AMENDMENTS TO THE LABOR, HEALTH AND HUMAN SERVICES, EDUCATION, AND RELATED AGENCIES APPROPRIATIONS BILL FY2023

Full Committee Markup
House Appropriations Committee
June 30, 2022
Labor, Health & Human Services, Education, and Related Agencies Appropriations Bill, Fiscal Year 2023

Full Committee Mark Up

Chair DeLauro Manager’s Amendment

June 30, 2022

In the Bill:

On page 117, line 9, insert “IN GENERAL.—” after “(a)”.

On page 118, lines 1-6, strike subsection (b) and insert the following:

(b) CLARIFYING THE DEFINITION OF ‘SCREENING MAMMOGRAPHY’.—Section 1861(jj) of the Social Security Act (42 U.S.C. 1395x(jj)) is amended by inserting “, including any digital modality (such as screening breast tomosynthesis) of such a procedure,” after “radiological procedure”.

At the end of title V, insert the following:

Sec. ___. None of the funds made available by this Act may be made available to the Wuhan Institute of Virology, or any other laboratory located in a country determined by the Secretary of State to be a foreign adversary, including China, Russia, North Korea, and Iran.

At the end of title V, insert the following:

Sec. ___. None of the funds made available by this Act may be used to purchase, procure, or distribute pipes or similar cylindrical objects for use in smoking or inhaling any controlled substance in schedule I of the Controlled Substances Act (21 U.S.C. 801 et seq.).

In the Report:

On page 13, before the first full paragraph, insert the following new paragraph:

The Committee provides $45,000,000 for the Workforce Opportunity for Rural Communities program, to provide enhanced worker training in the Appalachian, Delta, and Northern Border regions.

On page 13, before the paragraph beginning with “Native Americans”, insert the following new paragraph:

The Committee supports efforts by organizations to advance worker training for individuals who are survivors of abuse, abandonment, or trauma. The Committee further
supports worker training projects that provide wraparound services to these individuals and recognizes the value and need to support the “whole” worker, including access to new clothing, shoes, home essentials, family hygiene items, relevant worker resources, and life skill classes to foster healing and create long-term goals.

On page 23, following the paragraph beginning with “Justice Involved Workers”, insert the following new paragraph:

Regional Councils and Councils of Governments.—The Committee encourages the Department to list regional councils and councils of governments as eligible entities in competitions for Federal funding whenever local governments or non-profit agencies are eligible entities. Furthermore, the Committee encourages the Department to seek opportunities for regional councils and councils of governments to serve as lead applicants and grantees to encourage and expand greater regional collaboration.

On page 34, following the paragraph beginning with “Military Spouses”, insert the following new paragraph:

BLS Data Collection Sources.—The Committee recognizes the value and importance of real-time economic data for the purpose of identifying economic trends and consumer sentiment. Further, as the Department prepares future solicitations for economic data and research, the Committee encourages the Department to conduct robust market research to identify potential new market entrants.

On page 43, in the paragraph beginning with “Alcee L. Hastings”, in the last sentence, strike the word “tobacco”.

On page 46, after the paragraph beginning with “Grant-Based Program...”, insert the following new paragraph:

Addressing Workforce Shortages.—The Committee supports HRSA’s efforts to develop the workforce needed to care for a rapidly aging U.S. population. The Committee encourages HRSA to address the skilled care workforce needs of seniors through existing workforce education and training programs.

On page 64, before the header Rural Health Flexibility Grants, insert the following new paragraph:

Rural Health Research Centers.—In the next competition for Rural Health Research Centers, the Committee strongly encourages the Federal Office of Rural Health Policy to prioritize States that have not previously hosted such a center. The Committee supports centers in areas that have a demonstrated collaborative partnership with research and education in the pharmacological and physician space. Further, the Committee strongly encourages the Office to explore establishing a center which encompasses research related to biomedical and cancer
research, opioid abuse, delivery of rural healthcare, and training for rurally focused residency programs.

On page 71, in the paragraph beginning with “Improving Immunization Information System Infrastructure and Data”, after “The Committee encourages CDC” insert “to engage with States and local jurisdictions to assess gaps and greatest areas of need” and after “levels needed to capture” insert “reliable, complete, real-time”.

On page 72, before the paragraph beginning with “Ending the HIV Epidemic Initiative”, insert the following new paragraph:

Access to PrEP.—The Committee notes the importance of expanding HIV pre-exposure prophylaxis (PrEP) nationally to improve access to medications and essential support services, community and provider outreach, to make progress towards ending the HIV epidemic.

