

**MANAGER’S AMENDMENT TO LABOR/HHS/
EDUCATION APPROPRIATIONS BILL
OFFERED BY MS. DELAURO OF CONNECTICUT**

In the Bill:

On page 13, line 10, strike “\$2,866,214,000” and insert “\$3,125,214,000”.

On page 56, line 25, strike “\$1,300,000” and insert “\$13,000,000”.

At the end of title V, insert the following:

1 “SEC. _____. None of the funds made available by this
2 Act may be made available to the Wuhan Institute of Vi-
3 rology located in the City of Wuhan in the People’s Repub-
4 lic of China.”

5 “SEC. _____. None of the funds made available by this
6 Act may be used, either directly or indirectly, to conduct
7 or support any gain-of-function research involving a poten-
8 tial pandemic pathogen by a foreign adversary including
9 China, Russia, Iran, and North Korea.”

In the Report:

On page 43, before the paragraph beginning with “*Veterans’ Pilot Program*”, insert the following new paragraph:

Military Spouse Occupational License and Certification Portability.—The Committee encourages the Department of Labor to work with states to encourage them to implement occupational license and certification portability measures for military spouses through full license recognition. The current framework for license and certification portability often poses a barrier to employment, and this is particularly problematic for military spouses as they frequently are required to relocate due to the nature of their spouse’s military employment. The number of jobs that require a license has steeply risen from 5 percent in the 1950s to 30 percent today. The increase in licensing requirements and frequent moves contribute to the high unemployment rate of military spouses, currently at 24 percent. Addressing this issue demonstrates the Committee’s appreciation for the service of military members and the sacrifices their families make on a daily basis.

On page 54, in the paragraph beginning with “*Nurse Practitioner/Physician Assistant Optional Fellowship Program*”, strike “*/Physician Assistant*”.

On page 56, after the first paragraph under the heading “*Maternal and Child Health (MCH) Block Grant*”, insert the following new paragraph:

“The Committee recommends that HRSA continue to support MCH Block Grant partnerships with Federal and State partners to address gaps in services to mothers, children, and their families in all 50 States, the District of Columbia, and the territories; including densely populated Medically Underserved Areas and Medically Underserved Population designated Health Professional Shortage Areas.”

On page 61, in the paragraph beginning with “*Maternal Mortality*”, in the fourth sentence, insert at the end:

“, including those in rural areas and maternal and infant care deserts”.

On page 71, in the 12th item in the table, after “Asian American Health Coalition”, insert “of Greater Houston”.

On page 71, in the 13th item in the table, after “Asian American Health Coalition”, insert “of Greater Houston”.

On page 73, in the 5th item in the table, strike “—
College of DuPage”.

On page 73, in the 37th item in the table, strike
“Community Health”.

On page 73, in the 46th item in the table, strike
“145,000” and insert “1,450,000”.

On page 74, in the 1st item in the table, strike
“Ferd & Gladys Alpert Jewish Family & Children’s Serv-
ice” and insert “Jewish Family and Children’s Service of
Palm Beach County”.

On page 74, in the 33rd item in the table, strike
“Health System”.

On page 76, in the 51st item in the table, strike
“Sixith” and insert “Sixteenth”.

On page 77, in the 32nd item in the table, strike
“Health System Inc.” and insert “Cleveland Medical
Center”.

On page 77, in the 35th item in the table, strike
“San Francisco—Fresno” and insert “(San Francisco)
Fresno Regional Campus”.

On page 77, in the 45th item in the table, strike
“Health Sciences Center”.

On page 101, before the paragraph entitled “*Rape Prevention*”, insert the following new paragraph:

“*Public Health Approach to Violence.*—The Committee notes House Report 116–450 directed CDC to provide a report under this heading. The Committee is still awaiting this report and looks forward to its submission.”

On page 104, in the paragraph beginning with “*Population-based Surveillance Platforms*”, strike “3” and insert “5”.

On page 109, before the paragraph beginning “*Deadliest Cancers*”, insert the following new paragraph:

“*Colorectal Cancer Disparities.*—Given the impact that screening can have on reducing mortality and morbidity in colorectal cancer, the Committee encourages NIH to study the impact of the COVID–19 pandemic on the incidence of colorectal cancer in minority communities. The Committee is hopeful that such information will provide policymakers with a better understanding of the effects on minority communities and help develop strategies to address barriers to screening and reduce health inequities and cancer deaths.”

