 2,100,810 | 1,655,990 | 1,655,990 | ..... | +10,841 | -444,820 |
| Trust Funds | (52,115) | (51,902) | (52,115) | (52,115) | ..... | ..... | (+213) |
| Total, ACL Program Level | 1,707,264 | 2,162,712 | 1,725,105 | 1,725,105 | ..... | +17,841 | -437,607 |
| OFFICE OF THE SECRETARY | | | | | | | |
| GENERAL DEPARTMENTAL MANAGEMENT | | | | | | | |
| General Departmental Management: | | | | | | | |
| Federal Funds | 223,253 | 234,834 | 223,253 | 223,253 | ..... | ..... | -11,581 |
| Prevention and Public Health Fund ³ | (30,000) | (105,000) | (30,000) | (30,000) | ..... | (-30,000) | (-105,000) |
| Subtotal | 253,253 | 339,834 | 223,253 | 223,253 | ..... | -30,000 | -116,581 |
| Teen Pregnancy Prevention Community Grants | 104,592 | 104,592 | 104,592 | 104,592 | ..... | ..... | +104,592 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
[In thousands of dollars]

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Prevention and Public Health Fund ³ | | | | | |
| Teen Pregnancy Prevention approaches Evaluation Tap Funding | (8,455) | (104,790) | (8,455) | | (-104,790) |
| | | (4,232) | | | (+4,223) |
| Subtotal, Pregnancy Grants | (113,047) | (109,022) | (113,047) | | (+4,025) |
| Minority Health | 55,782 | 41,100 | 55,782 | | +14,682 |
| Office of Women's Health | 33,682 | 29,120 | 29,120 | -4,562 | |
| Minority HIV/AIDS | 53,681 | | 53,681 | | +53,681 |
| Evaluation Tap Funding | | (53,891) | | | (-53,891) |
| Embryo Adoption Awareness Campaign | 1,996 | | | -1,996 | |
| Planning and Evaluation, Evaluation Tap Funding | (60,756) | (58,718) | (60,756) | | (+2,038) |
| Total, General Departmental Management | 542,197 | 421,895 | 535,639 | -6,558 | +113,744 |
| Federal Funds | (472,986) | (305,054) | (466,428) | (-6,558) | (+161,374) |
| Evaluation Tap Funding (NA) | (69,211) | (116,841) | (69,211) | | (-47,630) |
| Prevention and Public Health Fund ³ | (30,000) | (209,790) | | (-30,000) | (-209,790) |
| Total, General Departmental Management Program | 572,197 | 631,685 | 535,639 | -36,558 | -96,046 |
| OFFICE OF MEDICARE HEARINGS AND APPEALS | 72,011 | 84,234 | 79,908 | +7,897 | -4,326 |
| OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY | 16,415 | 26,246 | 16,415 | | -9,831 |
| Evaluation Tap Funding | (44,811) | (40,011) | (49,842) | (+5,031) | (+9,831) |
| Total, Program Level | (61,226) | (66,257) | (66,257) | (+5,031) | |
| OFFICE OF INSPECTOR GENERAL | | | | | |
| Inspector General Federal Funds | 50,083 | 58,579 | 55,483 | +5,400 | -3,096 |
| HIPAA/HCFAC funding (NA) | (196,090) | (196,669) | (196,669) | (+579) | |
| Total, Inspector General Program Level | (246,173) | (255,248) | (252,152) | (+5,979) | (-3,096) |

