

AMENDMENTS TO THE LABOR, HEALTH AND
HUMAN SERVICES, EDUCATION, AND RELATED
AGENCIES APPROPRIATIONS BILL FOR FY 2020

Full Committee Markup
House Appropriations Committee
Wednesday, May 08, 2019

**Labor, Health & Human Services, Education, and Related Agencies Appropriations Bill,
Fiscal Year 2020**

Full Committee Mark Up

Chair DeLauro Manager's Amendment

May 8, 2019

adopted ✓

In the Bill:

On page 47, line 3, strike "\$67,477,000" and insert "\$56,664,000".

On page 47, line 5, strike "\$74,941,000" and insert "\$74,376,000".

On page 85, line 24, strike "2019" and insert "2018".

On page 86, line 6, strike "\$2,800,000,000" and insert "\$3,000,000,000".

On page 136, line 25, strike "\$1,378,000,000" and insert "\$1,380,000,000".

And amend the report accordingly.

In the Report:

On page 17, in the paragraph that begins "The Committee directs the Department to submit a report," strike "the current fiscal year and".

On page 19, in the paragraph that begins "While the national unemployment rate has declined," in the second sentence strike "any" and insert "unearned".

On page 20, in the paragraph that begins "Foreign Labor Certification.---", insert "in proportion to their use of the H-2A and H-2B programs" after "States".

On page 33, strike the paragraph beginning with "The Committee supports targeted investments in impoverished areas," and insert the following new paragraph:

"The Committee supports targeted investments in impoverished areas, particularly in persistent poverty counties and in other high-poverty census tracts. To understand how programs funded through the Department are serving these particular areas, the Committee directs the Department to submit a report to the Committees on Appropriations on the percentage of funds allocated by all competitive grant programs and other anti-poverty programs in fiscal years 2017, 2018 and 2019 and estimates for fiscal year 2020 to serve individuals living in persistent poverty counties, as defined as a county that has had 20 percent or more of its population living in poverty over the past 30 years, as measured by the 1990 and 2000 decennial censuses and the most recent Small Area Income and Poverty estimates, and high-poverty areas, as defined as any

census tract with a poverty rate of at least 20 percent as measured by the 2013-2017 5-year data series available from the American Community Survey of the Census Bureau. The Department shall report this information to the Committees within 90 days of such data being available and provide a briefing to the Committees not later than 180 days of enactment of this Act on how the Department is carrying out this directive.”

On page 38, after the paragraph beginning with “Rural Health Workforce”, insert the following two paragraphs:

“Shortage Designation Modernization Project.—The Committee is concerned that HRSA is implementing the Shortage Designation Management System without a thorough understanding of the potential impact of the revised Health Professional Shortage Area scores on States. The Committee requests a briefing from HRSA within 60 days of enactment of this Act on the revised methodology and implications for addressing health care workforce shortages in States.

Trafficking Awareness for Health Professionals.—The Committee encourages HRSA to identify best practices for accredited schools of medicine or nursing to train students in identifying and responding to human trafficking victims and to respond appropriately to such individuals. Best practices should be developed in consultation with law enforcement personnel, social service providers, and other experts in the field of human trafficking.”

On page 40, strike the paragraph beginning with “Within the funds provided” and the paragraph beginning with “Dental Faculty Loan Repayment” and replace with the following paragraph:

“The Committee include not less than \$12,000,000 for General Dentistry Programs and not less than \$12,000,000 for Pediatric Dentistry Programs. The Committee directs HRSA to provide continuation funding for predoctoral and postdoctoral training grants initially awarded in fiscal year 2015, and for section 748 Dental Faculty Loan Program (DFLRP) grants initially awarded in fiscal years 2016, 2017, 2018 and 2019. The Committee continues to support DFLRP awards with a preference for pediatric dentistry faculty supervising dental students or residents and providing clinical services in dental clinics located in dental schools, hospitals, and community-based affiliated sites.

On page 54, insert the following new paragraph after HRSA Strategy to Address Intimate Partner Violence 2017-2020 and Project Catalyst:

“Targeted Investments in Persistent Poverty Counties.—The Committee supports targeted investments in impoverished areas, particularly in persistent poverty counties and in other high-poverty census tracts. To understand how programs funded through the Department are serving these particular areas, the Committee directs the Department to submit a report to the Committees on Appropriations on the percentage of funds allocated by all competitive grant programs and other anti-poverty programs in fiscal years 2017, 2018 and 2019 and estimates for

fiscal year 2020 to serve individuals living in persistent poverty counties, as defined as a county that has had 20 percent or more of its population living in poverty over the past 30 years, as measured by the 1990 and 2000 decennial censuses and the most recent Small Area Income and Poverty estimates, and high-poverty areas, as defined as any census tract with a poverty rate of at least 20 percent as measured by the 2013-2017 5-year data series available from the American Community Survey of the Census Bureau. The Department shall report this information to the Committees within 90 days of such data being available and provide a briefing to the Committees not later than 180 days after enactment of this Act on how the Department is carrying out this directive.”