On page 122, before the paragraph beginning with “*Opioid and Stimulant Research*”, insert the following paragraph:

“*Multiple Sclerosis (MS)*.—The Committee encourages NINDS to prioritize studies that develop the medical understanding of the progression of MS and advance research on prevention strategies, treatments, and cures for MS.”

On page 122, after the paragraph beginning with “*Mission*”, insert the following paragraph:

“*Antiviral Drugs and Pandemic Preparedness*.—The Committee strongly encourages NIAID efforts to establish a public-private partnership focused on global pandemic preparedness and antiviral drug discovery, in coordination with BARDA. Such a partnership could leverage the best of academia and pharmaceutical manufacturers to develop broad-spectrum antiviral drugs to address rapidly emerging public health threats, helping our nation be better prepared for the next global pandemic. The Committee directs NIAID to provide an update on this and any related efforts in the fiscal year 2023 Congressional Budget Justification.”

On page 140, strike the paragraph beginning with “*Rural Health*” and insert the paragraph on the same

page after the paragraph beginning with “*Health Disparities Research*”.

On page 144, after the paragraph beginning with “*Adult Cellular Therapies*”, insert the following paragraph:

“*Advancing Cell-Based Therapies*.—The Committee recognizes that adult cell-based therapies hold promise for a broad range of conditions, including neurological conditions, musculoskeletal conditions, cancer, radiation damage, cardiovascular disease, diabetes, wound healing, and immunological disease, including COVID–19. While results of early clinical studies are promising, the primary barrier to advancing such therapies is the significant cost of conducting large-scale, randomized clinical trials—especially among academic and research institutions and small biotechnology companies—which are a precursor to bringing safe and effective therapies to patients.

Therefore, the Committee directs NIH to develop and submit a report within 180 days of enactment of this Act that describes current NIH funding for adult cell-based therapies, disaggregated by Institute and Center, and plans to support and expand investments in such therapies. Such report shall describe plans to support clinical trials; the characterization, optimization, and

scaling of manufacturing of cell-based therapies; and collaborative evidence development, including the development and operation of an outcomes database. The Committee encourages NIH to consult outside experts, including researchers who have conducted clinical trials involving adult cell-based therapies, to inform its activities related to cell-based therapies.”

On page 144, after the paragraph beginning with “*All of Us Program*”, insert the following new paragraph:

“The All of Us initiative is a historic effort to collect data from over one million people living in the U.S. to accelerate research and improve health and serves as a national research resource to support thousands of studies, spanning various health conditions including COVID–19. More than 75 percent of these participants are from communities historically underrepresented in biomedical research, and more than 50 percent are from racial and ethnic minority groups. The Committee encourages NIH to increase its outreach through a network of trusted community engagement partners to continue enrollment of participants from diverse and underserved populations.”

On page 146, before the paragraph beginning with “*Black Men and Women pursuing Medicine and Science*”, insert the following paragraph:

“*Biosafety Labs.*—The Biosafety in Microbiological and Biomedical Laboratories (BMBL) recommends as a special practice the reporting of all laboratory incidents and near misses in Biosafety Lab (BSL) BSL–3 and BSL–4 laboratories. The Committee directs NIH to ensure all funding for BSL–3, BSL–4, high containment laboratory, or any entity involved in managing Hazardous Biological Agents both foreign or domestic maintains up to date, comprehensive policies, to promote optimal Biosafety and Biosecurity practices. Such policies must reference (1) incident reporting, (2) roles and responsibilities, (3) training, (4) inventory control, and (5) inspections and must be reported to NIH and/or related agencies.”

On page 150, before the paragraph beginning with “*Foreign Threats to Research*”, insert the following paragraph:

“*Foreign Animal Research.*—The Committee requests additional information in the fiscal year 2023 Congressional Budget Justification about how NIH monitors and ensures foreign institutions’ compliance with

applicable laws, regulations, and policies governing NIH-funded animal research.”

On page 158, in the second to last paragraph, strike “CIO” and insert “Chief Officer” in both places it appears.