| | | | | | |
|--|---------|---------|---------|----------|----------|
| OFFICE FOR CIVIL RIGHTS: Federal Funds | 40,938 | 38,966 | 38,966 | - 1,972 | ..... |
| Total, Office for Civil Rights | 40,938 | 38,966 | 38,966 | - 1,972 | ..... |
| RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS | | | | | |
| Retirement Payments | 375,016 | 395,452 | 395,452 | + 20,436 | ..... |
| Survivors Benefits | 28,350 | 31,043 | 31,043 | + 2,693 | ..... |
| Dependents' Medical Care | 93,984 | 100,656 | 100,656 | + 6,672 | ..... |
| Total, Medical Benefits for Commissioned Officers | 497,350 | 527,151 | 527,151 | + 29,801 | ..... |
| PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND | | | | | |
| Assistant Secretary for Preparedness and Response | | | | | |
| Operations | 32,981 | 32,991 | 32,981 | ..... | - 10 |
| Preparedness and Emergency Operations | 29,583 | 24,647 | 24,647 | - 4,936 | ..... |
| National Disaster Medical System | 52,735 | 52,390 | 52,390 | - 345 | ..... |
| Hospital Preparedness Cooperative Agreement Grants | 374,650 | 294,500 | 324,650 | - 50,000 | + 70,150 |
| Emergency Systems for Advanced Registration of Volunteer Health Professionals [ESAR-VHP] | 4,989 | 500 | 4,989 | ..... | + 4,489 |
| Biomedical Advanced Research and Development Authority [BARDA] | 415,000 | 546,671 | 465,000 | + 50,000 | - 81,671 |
| Medical Countermeasure Strategic Investment Corp ..... | ..... | 50,000 | 20,000 | + 20,000 | - 30,000 |
| Medical Countermeasure Dispensing ..... | ..... | 5,000 | 5,000 | + 5,000 | ..... |
| Policy and Planning | 15,674 | 15,164 | 15,164 | - 510 | ..... |
| Subtotal, AS for Preparedness and Response | 925,612 | 981,863 | 944,821 | + 19,209 | - 37,042 |
| Assistant Secretary for Administration | | | | | |
| Cybersecurity | 39,924 | 40,000 | 40,000 | + 76 | ..... |
| Assistant Secretary for Health | | | | | |
| Medical Reserve Corps | 11,247 | 10,971 | 10,971 | - 276 | ..... |
| Office of the Secretary | | | | | |
| Office of Security and Strategic Information | 6,448 | 7,428 | 7,428 | + 980 | ..... |
| HHS Lease Replacements ..... | ..... | 17,000 | 17,000 | + 17,000 | ..... |
| Subtotal, Office of the Secretary | 6,448 | 24,428 | 24,428 | + 17,980 | ..... |
| Subtotal, Non-pandemic flu/BARDA/BioShield/Parklawn | 568,231 | 642,262 | 605,220 | + 36,989 | - 37,042 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Total, PHSSEF | 983,231 | 1,057,262 | 1,020,220 | + 36,989 | - 37,042 |
| Total, Office of the Secretary | 2,133,014 | 2,097,492 | 2,204,571 | + 71,557 | + 107,079 |
| Federal Funds | 2,061,003 | 2,013,258 | 2,124,663 | + 63,660 | + 111,405 |
| Trust Funds | 72,011 | 84,234 | 79,908 | + 7,897 | - 4,326 |
| Evaluation Tap Funding (NA) | (114,022) | (156,852) | (119,053) | (+ 5,031) | (- 37,799) |
| Total, Office of the Secretary Program Level | 2,277,036 | 2,464,134 | 2,323,624 | + 46,588 | - 140,510 |
| Total, Title II, Dept of Health & Human Services | 589,287,967 | 620,578,512 | 621,573,540 | + 32,285,573 | + 995,028 |
| Federal Funds | 585,033,939 | 615,011,568 | 616,461,405 | + 31,427,466 | + 1,449,837 |
| Current year | (491,219,857) | (505,375,937) | (506,825,774) | (+ 15,605,917) | (+ 1,449,837) |
| Fiscal year 2014 | (93,814,082) | (109,635,631) | (109,635,631) | (+ 15,821,549) | ..... |
| Trust Funds | 4,254,028 | 5,566,944 | 5,112,135 | + 858,107 | - 454,809 |
| Pandemic Flu balances (Public Law 111-32) | (30,000) | (97,825) | ..... | (- 30,000) | (- 97,825) |
| TITLE III—DEPARTMENT OF EDUCATION | | | | | |
| EDUCATION FOR THE DISADVANTAGED | | | | | |
| Grants to Local Educational Agencies (LEAs): | | | | | |
| Basic Grants: | | | | | |
| Advance from prior year | (2,956,911) | (2,962,510) | (2,962,510) | (+ 5,599) | ..... |
| Forward funded | 3,611,410 | 2,830,559 | 3,611,410 | ..... | + 780,851 |
| Current funded | 3,984 | 4,000 | 3,984 | ..... | - 16 |
| Subtotal, Basic grants current year approp | 3,615,394 | 2,834,559 | 3,615,394 | ..... | + 780,835 |
| Subtotal, Basic grants total funds available | (6,572,305) | (5,797,069) | (6,577,904) | (+ 5,599) | (+ 780,835) |
| Basic Grants fiscal year 2014 Advance | 2,962,510 | 3,743,345 | 2,962,510 | ..... | - 780,835 |
| Subtotal, Basic grants, program level | 6,577,904 | 6,577,904 | 6,577,904 | ..... | ..... |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Payments for Children with Disabilities | 48,413 | 48,413 | 48,413 | | |
| Facilities Maintenance (Sec. 8008) | 4,845 | 4,845 | 4,845 | | |
| Construction (Sec. 8007) | 17,441 | 17,441 | 17,441 | | |
| Payments for Federal Property (Sec. 8002) | 66,947 | | 66,947 | | + 66,947 |
| Total, impact aid | 1,291,186 | 1,224,239 | 1,291,186 | | + 66,947 |
| SCHOOL IMPROVEMENT PROGRAMS | | | | | |
| Effective Teaching and Learning: Literacy | | 186,892 | | | - 186,892 |
| Effective Teaching and Learning: STEM | | 149,716 | | | - 149,716 |
| Effective Teaching and Learning for Well-Rounded Educ | | 90,000 | | | - 90,000 |
| College Pathways | | 81,282 | | | - 81,282 |
| State Grants for Improving Teacher Quality | 785,126 | | 785,126 | | + 785,126 |
| Advance from prior year | (1,678,263) | (1,681,441) | (1,681,441) | (+ 3,178) | |
| Fiscal year 2014 | 1,681,441 | | 1,681,441 | | + 1,681,441 |
| Subtotal, State Grants for Improving Teacher Quality, program level | 2,466,567 | | 2,466,567 | | + 2,466,567 |
| Mathematics and Science Partnerships | 149,716 | | 149,716 | | + 149,716 |
| Supplemental Education Grants | 17,619 | 17,619 | 17,619 | | |
| 21st Century Community Learning Centers | 1,151,673 | 1,151,673 | 1,151,673 | | |
| State Assessments/Enhanced Assessment Instruments | 389,214 | 389,214 | 389,214 | | |
| Consolidated Runaway and Homeless Youth programs | 65,173 | 65,173 | 65,173 | | |
| Training and Advisory Services (Civil Rights) | 6,962 | 6,962 | 6,962 | | |
| Education for Native Hawaiians | 34,181 | 34,181 | 34,181 | | |
| Alaska Native Education Equity | 33,185 | 33,185 | 33,185 | | |
| Rural Education | 179,193 | 179,193 | 179,193 | | |
| Comprehensive Centers | 51,113 | 51,113 | 51,113 | | |
| Total, School improvement programs | 4,544,596 | 2,436,203 | 4,544,596 | | + 2,108,393 |
| Current year | (2,863,155) | (2,436,203) | (2,863,155) | | (+ 426,952) |
| Fiscal year 2014 | (1,681,441) | | (1,681,441) | | (+ 1,681,441) |