On page 57, insert the following new paragraph after Congenital Syphilis:

“Emphasis on Comprehensive Services.— In recent fiscal years, the Committee has provided historic resources to combat the opioid epidemic, with a particular focus on expanding access to treatment, and treating and preventing comorbidities that can be associated with injection drug use. At the Committee’s urging, the Department has rightfully prioritized efforts that increase access to treatment and recovery services. For all programs not focused exclusively on prevention of substance abuse, the Committee directs the Department to continue its emphasis on evidence-based medical interventions, and to ensure that all such interventions, including programs that focus on harm reduction, provide referral to treatment and recovery services.”

On page 58, in the “Viral Hepatitis Vaccine” paragraph, delete “includes an increase of \$11,000,000 and”.

On page 65, insert the following paragraph after Ovarian Cancer:

“Polycystic Ovary Syndrome.—The Committee recognizes the significant health burden of Polycystic Ovary Syndrome (PCOS), which has metabolic, reproductive, dermatologic, and mental health manifestations. PCOS is a pervasive metabolic health issue that increases the risk of type 2 diabetes, infertility, nonalcoholic fatty liver disease, pregnancy complications, endometrial cancer, depression, cardiovascular disease, and other comorbidities. Studies report inadequate information about PCOS, a delay in diagnosis, and 50 to 70 percent of PCOS patients go undiagnosed or misdiagnosed. There is also a paucity of data in the U.S. on PCOS prevalence, ethnic and genetic differences, and its impacts on long-term health. Therefore, the Committee encourages CDC to raise awareness and increase knowledge about PCOS among the general public, PCOS patients and health care providers.”

On page 66, insert the following at the end of the paragraph beginning with “Safe Motherhood and Infant Health”:

“Furthermore, the Committee requests CDC to provide routine updates on the status of implementing programs authorized under the Preventing Maternal Deaths Act of 2018.”

On page 70, in the “Public Health Data Surveillance/IT Systems Modernization” following “...implementation of its Surveillance Strategy”, insert “and development of its essential Surveillance Data Platform”.

On page 74, on the “Total Worker Health” line in the table, delete “\$7,000,000” and insert “\$8,300,000”.

On page 83, insert the following new paragraph after the paragraph beginning with “Recalcitrant Cancers”:

*“Specialized Programs of Research Excellence in Cancer.—*The Committee notes that the SPORE program is NCI’s cornerstone effort to promote collaborative, interdisciplinary translational cancer research. The Committee continues support for the SPORE grant program as it works to bring basic research into practical treatments, including multi-center SPORE grants to encourage better understanding of closely related cancers in function and impact on different organ systems to advance science toward more effective treatments, cures, and prevention. The Committee requests an update in the fiscal year 2021 Congressional Budget Justification on a timeline to expand multi-center SPORE grants.”

On page 96, in the paragraph beginning with “Asthma”, strike “NHLBI” and insert “NIEHS”.

On page 101, insert the following new paragraph after the paragraph beginning with “Mission”:

*“Computational Medicine and RNA Molecules.—*The Committee is encouraged by recent advances in computational medicine that are helping scientists understand what causes disease and how disease progresses. One such example is new evidence about how a person’s sex, race, ethnicity, and geographic origin affect the individual’s regulatory RNA molecules and the proteins that these molecules control. More research on these links could uncover new and important biological discoveries, improve our understanding of disease processes and herald highly personalized approaches to diagnosis, prognosis and therapy. The Committee urges NHGRI to support additional research on RNA molecules and the mechanisms through which they affect biological processes that cause disease.”

On page 119, insert the following two new paragraphs after the Criminal Justice Activities section:

*“Digital Health.—*The Committee appreciates SAMHSA’s dedication to provide science-based, best-practice guidance to the behavioral health field. In H. Rept. 115-862, the Committee requested that SAMHSA include an update on its efforts to update the January 2015 Federal Guidelines for Opioid Treatment Programs in its fiscal year 2020 Congressional Budget Justification. This information was not included in the fiscal year 2020 Congressional Budget Justification, but prescription digital health technologies are now used to deliver evidence-based therapeutic interventions to patients to prevent, manage or treat a medical disorder or disease.

Within one year of enactment of this Act, the Committee directs SAMSHA to provide a report to Congress that includes a discussion on how prescription technologies could be used by the behavioral health field as a tool to combat substance abuse and amplify mental health services.”