On page 161, before the paragraph beginning with “*Sickle Cell Disease (SCD)*”, insert the following new paragraph:

“*SARS-CoV-2 Genomic Sequence Data.*—The Committee is concerned by reports that early SARS-CoV-2 genomic sequence data from China, specifically the Wuhan region, were withdrawn from the Sequence Read Archive (SRA) at the National Institutes of Health. The Committee is aware of allegations that the Chinese Communist Party has refused to provide raw data to international scientists and the World Health Organization to impede the investigation into the origins of Covid-19. From the beginning of the pandemic, there have been suggestions that the Chinese Communist Party barred scientists from releasing data and even delayed the release of the genetic map of the virus to the world. The Committee understands that it is difficult to identify, early in pandemics, what data may be most relevant because of the disperse nature of initial reports and the un-

certainty surrounding an emerging virus—however, some scientists have cited difficulties in studying the origins of the virus due to a lack of early data from Wuhan. Furthermore, the Committee is aware that there are legitimate reasons to request the withdrawal of genomic sequence data from SRA, including insufficient data quality and incomplete consent procedures, however, the early sequence data at issue here may be key to understanding the origin of SARS-CoV-2. Within 30 days of the enactment of this Act, the Director of the National Institutes of Health shall report to the Committee on the withdrawal of SARS-CoV-2 genomic sequence data from the Sequence Read Archive. The report should include the total number of requests for withdrawals of SARS-CoV-2 data broken down by institution, the number of sequences that were subsequently withdrawn from the SRA, the reasons provided by the institution for the request for withdrawal, any characteristics provided for the sequences and other pertinent information, as well as any pending requests for SARS-CoV-2 genomic sequence withdrawals.”

On page 163, at the end of the second paragraph, insert the following:

“The Committee looks forward to working with the Administration to establish ARPA-H and expects to expand

its capacity to support innovative projects in future fiscal years.”

On page 163, in the fourth paragraph, strike the following sentence:

“To facilitate this unique culture, the Committee recommends that ARPA–H be housed outside of NIH’s main campus in Bethesda, MD.”

On page 181, in the 32nd item in the table, strike “CommuniCare Health Centers, Davis, CA” and insert “Adventist Health System West, Roseville, CA”.

On page 187, in the paragraph beginning with “Patient Safety Risks and Harms”, strike “1,000,000”, and insert “8,000,000”.

On page 202, after the paragraph beginning with “*Telehealth for Pediatric ESRD*”, insert the following new paragraph:

“*Zero Trust Program.*—The Committee encourages CMS to increase support for the Zero Trust Program for CMS health information and data security modernization to address, mitigate, and reduce security risks.”

On page 240, before the paragraph beginning with “*Telehealth Standards*”, insert the following new paragraph:

Teacher Stress.—The Committee is concerned about the high levels of stress our nation’s teachers have gone through both before and during the COVID–19 pandemic. The Committee directs the Secretary, in coordination with the Secretary of Education, to conduct a study within one year of enactment of this Act on teacher stress and increasing teacher retention and well-being. This study should look at the effectiveness of some of the following programs in reducing stress and increasing retention: workplace wellness programs that improve teacher health, social emotional learning programs, mentoring and induction programs for teachers throughout the year, other evidence based approaches to reducing stress and increasing well-being.

On page 240, at the end of the paragraph “*U.S.-Mexico Border Health Commission*,” insert the following:

“Further, the Committee urges the Secretary to build upon the framework established by Healthy Border 2020 for border region public health goals and the actions needed to improve the health of U.S. and México border residents, and to commence work on Healthy Border 2030 as part of the Department’s Healthy People 2030 initiative with a focus on addressing health disparities and to help border communities become more resilient to public health threats.”

On page 241, before the paragraph entitled “*Zoonotic and Vector-Borne Disease Prevention, Early Detection, and Warning System Strategy*”, insert the following new paragraph:

“*White House Initiative on Asian Americans, Native Hawaiians, and Pacific Islanders (AANHPI)*.—The Committee includes funding to support the White House Initiative on Asian Americans, Native Hawaiians, and Pacific Islanders, led by the Secretary of HHS, to advance health equity and economic justice for AANHPI communities that continue to face racism, nativism, and xenophobia.”

On page 247, after the paragraph beginning with “*Disability Ombudsperson*”, insert the following new paragraph:

“*Rehabilitation Act*.—The Committee directs the Secretary to fully enforce the Rehabilitation Act of 1973 and the Americans with Disabilities Act. The Committee requests a report within 180 days of enactment of this Act on enforcement of section 504 of the Rehabilitation Act. Where available, the Department shall disaggregate data by age.”