| | | | | | |
|---|-------------|-------------|-------------|------------|---------------|
| Subtotal, Forward Funded | (2,720,095) | (1,785,253) | (2,720,095) | ..... | (+ 934,842) |
| INDIAN EDUCATION | | | | | |
| Grants to Local Educational Agencies | 105,921 | 105,921 | 105,921 | ..... | ..... |
| Federal Programs: | | | | | |
| Special Programs for Indian Children | 18,986 | 18,986 | 18,986 | ..... | ..... |
| National Activities | 5,872 | 5,872 | 5,872 | ..... | ..... |
| Subtotal, Federal Programs | 24,858 | 24,858 | 24,858 | ..... | ..... |
| Total, Indian Education | 130,779 | 130,779 | 130,779 | ..... | ..... |
| INNOVATION AND IMPROVEMENT | | | | | |
| Race to the Top | 548,960 | 850,000 | 549,284 | + 324 | - 300,716 |
| Investing in Innovation Fund | 149,417 | 150,000 | 149,417 | ..... | - 583 |
| Effective Teachers and Leaders State Grants ..... | ..... | 2,466,567 | ..... | ..... | - 2,466,567 |
| Teacher and Leader Innovation Fund ..... | ..... | 400,000 | ..... | ..... | - 400,000 |
| Teacher and Leader Pathways ..... | ..... | 74,676 | ..... | ..... | - 74,676 |
| Expanding Educational Options ..... | ..... | 255,036 | ..... | ..... | - 255,036 |
| Transition to Teaching | 26,054 | ..... | 18,200 | - 7,854 | + 18,200 |
| School Leadership | 29,107 | ..... | 29,107 | ..... | + 29,107 |
| Charter Schools Grants | 254,836 | ..... | 254,836 | ..... | + 254,836 |
| Magnet Schools Assistance | 96,733 | 99,611 | 96,733 | ..... | - 2,878 |
| Fund for the Improvement of Education [FIE] | 65,775 | 36,276 | 85,735 | + 19,960 | + 49,459 |
| Teacher Incentive Fund | 299,433 | ..... | 299,433 | ..... | + 299,433 |
| Ready-to-Learn television | 27,194 | ..... | 27,194 | ..... | + 27,194 |
| Advanced Placement | 30,027 | ..... | 36,027 | + 6,000 | + 36,027 |
| Total, Innovation and Improvement | 1,527,536 | 4,332,166 | 1,545,966 | + 18,430 | - 2,786,200 |
| Current Year | (1,527,536) | (4,332,166) | (1,545,966) | (+ 18,430) | (- 2,786,200) |
| SAFE SCHOOLS AND CITIZENSHIP EDUCATION | | | | | |
| Safe and Healthy Students ..... | ..... | 195,866 | ..... | ..... | - 195,866 |
| Promise Neighborhoods | 59,887 | 100,000 | 80,000 | + 20,113 | - 20,000 |
| National Programs | 64,877 | ..... | 48,600 | - 16,277 | + 48,600 |
| Elementary and Secondary School Counseling | 52,296 | ..... | 52,296 | ..... | + 52,296 |
| Carol M. White Physical Education Program | 78,693 | ..... | 78,693 | ..... | + 78,693 |
| Total, Safe Schools and Citizenship Education | 255,753 | 295,866 | 259,589 | + 3,836 | - 36,277 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| ENGLISH LANGUAGE ACQUISITION | | | | | |
| Current funded | 47,589 | 47,589 | 47,589 | | |
| Forward funded | 684,555 | 684,555 | 684,555 | | |
| Total, English Language Acquisition | 732,144 | 732,144 | 732,144 | | |
| SPECIAL EDUCATION | | | | | |
| State Grants: | | | | | |
| Grants to States Part B current year | 2,294,472 | 1,453,752 | 2,394,472 | + 100,000 | + 940,720 |
| Part B advance from prior year | (8,576,143) | (9,283,383) | (9,283,383) | (+ 707,240) | |
| Grants to States Part B (fiscal year 2014) | 9,283,383 | 10,124,103 | 9,283,383 | | - 840,720 |
| Subtotal, program level | 11,577,855 | 11,577,855 | 11,677,855 | + 100,000 | + 100,000 |
| Preschool Grants | 372,646 | 372,646 | 372,646 | | |
| Grants for Infants and Families | 442,710 | 462,710 | 462,710 | + 20,000 | |
| Subtotal, program level | 12,393,211 | 12,413,211 | 12,513,211 | + 120,000 | + 100,000 |
| IDEA National Activities (current funded): | | | | | |
| State Personnel Development | 43,917 | 45,011 | 45,011 | + 1,094 | |
| Technical Assistance and Dissemination | 46,781 | 46,781 | 46,781 | | |
| Personnel Preparation | 88,299 | 85,799 | 86,205 | - 2,094 | + 406 |
| Parent Information Centers | 28,917 | 28,917 | 29,917 | + 1,000 | + 1,000 |
| Technology and Media Services | 29,588 | 29,588 | 29,588 | | |
| Subtotal, IDEA special programs | 237,502 | 236,096 | 237,502 | | + 1,406 |
| Special Olympics Education Programs | 8,000 | 8,000 | 8,000 | | |
| PROMISE | 1,996 | 30,000 | 11,996 | + 10,000 | - 18,004 |
| Total, Special education | 12,640,709 | 12,687,307 | 12,770,709 | + 130,000 | + 83,402 |