“Emphasis on Comprehensive Services.— In recent fiscal years, the Committee has provided historic resources to combat the opioid epidemic, with a particular focus on expanding access to treatment, and treating and preventing comorbidities that can be associated with injection drug use. At the Committee’s urging, the Department has rightfully prioritized efforts that increase access to treatment and recovery services. For all programs not focused exclusively on prevention of substance abuse, the Committee directs the Department to continue its emphasis on evidence-based medical interventions, and to ensure that all such interventions, including programs that focus on harm reduction, provide referral to treatment and recovery services.”

On page 125, insert the following new paragraph prior to the paragraph beginning with “Adult Vaccinations”:

“Medicaid Health Home.— The Committee urges the Secretary to establish standards for qualification as a Medicaid health home that ensure the requirement to “coordinate prompt care for children with medically complex conditions, including access to pediatric emergency services at all times,” is not limited to facilities with an onsite or affiliated emergency department. The requirement to include access to pediatric emergency services at all times should include facilities that coordinate with another entity that provides emergency services.”

On page 129, insert the following new paragraph after the paragraph beginning with “Extravasations”:

“GAO Report on Anesthesia Services.—The Committee recognizes the importance of access to timely and accurate data on payment rates for medical services. Recently there have been efforts to examine the difference in Medicare rates and private payment rates, including by the Medicare Payment Advisory Commission. The Committee understands, however, access to necessary data is limited and, therefore, leads to inclusive and incomplete findings. As such, the Committee, to the extent feasible, encourages the Government Accountability Office to update its July 2007 report entitled, “Medicare Physician Payments: Medicare and Private Payment Differences for Anesthesia Services”. In this report, GAO noted the “2004 average Medicare payments for a set of seven anesthesia services provided by anesthesiologists alone were 67 percent lower than average private insurance payments in 41 Medicare payment localities.” In updating this report, GAO should examine, to the extent feasible, if this payment discrepancy remains and how payment rates in Medicare and the private market for anesthesia services have changed since 2004.”

On page 130, insert the following new paragraph after the paragraph beginning with “Home Visiting Programs”:

“Hospital Acquired Conditions.—The Committee recognizes that HHS research has shown that preventable Hospital-Acquired Conditions (HACs), including pressure ulcers and their associated complications, kill more than 60,000 hospital patients per year. October 2017 data from CMS’s Office of Enterprise Data and Analytics identified an alarming 58 percent increase in pressure ulcer discharges between the first quarter of 2016 and the first quarter of 2017. The Committee believes additional efforts to reduce the prevalence of HAIs and their associated complications through HHS and CMS are necessary to reduce these events. The Committee supports efforts by CMS to conduct an evaluation of agency efforts to: (1) monitor the rising prevalence of HACs; (2) reduce the incidence of HACs and subsequent Hospital Acquired Infections, including pressure ulcers; and (3) develop and enact more effective reduction practices.”

On page 130, in the paragraph beginning with “Limited Wraparound Coverage,” insert the following:

“The Committee requests a report within 90 days of enactment of this Act on the status of the program.”

On page 138, after the paragraph “Hold Harmless”, insert the following new paragraphs:

“Information Memorandum.—The Committee believes there is a need for additional transparency in the statutory formula distribution of LIHEAP funds. Therefore, the Secretary is encouraged to publish on its website an Information Memorandum for LIHEAP Appropriations and Regular Block Grant Allocations for fiscal year 2020. This will help provide grantees with relevant information concerning fiscal year 2020 LIHEAP funding.”

“Technical Assistance.—The Committee strongly encourages ACF to expand its use of contracts with nonprofit organizations with the fiscal expertise required for technical assistance, training, and monitoring of LIHEAP program activities, and to report back to the Committee within 90 days of enactment of this Act on efforts towards using nonprofit organizations in the future, in accordance with the authorizing legislation.”

On page 142, insert the following new first sentence after “*Data Reporting.*—”:

“The previous year’s experience between DHS and HHS revealed interoperability gaps and data reporting limitations in HHS’ online case management system.”

On page 148, after the “Family Violence Prevention and Battered Women’s Shelters” section, insert the following new section:

“Independent Living Training Vouchers

The Committee understands that foster and homeless youth experience increased burdens in accessing and completing higher education. The Committee is deeply concerned that access to

the Free Application for Federal Student Aid (FAFSA), federal financial aid, and other existing resources and programs, including TRIO and the Chafee Education and Training Voucher program, are not consistently available and that many children are not aware of these resources. Therefore, the Committee urges the Department of Education and ACF to work together with State and tribal welfare systems and runaway and homeless youth programs to conduct further outreach and disseminate information on financial aid, TRIO, and the Chafee program to these audiences. The Committee also requests that these resources be made available online so that foster youth can also access them.”