On page 75, in the paragraph beginning with “Vector-Borne Diseases”, insert the following sentence after “The Committee includes an increase of $12,000,000 for enhanced vector-borne disease activities, including Lyme Disease and tickborne diseases.”:

The Committee includes funding to support training and the development of communities of practice in vector-borne disease prevention and control for the regions of the U.S. that account for the largest burden of vector-borne disease.

On page 79, before the paragraph beginning with “Inflammatory Bowel Diseases”, insert the following new paragraph:

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

On page 81, in the paragraph beginning with “Tobacco”, insert the following at the end:

In addition, the Committee encourages CDC, in consultation with the Food and Drug Administration (FDA), Director of the Center for Tobacco Products, and any other relevant agency, to develop an additional question on National Youth Tobacco Survey to assess youth consumption of premium cigars. For purposes of this section, the term premium cigar shall be the definition agreed upon by DOJ, FDA and industry in the case of Cigar Association of America vs. FDA.

On page 88, in the paragraph beginning with “Opioid Abuse and Overdose Prevention”, insert the following at the end:
In addition, the Committee requests an update in the fiscal year 2024 Congressional Budget Justification on the percentage of funding provided to local communities for each entity receiving funds under this heading.

On page 104, following the paragraph beginning with “Developing gene therapies”, insert the following new paragraph:

_Harmful Algal Blooms._—The Committee strongly encourages NHLBI to support research to address the human health concerns of cyanotoxin exposure from harmful algal blooms and emergent chemicals of concern, and particularly the need for research directed on health issues relating to aerosolized exposure to water contaminated with HABS and ECC toxins. This research could take advantage of unique laboratory facilities at the Nation’s national laboratories and prioritize new preventative, diagnostic, and therapeutic strategies to combat the harmful health effects of airborne HAB and ECC toxin exposure, especially in vulnerable, at-risk populations.

On page 108, in the paragraph beginning with _Pain Management Research_, in the last sentence, strike “NIDCR” and insert “NIDDK”.

On page 148, before the paragraph beginning with “Maternal Health Research”, insert the following new paragraph:

_Maintenance of Chimpanzees on US Air Force Bases._—When Congress passed the CHIMP Act, it intended for all chimpanzees owned by NIH to be retired to a sanctuary. Despite this, in 2019 NIH announced 44 chimpanzees housed at the Alamogordo Primate Facility (APF) and in 2021 announced that another 51 chimpanzees from the Keeling Center for Comparative Medicine and Research (KCCMR) would not be transferred to Chimp Haven, the national sanctuary. The Committee has previously noted in its fiscal year 2022 report that the chimpanzees must be provided an opportunity to live the remainder of their lives in the national sanctuary. As such, the Committee strongly urges NIH to reevaluate the remaining animals at APF, KCCMR and the Southwest National Primate Research Center (SNPRC) and assess options for their transport to the national sanctuary. The Committee also directs NIH to provide a written report to the Committee each quarter, beginning no later than January 31, 2023 that shall include: (1) the number of chimpanzees transported to the national sanctuary over the last quarter; (2) a census of all government-owned and supported chimpanzees remaining, if any, at APF, KCCMR or SNPRC and results of any reevaluations of their health; and (3) a list of any chimpanzee deaths that have occurred at any time after January 1, 2022 at APF, KCCMR or SNPRC.
On page 152, following the paragraph beginning with “Office of the Chief Officer for Scientific Workforce Diversity”, insert the following new paragraph:

_Osteopathic Medical Schools._—The Committee recognizes that increased access to research funding for the osteopathic profession will bolster NIH’s capacity to support recovery from the COVID-19 pandemic, address health disparities in rural and medically-underserved populations, and advance research in primary care, prevention, and treatment. The Committee requests an update on the current status of NIH funding to colleges of osteopathic medicine and representation of doctors of osteopathic medicine on NIH National Advisory Councils and standing study sections in the fiscal year 2024 Congressional Justification.

On page 153, after the paragraph beginning with “Prion Disease”, insert the following two new paragraphs:

_Psychedelic Research._—The Committee encourages NIH to assess opportunities for further private-public partnerships on researching the use of psychedelic drugs to treat posttraumatic stress disorder and major depressive disorders and provide a report within six months of enactment of this Act on the feasibility of providing potential dedicated researching funding for such partnerships.