| | | | | | |
|--|-------------|--------------|-------------|-------------|-------------|
| Current Year | (3,357,326) | (2,563,204) | (3,487,326) | (+ 130,000) | (+ 924,122) |
| Fiscal year 2014 | (9,283,383) | (10,124,103) | (9,283,383) | | (- 840,720) |
| Subtotal, Forward Funded | (3,109,828) | (2,289,108) | (3,229,828) | (+ 120,000) | (+ 940,720) |
| REHABILITATION SERVICES AND DISABILITY RESEARCH | | | | | |
| Vocational Rehabilitation State Grants | 3,121,712 | 3,230,972 | 3,230,972 | + 109,260 | |
| Discretionary modification (NA) | | (- 63,603) | | | (+ 63,603) |
| Subtotal, VR State grants program level | 3,121,712 | 3,167,369 | 3,230,972 | + 109,260 | + 63,603 |
| Client Assistance State grants | 12,240 | 12,240 | 12,240 | | |
| Training | 35,515 | 30,188 | 35,515 | | + 5,327 |
| Demonstration and Training programs | 5,325 | 5,750 | 6,500 | + 1,175 | + 750 |
| Migrant and Seasonal Farmworkers | 1,262 | | 1,262 | | + 1,262 |
| Protection and Advocacy of Individual Rights (PAIR) | 18,031 | 18,031 | 18,031 | | |
| Supported Employment State grants | 29,068 | | 29,068 | | + 29,068 |
| Independent Living: | | | | | |
| State Grants | 23,359 | 23,359 | 23,359 | | |
| Centers | 79,953 | 79,953 | 79,953 | | |
| Services for Older Blind Individuals | 34,018 | 34,018 | 34,018 | | |
| Subtotal | 137,330 | 137,330 | 137,330 | | |
| Helen Keller National Center for Deaf/Blind Youth and Adults | 9,145 | 9,145 | 9,145 | | |
| National Inst. Disability and Rehab. Research (NIDRR) | 108,817 | 106,817 | 108,817 | | + 2,000 |
| Assistive Technology | 32,836 | 30,840 | 37,500 | + 4,664 | + 6,660 |
| Subtotal, Discretionary programs | 389,569 | 350,341 | 395,408 | + 5,839 | + 45,067 |
| Total, Rehabilitation services | 3,511,281 | 3,581,313 | 3,626,380 | + 115,099 | + 45,067 |
| SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES | | | | | |
| AMERICAN PRINTING HOUSE FOR THE BLIND | 24,505 | 24,505 | 24,505 | | |
| NATIONAL TECHNICAL INSTITUTE FOR THE DEAF (NTID): | | | | | |
| Operations | 65,422 | 63,037 | 65,422 | | + 2,385 |
| Construction | | 2,000 | | | - 2,000 |
| Total, NTID | 65,422 | 65,037 | 65,422 | | + 385 |
| GALLAUDET UNIVERSITY: | | | | | |
| Operations | 117,541 | 117,541 | 118,000 | + 459 | + 459 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | | |
|---|--------------------|-----------------|--------------------------|--|-----------------|--|
| | | | | 2012 appropriation | Budget estimate | |
| Construction | 7,975 | ..... | 7,000 | -975 | +7,000 | |
| Total, Gallaudet University | 125,516 | 117,541 | 125,000 | -516 | +7,459 | |
| Total, Special Institutions for Persons with Disabilities | 215,443 | 207,083 | 214,927 | -516 | +7,844 | |
| CAREER, TECHNICAL AND ADULT EDUCATION | | | | | | |
| Career Education: | | | | | | |
| Basic State Grants/Secondary & Technical Education State Grants, current funded | 332,030 | 332,030 | 332,030 | ..... | ..... |  |
| Advance from prior year | (789,505) | (791,000) | (791,000) | (+ 1,495) | ..... |  |
| Fiscal year 2014 | 791,000 | 791,000 | 791,000 | ..... | ..... |  |
| Subtotal, Basic State Grants, program level | 1,123,030 | 1,123,030 | 1,123,030 | ..... | ..... |  |
| National Programs | 7,829 | 7,829 | 7,829 | ..... | ..... |  |
| Subtotal, Career Education | 1,130,859 | 1,130,859 | 1,130,859 | ..... | ..... |  |
| Adult Education: | | | | | | |
| State Grants/Adult Basic and Literacy Education: | | | | | | |
| State Grants, current funded | 594,993 | 594,993 | 594,993 | ..... | ..... |  |
| National Leadership Activities | 11,302 | 11,302 | 11,302 | ..... | ..... |  |
| Subtotal, Adult education | 606,295 | 606,295 | 606,295 | ..... | ..... |  |
| Total, Career and adult education | 1,737,154 | 1,737,154 | 1,737,154 | ..... | ..... |  |
| Current Year | (946,154) | (946,154) | (946,154) | ..... | ..... |  |
| Fiscal year 2014 | (791,000) | (791,000) | (791,000) | ..... | ..... |  |
| Subtotal, Forward Funded | (946,154) | (946,154) | (946,154) | ..... | ..... |  |
| STUDENT FINANCIAL ASSISTANCE | | | | | | |
| Pell Grants—maximum grant (NA) | (4,860) | (4,860) | (4,860) | ..... | ..... |  |