On page 157, strike the paragraph under the heading, “Investments in Impoverished Areas.”

On page 166, insert the following paragraph before the paragraph beginning with “Tuberculosis”:

“Blood Products.—The Committee remains concerned over the predicted platelet shortfall and vulnerability of the current blood supply, in the event of an emergency. Advanced blood products, e.g., freeze-dried platelets and plasma are key to insuring a national response capability in order to save lives. Next-generation blood products are needed. The Committee encourages the acceleration of the development of freeze-dried hemostatic products.”

On page 167, insert the following new paragraph after the paragraph beginning with “Forward Deployment”:

“Saline.—The Committee encourages ASPR to explore ways with industry to surge normal IV saline production capabilities for response efforts.”

On page 180, in the paragraph beginning “The competition is part of,” insert “report” after “National Commission on Social Emotional and Academic Development.”

On page 182, in the paragraph beginning “The Committee is concerned by a recent report,” insert “by the Network for Public Education, which finds” between “report” and “that.” Strike “between 2009 and 2016.”

On page 198, in the paragraph beginning “The Committee recommendation includes”, strike “Extended” and insert “Expanded”.

On page 201 of the Committee Report, after the last paragraph under “Student Aid opioiAdministration”, insert the following new paragraph:

“State and Nonprofit Subcontracting.— The Committee believes that State and nonprofit organizations can assist the current federal student loan servicers in providing important services to struggling borrowers who need access to more specialized support services throughout their postsecondary education to help them understand their financial decisions, and can appropriately act as advocates to help struggling borrowers understand the student loan repayment process and

options that may be available to them to help mitigate delinquencies and defaults. The Committee urges the Department of Education to explore incentives for federal student loan servicers to subcontract with qualified State and nonprofit organizations as well as small businesses.”

On page 213 of the Committee Report, in the paragraph beginning “Youth Apprenticeship Programs”, strike “The Department should” and insert “The report should include a”.

On page 213, strike the paragraph beginning “Investments in Impoverished Areas.—” and insert the following new paragraph:

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

On page 214, after the paragraph ending “and customer service measures.” insert the following:

*“Resources for Foster and Homeless Youth.—*The Committee understands that foster and homeless youth experience increased burdens in accessing and completing higher education. The Committee is deeply concerned that access to the Free Application for Federal Student Aid (FAFSA), federal financial aid, and other existing resources and programs, including TRIO and the Chafee Education and Training Voucher program, are not consistently available and that many children are not aware of these resources. Therefore, the Committee urges the Department of Education and the Department of HHS to work together with State and tribal welfare systems and runaway and homeless youth programs to conduct further outreach and disseminate information on financial aid, TRIO, and the Chafee program to these audiences. The Committee also requests that these resources be made available online so that foster youth can also access them.”

On page 221, under the Corporation for Public Broadcasting heading, after the last paragraph that begins with “*Continued Access to Public Broadcasting.*—” insert the following new paragraph:

“*Historic Preservation.*—The Committee encourages the Corporation to provide opportunities for documentaries that promote the importance of and educate the public on the historic preservation process.”

On page 229, replace the paragraph “Beneficiary Education” with the following:

“*Beneficiary Education.*—The Committee recommends SSA include more complete information on the basic coverage decision individuals must make when turning age 65 and enrolling in Medicare. Notifications and informational materials shared with individuals as they become Medicare-eligible or re-enroll in Medicare should clearly explain the basic decision that must be made when electing Medicare coverage. This information currently presents information on Medicare Parts A and B (or “Original Medicare”) but falls short in explaining the full options available to beneficiaries under Medicare, such as the opportunity to enroll in Part C and D, as well as supplemental coverage options (Medigap) should beneficiaries select Original Medicare. The Committee also recommends SSA include additional language to clarify the basic coverage options available to individuals provided on its website, www.ssa.gov/benefits/medicare and refer beneficiaries to CMS for more information on the benefits and limitations of coverage options.”

**Amendment to Labor, HHS, Education
Appropriations Bill, 2020
Offered by Chair DeLauro of Connecticut**

adopted vv

In the Bill:

On Page 7, line 25 insert “, grants, and cooperative agreements” after “contracts”.

On Page 7, line 25 strike “and local”.

On Page 8, line 1, after “intermediaries”, insert “, not less than 20 percent shall be for competitive contracts, grants, and cooperative agreements to local apprenticeship intermediaries,”.

On Page 43, line 2, after the dollar amount, insert “(increased by \$10,000,000)”.

And amend the report accordingly.