_Psychedelic Treatments._—Despite the recent Department of Veterans Affairs’ 2020 National Veteran Suicide Prevention Annual Report that showed there were no significant increases in the veteran suicide rate from 2017 and 2018, the Committee is concerned that over 17 veterans on average continue to commit suicide each day, which is a number that has remained persistent over the past decade. There have been many recent studies and clinical trials demonstrating the positive impact of alternative therapies, including psychedelics, for treatment-resistant PTSD and major depressive disorder, particularly for veteran participants. Further, U.S. academic research institutions are involved in investigating psychedelic treatments, including Johns Hopkins University, Harvard University, Yale University, New York University and Baylor University. In light of growing interest in this area, the Committee encourages NIH and other relevant Federal agencies to undertake, and where appropriate expand, research to evaluate the effectiveness of psychedelic therapies in treating PTSD, major depressive disorder, and other serious mental health conditions.

On page 164, at the end of the paragraph beginning with “Behavioral Health Intervention Training”, insert the following new sentence:

SAMHSA shall also provide technical assistance to institutions of higher education, elementary schools, and secondary schools to assist such institutions and schools in implementing the best practices.
On page 170, following the paragraph beginning with “Block Grant Reporting Requirements”, insert the following new paragraph:

Fentanyl Awareness Education.—The Committee notes that the SUBG may be used to develop educational materials related to the dangers of fentanyl, including the lethality of small quantities.

On page 180, following the paragraph beginning with “Disproportionate Share Hospitals”, insert the following new paragraph:

Domestic Manufacturing.—The Committee recognizes the importance of ensuring a robust U.S. manufacturing base and domestic supply chain to support Federal health programs. Therefore, the Committee urges CMS to develop and implement a pilot or demonstration program to identify innovative payment and reimbursement policies within Federal health care programs, including Medicare, Medicaid, and CHIP, to support the utilization of U.S. manufactured generic and biosimilar medications to ensure increased access and utilization of life-saving and life-changing drugs.

On page 183, before the paragraph beginning with “Maximizing Deceased Donor Organ Recovery, Acceptance, and Utilization”, insert the following new paragraph:

Lowering the Cost of Care.—The agreement continues to encourage CMMI to consider creative pilot projects that lower the cost of care among older Americans and enable individuals who retire overseas to retain and utilize their Medicare primary healthcare benefits. The pilot should consider potential cost savings involving international collaborations where the quality of care is comparable and less expensive. The Committee requests an update on this effort in the fiscal year 2024 Congressional Budget Justification.

On page 189, in the paragraph beginning with “Robotic Stereotactic Radiosurgery”, insert the following after “outpatient setting”:

, including in both traditional fee-for-service Medicare as well as in the context of any alternative payment models developed by CMS.

On page 190, following the paragraph beginning with “Social Determinants of Health Analytics”, insert the following new paragraph:

Sole Community Hospitals.—The Committee appreciates that CMS, during the COVID-19 public health emergency (PHE), waived distance requirements to ensure Sole Community Hospitals were able to focus on maintaining access to needed health care services for Medicare beneficiaries. The Committee encourages CMS to consider utilizing its regulatory flexibilities to provide a transition period for hospitals that may have fallen out of compliance with Sole Community Hospital requirements during the PHE.
On page 191, in the paragraph beginning with “Transportation for Dialysis”, insert “strongly” in the first sentence before “urge” and insert the following at the end:

The Committee further requests a plan within 90 days of the date of enactment of this Act to provide alternative transportation to the low-income Medicare-Medicaid full and partial dual eligibles who have no alternative transportation to dialysis and diabetes wound care services.

On page 203, before the paragraph “Quality Improvement Funding”, insert the following:

_Migrant and Seasonal Head Start._—The Committee is concerned by reports that an increasing number of farmworker families with young children are finding it difficult to qualify for Migrant and Seasonal Head Start (MSHS) services despite regulatory flexibilities available to the program in the Head Start Act. The Committee is concerned that 2019 enrollment data indicates that MSHS programs may not be utilizing these flexibilities to the maximum extent allowable and urges the Secretary to continue to work with individual MSHS programs to maximize flexibilities related to income eligibility where under-enrollment is an issue. Within 120 days of enactment of this Act, the Committee directs OHS to provide a comprehensive list of the MSHS programs reporting under-enrollment in fiscal years 2021 and 2022 and to include program specific data on the percent of enrollees determined eligible by the allowable flexibilities (as outlined in the Report to Congress on Head Act Eligibility, April 2022), so that the Committee can better understand the eligibility issues facing MSHS programs and can continue to discuss any further actions that may be necessary.