| | | | | |
|--|------------|------------|------------|----------|
| Pell Grants | 22,824,000 | 22,824,000 | 22,824,000 | ..... |
| Federal Supplemental Educational Opportunity Grants | 734,599 | 734,599 | 734,599 | ..... |
| Federal Work Study | 976,682 | 1,126,682 | 976,682 | -150,000 |
| Total, Student Financial Assistance (SFA) | 24,535,281 | 24,685,281 | 24,535,281 | -150,000 |
| STUDENT AID ADMINISTRATION | | | | |
| Salaries and Expenses | 675,750 | 726,618 | 726,618 | +50,868 |
| Servicing Activities | 367,637 | 399,745 | 399,745 | +32,108 |
| Total, Student Aid Administration | 1,043,387 | 1,126,363 | 1,126,363 | +82,976 |
| HIGHER EDUCATION | | | | |
| Aid for Institutional Development: | | | | |
| Strengthening Institutions | 80,623 | 80,623 | 80,623 | ..... |
| Hispanic Serving Institutions | 100,432 | 100,432 | 100,432 | ..... |
| Promoting Post-Baccalaureate Opportunities for Hispanic Americans | 9,011 | 9,011 | 9,011 | ..... |
| Strengthening Historically Black Colleges (HBCUs) | 227,980 | 227,980 | 227,980 | ..... |
| Strengthening Historically Black Graduate Institutions | 58,958 | 58,958 | 58,958 | ..... |
| Strengthening Predominantly Black Institutions | 9,262 | 9,262 | 9,262 | ..... |
| Asian American Pacific Islander | 3,119 | 3,119 | 3,119 | ..... |
| Strengthening Alaska Native and Native Hawaiian-Serving Institutions | 12,859 | 12,859 | 12,859 | ..... |
| Strengthening Native American-Serving Nontribal Institutions | 3,119 | 3,119 | 3,119 | ..... |
| Strengthening Tribal Colleges | 25,713 | 25,713 | 25,713 | ..... |
| Subtotal, Aid for Institutional development | 531,076 | 531,076 | 531,076 | ..... |
| International Education and Foreign Language: | | | | |
| Domestic Programs | 66,586 | 68,278 | 68,278 | +1,692 |
| Overseas Programs | 7,451 | 7,451 | 7,451 | ..... |
| Subtotal, International Education & Foreign Lang | 74,037 | 75,729 | 75,729 | +1,692 |
| Fund for the Improvement of Postsec. Ed. [FPSE] | | | | |
| Postsecondary Program for Students with Intellectual Disabilities | 3,494 | 70,000 | 43,494 | -26,506 |
| Minority Science and Engineering Improvement | 10,957 | 9,466 | 10,957 | +10,957 |
| Tribally Controlled Postsec Voc/Tech Institutions | 8,131 | 8,131 | 8,131 | ..... |
| Federal TRIO Programs | 839,932 | 839,932 | 839,932 | ..... |
| GEAR UP | 302,244 | 302,244 | 302,244 | ..... |
| Graduate Assistance in Areas of National Need | 30,909 | 30,909 | 30,909 | ..... |
| Teacher Quality Partnerships | 42,833 | 42,833 | 42,833 | +42,833 |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
[In thousands of dollars]