On page 45, line 1, strike the remainder of the provision following “Provided further,” and insert the following:

“That of the funds made available under this heading, \$20,000,000 shall be available to make grants to establish or expand optional community-based nurse practitioner fellowship programs that are accredited or in the accreditation process, with a preference for those in Federally Qualified Health Centers, for practicing postgraduate nurse practitioners in primary care or behavioral health.”

On Page 45, line 10, after the dollar amount, insert “(increased by \$10,000,000)”.

And amend the report accordingly.

On Page 51, line 11, after the dollar amount, insert “(increased by \$5,000,000)”.

And amend the report accordingly.

On Page 51, line 11, after the dollar amount, insert “(increased by \$2,000,000)”.

And amend the report accordingly.

On Page 53, line 13, after the dollar amount, insert “(increased by \$10,000,000)”.

And amend the report accordingly.

On Page 64, line 17, after the dollar amount, insert “(increased by \$1,000,000)”.

And amend the report accordingly.

On Page 64, line 17, after the dollar amount, insert “(increased by \$3,000,000)”.

And amend the report accordingly.

On Page 66, line 13, after the dollar amount, insert “(increased by \$10,000,000)”.

And amend the report accordingly.

On Page 80, line 20, after the first dollar amount, insert “(increased by \$20,000,000)”.

And amend the report accordingly.

At the end of Title II (before the short title), insert the following:

“Sec. ____ . None of the funds appropriated in this bill or otherwise made available to the Department of Health and Human Services shall be used to publish the proposed regulation in the Fall 2018 Unified Agenda of Regulatory and Deregulatory Actions relating to the Medicaid Nonemergency Medical Transportation benefit for Medicaid beneficiaries expected to be published for comment in May 2019 and promulgated in Fall 2019 (RIN: 0938-AT81).”

On Page 120, line 15, after the dollar amount “\$1,218,815,000”, insert “(increased by \$5,000,000)”.

On Page 120, line 18, after the dollar amount, insert “(increased by \$5,000,000)”.

And amend the report accordingly.

On Page 121, line 25, after the dollar amount, insert “(increased by \$5,000,000)”.

On Page 122, line 1, after the dollar amount, insert “(increased by \$5,000,000)”.

And amend the report accordingly.

On page 127, line 14, after the first dollar amount, insert “(increased by \$17,000,000)”.

On page 127, line 14, after the second dollar amount, insert “(increased by \$17,000,000)”.

And amend the report accordingly.

On page 129, line 24, after the dollar amount, insert “(increased by \$5,000,000)”.

And amend the report accordingly.

On page 148, line 14, after the dollar amount, insert “(increased by \$10,000,000)”.

And amend the report accordingly.

On page 151, line 14, after “January 1, 2013:”, insert:

“Provided further, That notwithstanding section 7(b)(9) of the Railroad Retirement Act, this limitation may be used to hire students attending qualifying educational institutions or individuals who have recently completed qualifying educational programs using current excepted hiring authorities established by the Office of Personnel Management.”

In the Report:

On page 15 of the Committee Report, insert the following new paragraph after the paragraph that begins “Therefore, the bill includes new language clarifying...”:

“As part of these opportunities, the Committee directs the Secretary to continue funding for business and labor industry partner intermediaries as part of the set asides for national and local intermediaries and ensure that labor intermediaries are given opportunities to apply for competitive grants, cooperative agreements, contracts, and other funding opportunities. The Committee urges the Secretary to ensure that States engage both business and labor as part of any State funding opportunities associated with this program.”

On page 42, strike the paragraph beginning with “Nurse Practitioner Residency and Fellowship Training Program” and insert the following:

*“Nurse Practitioner Optional Fellowship Program.—*The Committee includes an increase of \$20,000,000 to make grants to establish or expand optional community-based nurse practitioner fellowship programs that are accredited or in the accreditation process for practicing postgraduate nurse practitioners (NPs) in primary care or behavioral health. The Committee directs HRSA to give preference to Federally Qualified Health Centers (FQHCs), as defined by section 1861(aa)(4) of the Social Security Act. The Committee is concerned the nation is unprepared for healthcare provider shortages and recognizes that optional postgraduate programs with this focus, integrating primary care and behavioral health, will help to address this problem. Patients need expert primary care and behavioral health providers prepared to manage the social and clinical complexities experienced in FQHCs. A key focus of the program will be training and professional development in the integration of primary care and behavioral health. The program will provide optional fellowships for transitioning to an integrated model of care consistent with the current high standards of NP education and practice meeting the needs of our nation’s most vulnerable populations.”

On page 50 of the Committee Report, strike the second paragraph under the heading “Office of Pharmacy Affairs”.