On page 248, before the paragraph entitled “*Cold Chain Technologies*”, insert the following new paragraph:

“BARDA and BioShield Professional Judgement Budget.—The Committee directs ASPR to submit a report to the Committee in conjunction with the fiscal year 2023 Congressional Budget Justification detailing a professional judgement on the necessary budget and infrastructure requirements to fully operationalize these programs in fiscal year 2023. This report shall also include an assessment of current agency capabilities, as well as current and planned activities related to pandemic preparedness.”

On page 258, in the fourth paragraph under the heading *“Grants to Local Educational Agencies”*, insert the following at the end of the paragraph: “which the number of low-income children exceeds 6,500 or 15 percent of the total school age population.”

On page 261, under the heading *“State Agency Programs: Neglected and Delinquent”*, strike “48,864,000” and insert “48,239,000” and strike “proposes to eliminate this program”.

On page 276, in the 33rd item in the table, strike “Maros” and insert “Marcos”.

On page 293, before the paragraph beginning *“Graduation Rates”*, insert the following new paragraph:

GAO report on Hispanic Serving Institution (HSI) Facilities.—The Committee recognizes the importance of underrepresented groups having access to institutions of higher education that promote student achievement, workforce development, and career opportunities. As such, the Committee directs the GAO to provide a report to the Committee on infrastructure needs—both physical and digital—at HSIs. In this report, the GAO should include, but is not limited to, a review and analysis of the condition of HSI facilities, capital financing challenges facing HSIs, and how to help HSIs better serve Hispanic communities. The Committee expects to receive regular updates from GAO about the status of the report and any initial critical findings that would allow the Committee to address the financial needs of HSIs.

On page 295, in the second paragraph under the header “*Strengthening Alaska Native and Native Hawaiian-Serving Institutions*”, insert “*Native*” before “*Hawaiian-Serving Institutions*”.

On page 297, under the header “*Minority Science and Engineering Improvement*”, strike “the same as” and insert “\$7,930,000 more than”.

On page 299, under the heading, “*Centers of Excellence for Veteran Student Success Program*”, strike “*Vet-*

eran Student” and insert “Student Veteran” in each place it appears.

On page 302, in the 30th item in the table, strike “1,500,000” and insert “350,000”.

On page 303, in the 14th item in the table, strike “350,000” and insert “1,500,000”.

On page 304, in the second paragraph under the heading “Howard University”, strike “notes the need” and insert “includes \$150,000,000”.

On page 321, under the heading “Program Administration”, strike “1,500,000” and insert “1,000,000”.

On page 340, in the 7th item in the table, strike “1,500,000” and insert “350,000”.

On page 341, in the 14th item in the table, strike “350,000” and insert “1,500,000”.

On page 344, in the 18th item in the table, after “Asian American Health Coalition”, insert “of Greater Houston”.

On page 345, in the 1st item in the table, after “Asian American Health Coalition”, insert “of Greater Houston”.

On page 348, in the 15th item in the table, strike “—College of DuPage”.

On page 350, in the 10th item in the table, strike “Community Health”.

On page 351, in the 2nd item in the table, strike “145,000” and insert “1,450,000”.

On page 351, in the 12th item in the table, strike “Ferd & Gladys Alpert Jewish Family & Children’s Service” and insert “Jewish Family and Children’s Service of Palm Beach County”.

On page 353, in the 7th item in the table, strike “Health System”.

On page 354, in the 4th item in the table, strike “K?kua” and insert “Kokua”.

On page 355, in the 12th item in the table, strike “Department of Education” and insert “Department of Health & Human Services”; and strike “Higher Education” and insert “Health Resources and Services Administration—Program Management”.

On page 360, in the 14th item in the table, strike “Sixith” and insert “Sixteenth”.

On page 362, in the 15th item in the table, strike “Health System Inc.” and replace with “Cleveland Medical Center”.

On page 363, in the 1st item in the table, strike “San Francisco—Fresno” and replace with “(San Francisco) Fresno Regional Campus”.

On page 363, in the 11th item in the table, strike “Health Sciences Center”.

On page 367, in the 10th item in the table, strike “CommuniCare Health Centers, Davis, CA” and insert “Adventist Health System West, Roseville, CA”.