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|---|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| Child Care Access Means Parents in School | 15,970 | 15,970 | 15,970 | | |
| GPRA Data/HEA Program Evaluation | 607 | 607 | 607 | | |
| Hawkins Centers of Excellence | | 30,000 | | | -30,000 |
| Race to the Top: College Affordability and Completion | | 1,000,000 | | | -1,000,000 |
| Total, Higher Education | 1,869,656 | 2,914,064 | 1,911,348 | +41,692 | -1,002,716 |
| HOWARD UNIVERSITY | | | | | |
| Academic Program | 201,637 | 201,637 | 201,637 | | |
| Endowment Program | 3,593 | 3,593 | 3,593 | | |
| Howard University Hospital | 28,834 | 28,834 | 28,834 | | |
| Total, Howard University | 234,064 | 234,064 | 234,064 | | |
| COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS [CHAFL] | | | | | |
| | 459 | 459 | 459 | | |
| HBCU CAPITAL FINANCING PROGRAM | | | | | |
| HBCU Federal Administration | 352 | 352 | 352 | | |
| HBCU Loan Subsidies | 20,150 | 20,150 | 20,150 | | |
| Total, HBCU Capital Financing Program | 20,502 | 20,502 | 20,502 | | |
| INSTITUTE OF EDUCATION SCIENCES [IES] | | | | | |
| Research, Development and Dissemination | 189,787 | 202,273 | 189,787 | | -12,486 |
| Statistics | 108,748 | 114,748 | 114,745 | +5,997 | -3 |
| Regional Educational Laboratories | 57,426 | 57,426 | 57,426 | | |
| Research in Special Education | 49,905 | 49,905 | 59,905 | +10,000 | +10,000 |
| Special Education Studies and Evaluations | 11,415 | 11,415 | 11,415 | | |
| Statewide Data Systems | 38,077 | 53,077 | 53,077 | +15,000 | |
| Assessment: | | | | | |
| National Assessment | 129,616 | 124,616 | 124,616 | -5,000 | |