On page 62 of the Committee Report, in the table relating to “Chronic Disease Prevention and Health Promotion”, on the “Alzheimer’s Disease” line delete “\$5,500,000” and insert “\$10,500,000”.

On page 62 of the Committee Report, insert the following new paragraph above “Arthritis”:

“Alzheimer’s Disease.—The Committee provides an increase of \$5,000,000 to build a robust Alzheimer’s and other dementias public health infrastructure across the country, as authorized by the Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer’s Act .”

On page 62 of the Committee Report, in the table relating to “Chronic Disease Prevention and Health Promotion, Safe Motherhood/Infant Health”, insert a new item “Sudden Unexpected Infant Death & Sudden Unexplained Death in Childhood”, with the dollar amount “\$2,000,000”.

On page 66 of the Committee Report, insert the following language at the end of the “Sudden Unexpected Infant Death and Sudden Unexplained Death in Childhood”:

“Furthermore, the bill includes \$2,000,000 for training grants to States, local governmental entities and nonprofits to improve the quality of death scene investigations and resulting prevention efforts, utilizing CDC training curriculum, with standardized forms and doll re-enactment.”

On page 76 of the Committee Report, in the table relating to “Global Health”, insert a new item relating to “Global Tuberculosis”, with the dollar amount “\$10,000,000”.

On page 76 of the Committee Report, insert the following new paragraph after “Global Health Security Strategy”:

“Global Tuberculosis.—The Committee provides an increase of \$10,000,000 above the fiscal year 2019 program level for Global Tuberculosis activities. These funds are intended to supplement, not supplant, existing funding provided through a transfer from Tuberculosis in the HIV/AIDS, Viral Hepatitis, STD and TB Prevention account to Global Tuberculosis in the Global Health account.”

On page 115 of the Committee Report, in the table relating to “Mental Health Programs of Regional and National Significance”, insert a new item relating to “Improving Mental Health on College Campuses” with the dollar amount “\$1,000,000”.

On page 115 of the Committee Report, insert the following new paragraph after “Criminal and Juvenile Justice Programs”:

“Improving Mental Health on College Campuses.—The Committee includes \$1,000,000 to plan, establish, and begin coordinating and evaluating a targeted public education campaign designed to increase access to mental health services for students at institutions of higher education, as well as to reduce the stigma associated with such services, as authorized by section 9033 of the 21st Century Cures Act (P.L. 114-255).”

On page 115 of the Committee Report, in the table relating to “Mental Health Programs of Regional and National Significance”, on the Suicide Lifeline line, delete “\$17,000,000” and insert “\$20,000,000”.

On page 116, under “Suicide Prevention”, insert the following language after “...families and friends of at-risk individuals.”:

“Given that LGBTQ youth are more than four times more likely to attempt suicide than their peers, and that one in five LGBTQ youth and more than one in three transgender youth report attempting suicide this past year, SAMHSA must be equipped to provide specialized resources to this at-risk community. The Committee urges SAMHSA to provide specific training programs for National Suicide Prevention Lifeline counselors to increase competency in serving LGBTQ youth through the utilization of existing specialized resources. The Committee also urges SAMHSA to consider the diversion of calls to specialty partners who are best situated to serve the LGBTQ community.”

On page 116 of the Committee Report under “Suicide Prevention” delete the second “\$5,000,000” related to the Suicide Lifeline and insert “\$8,000,000”. In addition, add the following language at the end of the paragraph:

“On August 14, 2018, the National Suicide Hotline Improvement Act (P.L. 115-233) was signed into law, which asked the Federal Communications Commission and SAMHSA to conduct a study examining the feasibility of designating a three-digit dialing code and provide overall recommendations for improving the National Suicide Prevention Lifeline (NSPL). SAMHSA has completed their portion of the study that reveals that the greatest challenges to the effectiveness of the Lifeline are its capacity to respond rapidly to the steadily increasing call volume and uneven coverage among States. A three-digit dialing code is anticipated to increase call volume, further exasperating these challenges. To address this issue, the Committee includes additional resources for the Suicide Lifeline to be used for grants to build capacity in States with the highest need. Additionally, the Committee requests that SAMSHA report in the fiscal year 2021 Congressional Budget Justification the following: answer rates from each State, average wait time per state, how the Lifeline Centers are funded State-by-State, State-based resources per capita, total amount of funds spent on the suicide prevention lifeline by State, and how Congress can support the Lifeline’s State-based capacity challenges as demand continues to grow.”

On page 119 of the Committee Report, in the table relating to “Substance Abuse Treatment”, insert a new item below “Strengthening Community Crisis Response Systems” titled “Comprehensive Opioid Recovery Centers” with the dollar amount “\$10,000,000”.