| | | | | | |
|---|--------------|--------------|--------------|------------|--------------|
| National Assessment Governing Board | 8,690 | 7,690 | 7,690 | -1,000 | ..... |
| Subtotal, Assessment | 138,306 | 132,306 | 132,306 | -6,000 | ..... |
| Total, IES | 593,664 | 621,150 | 618,661 | +24,997 | -2,489 |
| DEPARTMENTAL MANAGEMENT | | | | | |
| PROGRAM ADMINISTRATION: | | | | | |
| Salaries and Expenses | 446,259 | 461,604 | 446,259 | ..... | -15,345 |
| Building Modernization ..... | ..... | 2,211 | 2,211 | +2,211 | ..... |
| Total, Program administration | 446,259 | 463,815 | 448,470 | +2,211 | -15,345 |
| OFFICE FOR CIVIL RIGHTS | 102,624 | 105,318 | 102,624 | ..... | -2,694 |
| OFFICE OF THE INSPECTOR GENERAL | 59,820 | 62,401 | 59,820 | ..... | -2,581 |
| Total, Departmental management | 608,703 | 631,534 | 610,914 | +2,211 | -20,620 |
| Total, Title III, Department of Education | 71,234,000 | 73,127,673 | 71,751,125 | +517,125 | -1,376,548 |
| Current Year | (48,636,999) | (50,530,672) | (49,154,124) | (+517,125) | (-1,376,548) |
| Fiscal year 2014 | (22,597,001) | (22,597,001) | (22,597,001) | ..... | ..... |
| TITLE IV—RELATED AGENCIES | | | | | |
| COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED | | | | | |
| CORPORATION FOR NATIONAL AND COMMUNITY SERVICE | | | | | |
| OPERATING EXPENSES | | | | | |
| Domestic Volunteer Service Programs: | 5,375 | 5,396 | 5,375 | ..... | -21 |
| Volunteers in Service to America (VISTA) | 94,820 | 95,300 | 95,300 | +480 | ..... |
| National Senior Volunteer Corps: | 110,565 | 110,774 | 110,774 | +209 | ..... |
| Foster Grandparents Program | 46,722 | 46,810 | 46,810 | +88 | ..... |
| Senior Companion Program | 50,204 | 50,299 | 51,299 | +1,095 | +1,000 |
| Retired Senior Volunteer Program | 207,491 | 207,883 | 208,883 | +1,392 | +1,000 |
| Subtotal, Senior Volunteers | 302,311 | 303,183 | 304,183 | +1,872 | +1,000 |
| Subtotal, Domestic Volunteer Service Programs ..... | ..... | ..... | ..... | ..... | ..... |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
 FOR FISCAL YEAR 2013—Continued
 (In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| National and Community Service Programs: | | | | | |
| AmeriCorps State and National Grants | 344,348 | 345,000 | 346,368 | + 2,020 | + 1,368 |
| Disability Placement Funds ..... | ..... | 3,000 | ..... | ..... | - 3,000 |
| Innovation, Assistance, and Other Activities | 53,280 | 53,215 | 54,215 | + 935 | + 1,000 |
| Evaluation | 2,994 | 5,000 | 5,000 | + 2,006 | ..... |
| National Civilian Community Corps | 31,882 | 30,110 | 30,742 | - 1,140 | + 632 |
| State Commission Grants | 15,437 | 20,990 | 19,990 | + 4,553 | - 1,000 |
| Subtotal, National & Community Service Programs | 447,941 | 457,315 | 456,315 | + 8,374 | - 1,000 |
| Total, Operating expenses | 750,252 | 760,498 | 760,498 | + 10,246 | ..... |
| Payment to the National Service Trust | 211,797 | 208,744 | 208,744 | - 3,053 | ..... |
| Salaries and Expenses | 82,843 | 88,000 | 88,000 | + 5,157 | ..... |
| Office of Inspector General | 3,992 | 5,400 | 5,400 | + 1,408 | ..... |
| Total, Corp. for National and Community Service | 1,048,884 | 1,062,642 | 1,062,642 | + 13,758 | ..... |
| CORPORATION FOR PUBLIC BROADCASTING: | | | | | |
| Fiscal year 2015 (current) with fiscal year 2014 comparable | 445,000 | 445,000 | 445,000 | ..... | ..... |
| Fiscal year 2014 advance with fiscal year 2013 comparable (NA) | (445,000) | (445,000) | (445,000) | ..... | ..... |
| Fiscal year 2013 advance with fiscal year 2012 comparable (NA) | (444,159) | (445,000) | (445,000) | (+ 841) | ..... |
| Subtotal, fiscal year 2013 appropriation ..... | ..... | ..... | ..... | ..... | ..... |
| FEDERAL MEDIATION AND CONCILIATION SERVICE | 46,163 | 47,045 | 46,163 | ..... | - 882 |
| FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION | 17,604 | 16,000 | 17,000 | - 604 | + 1,000 |
| INSTITUTE OF MUSEUM AND LIBRARY SERVICES | 231,954 | 231,954 | 231,954 | ..... | ..... |
| MEDICARE AND CHIP PAYMENT AND ACCESS COMMISSION | 5,989 | 11,000 | 9,500 | + 3,511 | - 1,500 |
| MEDICARE PAYMENT ADVISORY COMMISSION | 11,778 | 12,210 | 11,778 | ..... | - 432 |
| NATIONAL COUNCIL ON DISABILITY | 3,258 | 3,258 | 3,258 | ..... | ..... |
| NATIONAL HEALTH CARE WORKFORCE COMMISSION ..... | ..... | 3,000 | 3,000 | + 3,000 | ..... |
| NATIONAL LABOR RELATIONS BOARD | 278,306 | 292,800 | 288,306 | + 10,000 | - 4,494 |