On page 119 of the Committee Report, insert the following new paragraph below the table:

“Comprehensive Opioid Recovery Centers.—The Committee includes \$10,000,000 to help ensure that people with substance use disorders can access proper treatment, as authorized by section 7121 of the SUPPORT Act. The Committee recognizes that there is a tremendous need for increasing access to coordinated, comprehensive care services that utilize the full range of FDA-approved medications and evidence-based treatments. These long-term care and support services dramatically improve outcomes for individuals and generate meaningful outcomes data to contribute to best practices for substance use disorders.”

On page 119 of the Committee Report, insert the following new paragraph prior to the paragraph beginning with “Drug Pricing Report”:

“Disproportionate Share Hospitals.—The Committee is concerned about the effect Disproportionate Share Hospitals (DSH) funding cuts will have on providers, patients, and communities nationwide. The Committee directs CMS to study the effects of the DSH cuts, under current law, on hospitals ability to furnish care for those uninsured and underserved, and to train and retain quality staff.”

On page 131 of the Committee Report, insert the following new paragraph after the paragraph beginning with “Medicare Simulation”:

“Medicare-reimbursable Expenses.—The Committee is concerned that CMS is considering regulations or guidance that would regulate the allocation of funds from a liability or no-fault related settlement, judgment, award, or other payment to pay for an individual’s future medical or future prescription drug treatment expenses that would otherwise be reimbursable by Medicare. The Committee urges the Agency not to promulgate a mandatory or voluntary regulation, which would be likely to harm Medicare beneficiaries, as well as the liability primary plan providers such as automobile, liability or no-fault insurers including those who self-insure.”

On page 144 of the Committee Report, in the table relating to “Children and Families Services Programs”, change “Community-Based Child Abuse Prevention” to \$75,000,000;

On page 147 of the Committee Report, in the paragraph relating to “Community-Based Child Abuse Prevention”, change the first and second dollar amounts to reflect a \$20,000,000 increase.

On page 183 of the Committee Report, under “Magnet Schools Assistance” insert “(increased by \$5,000,000)” after “\$120,000,000” and further amend the report accordingly.

On page 188 of the Committee Report, under “Preschool Grants” insert “(increased by \$5,000,000)” after “\$398,400,000” and further amend the report accordingly.

On page 193 of the Committee Report, under “Career and Technical Education: State Grants” insert “(increased by \$10,000,000)” after “\$1,300,000,000” and further amend the report accordingly.

On page 194 of the Committee Report, under “Adult Basic and Literacy Education State Grants” insert “(increased by \$7,000,000)” after “\$665,000,000” and further amend the report accordingly.

On page 207 of the Committee Report, under the heading “Fund for the Improvement of Postsecondary Education”, after the last paragraph, insert a new paragraph and further amend the report accordingly:

“In addition, the Committee includes \$5,000,000 to continue the Open Textbooks Pilot program. The Secretary is directed to award funds through a new competition, with individual grants amounting to not less than \$100,000 and not more than \$1,000,000.”

On page 222 of the Committee Report, after “Within the total for the Institute of Museum and Library Services (IMLS), the Committee recommends the following amounts:”, strike the table and insert the following new table:

Budget Activity	FY 2020 Committee
Library Services Technology Act:	
Grants to States.....	\$177,803,000
Native American Library Services.....	5,063,000
National Leadership: Libraries.....	13,406,000
Laura Bush 21 st Century Librarian.....	10,000,000
Museum Services Act:	
Museums for America.....	29,899,000
Native American/Hawaiian Museum Service.....	1,772,000
National Leadership: Museums.....	8,313,000
African American History and Culture Act:	
Museum Grants for African American History and Culture...	2,731,000
Museum and Library Services Act General Provisions:	
Research, Analysis and Data Collection.....	3,013,000
Program Administration.....	15,000,000

On page 222 of the Committee Report, under the heading “Program Administration”, insert “(increased by \$1,000,000)” after “\$14,000,000”.

Harris #1

adopted VU

**AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL
OFFERED BY MR. HARRIS OF MARYLAND**

At the end of the bill (before the spending reduction account), insert the following:

1 SEC. _____. (a)(1) The Secretary of Homeland Se-
2 curity, after appropriate consultation with the Secretary
3 of Labor and appropriate employers, shall develop,
4 through notice and comment rulemaking, a process to pro-
5 vide quarterly allocation of visas issued pursuant to peti-
6 tions submitted by employers for individuals to be admit-
7 ted under section 101(a)(15)(H)(ii)(b) of the Immigration
8 and Nationality Act (8 U.S.C. 1101(a)(15)(H)(ii)(b)).

9 (2) In developing the process described in paragraph
10 (1), the Secretary shall ensure that—

11 (A) all such petitions are submitted to the Sec-
12 retary not later than 45 days before the first day of
13 the quarter during which the requested beneficiaries
14 are expected to begin their employment with the em-
15 ployer; and

16 (B) all decisions to approve or deny a petition
17 are made not later than 15 days before the first date
18 of employment specified in the petition.

1 (b) Subject to subsection (c), for fiscal year 2021,
2 and every fiscal year thereafter, of the visas authorized
3 under section 214(g)(1)(B) of the Immigration and Na-
4 tionality Act (8 U.S.C. 1184(g)(1)(B)), the Secretary of
5 Homeland Security shall issue—

6 (1) not more than 14 percent to aliens whose employ-
7 ment is scheduled to begin during the first quarter of the
8 fiscal year;

9 (2) not more than 45 percent (plus any visas author-
10 ized, but not issued, under paragraph (1)) to aliens whose
11 employment is scheduled to begin during the second quar-
12 ter of the fiscal year;

13 (3) not more than 39 percent (plus any visas author-
14 ized, but not issued, under paragraphs (1) and (2)) to
15 aliens whose employment is scheduled to begin during the
16 third quarter of the fiscal year; and

17 (4) not more than 2 percent (plus any visas author-
18 ized, but not issued, under paragraph (1), (2), and (3))
19 to aliens whose employment is scheduled to begin during
20 the fourth quarter of the fiscal year.

21 (c) Not later than 2 years after the date of the enact-
22 ment of this Act, and every 2 years thereafter, the Sec-
23 retary of Homeland Security, in the Secretary's sole and
24 unreviewable discretion, and after consultation with the
25 Secretary of Labor, shall—

1 (1) compare the quarterly allocation of visas under
2 subsection (b) to the actual need for individuals to be ad-
3 mitted under section 101(a)(15)(H)(ii)(b) of the Immigra-
4 tion and Nationality Act (8 U.S.C. 1101(a)(15)(H)(ii)(b))
5 in each quarter; and

6 (2) adjust the quarterly allocation of such visas ac-
7 cordingly.

8 (d) For each calendar quarter subject to the visa allo-
9 cation process set forth in subsection (b) or (c), if the total
10 number of visas requested by employers whose petitions
11 meet the standards for approval exceeds the total number
12 of visas available for such employers, the Secretary shall
13 ensure that each such petition is approved for a minimum
14 number of visas, which shall be calculated based on the
15 ratio between the total number of visas requested by such
16 employers and the total number of visas available.

17 (e) Effective October 1, 2020, section 214(g)(10) of
18 the Immigration and Nationality Act (8 U.S.C.
19 1184(g)(10)) is repealed.

20 (f) Section 214(e)(14)(C) of the Immigration and
21 Nationality Act (8 U.S.C. 1184(e)(14)(C)) is amended to
22 read as follows:

23 “(C) In determining the level of penalties to be as-
24 sessed under subparagraph (A), the highest penalties shall
25 be reserved for—

1 “(i) willful failures to meet any of the condi-
2 tions of the petition that involve harm to United
3 States workers; and

4 “(ii) willful misrepresentations of the number of
5 necessary nonimmigrants in an application for tem-
6 porary labor certification in support of a petition for
7 nonimmigrants described in section
8 101(a)(15)(H)(ii)(b).”.

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Graves #1

Adopted
✓

Amendment to Labor, HHS, Education

Appropriations Bill

Offered by Mr. Graves of Georgia

At the end of the bill (before the short title), insert the following:

Sec. _____. None of the funds made available by this Act may be used to replace or diminish the quality of care provided by Medicare Advantage (as established in Title 42, Chapter 7, Subchapter XVIII, Part C of the United States Code) and the TRICARE program (as defined in Section 1072 of Title 10 of the United States Code).

Lee # 1
adopted 30-23

**AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS
OFFERED BY MS. LEE OF CALIFORNIA**

At the end of title II (before the short title) insert
the following new section:

- 1 SEC. _____. None of the funds made available by this
- 2 Act may be used to finalize, implement, or enforce the rule
- 3 entitled "Protecting Statutory Conscience Rights in
- 4 Health Care; Delegations of Authority" issued by the De-
- 5 partment of Health and Human Services (RIN 0945-
- 6 AA10).



Harris #3

Amendment Proposed by Dr. Harris

Departments of Labor, Health and Human Services, Education

and Related Agencies Appropriations, 2020

adopted

On page 94, line 11, strike "\$620,000,000" and insert "\$920,000,000"

On page 110, line 4, strike "\$4,000,000,000" and insert "\$4,300,000,000"