| | | | | | |
|--|--------------|--------------|--------------|-------------|----------|
| NATIONAL MEDIATION BOARD | 13,411 | 13,530 | 14,411 | + 1,000 | + 881 |
| OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION | 11,667 | 11,965 | 11,667 | | - 298 |
| RAILROAD RETIREMENT BOARD | | | | | |
| Dual Benefits Payments Account | 50,904 | 45,000 | 45,000 | - 5,904 | |
| Less Income Tax Receipts on Dual Benefits | - 2,000 | - 3,000 | - 3,000 | - 1,000 | |
| Subtotal, Dual Benefits | 48,904 | 42,000 | 42,000 | - 6,904 | |
| Federal Payment to the RR Retirement Account | 150 | 150 | 150 | | |
| Limitation on Administration | 108,649 | 112,415 | 111,649 | + 3,000 | - 766 |
| Inspector General | 8,155 | 8,820 | 8,155 | | - 665 |
| SOCIAL SECURITY ADMINISTRATION | | | | | |
| Payments to Social Security Trust Funds | 20,404 | 20,402 | 20,402 | - 2 | |
| SUPPLEMENTAL SECURITY INCOME | | | | | |
| Federal Benefit Payments | 47,557,000 | 54,245,000 | 54,245,000 | + 6,688,000 | |
| Beneficiary Services | 47,000 | | | - 47,000 | |
| Research and Demonstration | 7,998 | 48,000 | 48,000 | + 40,002 | |
| Administration | 3,611,552 | 3,950,000 | 3,950,000 | + 338,448 | |
| Subtotal, SSI program level | 51,223,550 | 58,243,000 | 58,243,000 | + 7,019,450 | |
| Less funds advanced in prior year | - 13,400,000 | - 18,200,000 | - 18,200,000 | - 4,800,000 | |
| Subtotal, regular SSI current year | 37,823,550 | 40,043,000 | 40,043,000 | + 2,219,450 | |
| New advance, 1st quarter, fiscal year 2014 | 18,200,000 | 19,300,000 | 19,300,000 | + 1,100,000 | |
| Total, SSI program | 56,023,550 | 59,343,000 | 59,343,000 | + 3,319,450 | |
| LIMITATION ON ADMINISTRATIVE EXPENSES | | | | | |
| OASDI Trust Funds | 5,320,028 | 5,275,463 | 5,256,007 | - 64,021 | - 19,456 |
| HI/SMI Trust Funds | 2,089,794 | 1,901,313 | 1,901,313 | - 188,481 | |
| Social Security Advisory Board | 2,146 | 2,150 | 2,150 | + 4 | |
| SSI | 3,123,576 | 3,386,074 | 3,386,074 | + 262,498 | |
| Subtotal, regular LAE | 10,535,544 | 10,565,000 | 10,545,544 | + 10,000 | - 19,456 |
| User Fees: | | | | | |
| SSI User Fee activities | 153,596 | 166,000 | 166,000 | + 12,404 | |

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2012 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL
FOR FISCAL YEAR 2013—Continued
(In thousands of dollars)

| Item | 2011 appropriation | Budget estimate | Committee recommendation | Senate Committee recommendation compared with (+ or -) | |
|--|--------------------|-----------------|--------------------------|--|-----------------|
| | | | | 2012 appropriation | Budget estimate |
| SSPA User Fee Activities | | | | | |
| Subtotal, User fees | 153,596 | 166,000 | 166,000 | + 12,404 | — |
| Subtotal, Limitation on administrative expenses | 10,689,140 | 10,731,000 | 10,711,544 | + 22,404 | - 19,456 |
| Program Integrity Funding: | | | | | |
| OASDI Trust Funds | 268,076 | 460,074 | 460,074 | + 191,998 | — |
| SSI | 487,976 | 563,926 | 563,926 | + 75,950 | — |
| Subtotal, Program integrity funding | 756,052 | 1,024,000 | 1,024,000 | + 267,948 | — |
| Total, Limitation on Administrative Expenses | 11,445,192 | 11,755,000 | 11,735,544 | + 290,352 | - 19,456 |
| OFFICE OF THE INSPECTOR GENERAL | | | | | |
| Federal Funds | 28,887 | 30,000 | 28,887 | — | - 1,113 |
| Trust Funds | 73,396 | 77,600 | 73,396 | — | - 4,204 |
| Total, Office of the Inspector General | 102,283 | 107,600 | 102,283 | — | - 5,317 |
| Adjustment: Trust fund transfers from general revenues | - 3,611,552 | - 3,950,000 | - 3,950,000 | - 338,448 | — |
| Total, Social Security Administration | 63,979,877 | 67,276,002 | 67,251,229 | + 3,271,352 | - 24,773 |
| Federal funds | 56,226,437 | 59,559,402 | 59,558,289 | + 3,331,852 | - 1,113 |
| Current year | (38,026,437) | (40,259,402) | (40,258,289) | (+ 2,231,852) | (- 1,113) |
| New advances, 1st quarter | (18,200,000) | (19,300,000) | (19,300,000) | (+ 1,100,000) | — |
| Trust funds | 7,753,440 | 7,716,600 | 7,692,940 | - 60,500 | - 23,660 |
| Total, Title IV, Related Agencies | 66,265,124 | 69,595,187 | 69,563,237 | + 3,298,113 | - 31,950 |
| Federal Funds | 58,383,102 | 61,745,142 | 61,738,715 | + 3,355,613 | - 6,427 |
| Current Year | (39,736,102) | (42,000,142) | (41,993,715) | (+ 2,255,613) | (- 6,427) |
| Current Year (emergency) | | | | | |

| | | | | | | |
|--------------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|----------------|
| Fiscal year 2014 Advance | (18,200,000) | (19,300,000) | (19,300,000) | (19,300,000) | (+ 1,100,000) | ..... |
| Fiscal year 2014 Advance | (445,000) | (445,000) | (445,000) | (445,000) | ..... | ..... |
| Trust Funds | 7,882,022 | 7,850,045 | 7,824,522 | 7,824,522 | -57,500 | -25,523 |
| Grand Total | 741,495,738 | 777,624,610 | 777,568,714 | 777,568,714 | +36,072,976 | -55,896 |

¹ President's budget request these funds in the Admin for Community living at HHS.

² Two year availability

³ Section 4002 of Public Law 111-148.

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