On page 203, after the paragraph under the heading “Preschool Development Grants”, insert the following:

The Committee encourages ACF to continue to support States that choose to use a portion of their renewal grant funding to award sub-grants to programs in a mixed delivery system across the State, particularly for low-income and disadvantaged children prior to entering kindergarten, or to improve the quality of local programs through the enhancement of early childhood systems.

On page 204, replace the sentence following with “_Child Abuse Hotline._—”, with the following:

The recommendation includes $2,000,000 for ongoing support for a national child abuse hotline to provide resources and intervention in all modalities, including chat, text, and call, to provide comprehensive capabilities to serve both youth and concerned adults facing child abuse and neglect.

On page 221, following the paragraph beginning with “KidneyX”, insert the following new paragraph:
Local News Media.—The Committee encourages the Department to utilize local broadcasters and local newspapers, including those in small communities, in their public affairs Federal advertising campaigns. The Committee requests an update in the fiscal year 2024 Congressional Budget Justification on the Department’s public affairs advertising campaigns by percentage of Federal funding spent on social media, national media, local news media, and outdoor advertising during fiscal years 2021 and 2022. In addition, the Committee encourages the Department’s Office of the Assistant Secretary for Public Affairs, in consultation with other relevant offices, to consider a pilot project focusing on Federal advertising effectiveness in rural communities—with populations under 40,000 individuals or fewer than 20,000 households—utilizing local news media, including broadcast, radio, and non-daily newspapers, whose involvement in advertising campaigns and message delivery can assist in reaching under-served rural areas.

On page 223, following the paragraph beginning with “Rare Kidney Diseases”, insert the following new paragraph:

Regional Councils and Councils of Governments.—The Committee encourages the Department to list regional councils and councils of governments as eligible entities in competitions for Federal funding whenever local governments or non-profit agencies are eligible entities. Furthermore, the Committee encourages the Department to seek opportunities for regional councils and councils of governments to serve as lead applicants and grantees to encourage and expand greater regional collaboration.

On page 225, before the paragraph beginning with “Hepatitis B Adult Vaccination”, insert the following new paragraph:

Commissioned Corps of the United States Public Health Service.—The Committee is aware that as of October 1, 2021, the Commissioned Corps of the U.S. Public Health Service (USPHS Commissioned Corps) is issuing a “Certificate of Release or Discharge from Active Duty” (DD Form 214) to USPHS Commissioned Corps officers who are released from active duty. The Committee requests a report within 90 days of the date of enactment of this Act on the feasibility of issuing a DD Form 214 to each USPHS Commissioned Corps Officer who retired or separated from USPHS Commissioned Corps service prior to October 1, 2021 and received a different statement of service.

On page 228, before the paragraph beginning with “Combatting Violence Against Women”, insert the following new paragraph:

Breastfeeding Analysis.—The Committee includes $1,250,000 for the Office on Women’s Health to enter into an agreement with the National Academy of Sciences (NAS) to provide an evidence-based, non-partisan analysis of the macroeconomic, health, and social costs of U.S. breastfeeding rates and national breastfeeding goals. This analysis should include a differential analysis of the current policies, programs, and investments aimed at increasing
breastfeeding initiation, improving 3- and 6-month exclusive breastfeeding rates, reducing racial, geographic, and income-related breastfeeding disparities, and reducing U.S. reliance on formula. NAS should propose recommendations for achieving the Healthy People 2020 and 2030 breastfeeding goals by 2030. The Committee requests a briefing on this analysis within 90 days of the date of enactment of this Act.

On page 250, in the paragraph beginning with “Construction”, before “The Committee is supportive of resources to public elementary and secondary schools” insert “The Committee’s $2,000,000 increase to this program will specifically focus on construction needs for schools that serve Native Hawaiian students.”.

On page 250, following the paragraph beginning with “Construction”, insert the following new paragraph:

Applicant Support.—For the fiscal year 2023 Education for Native Hawaiians competition, the Committee encourages the Department to offer technical assistance to quality applicants who have not received awards in previous competitions in order to promote grantee diversity among schools and programs that have experience providing education services to Native Hawaiian children and youth.

On page 252, following the paragraph beginning with “Technical Assistance on Inclusive Practices”, insert the following new paragraph:

Trafficking Prevention Activities.—The Committee supports the Department’s current technical assistance support to SEAs and LEAs in implementing human trafficking prevention activities and encourages the Department to offer additional support for these efforts.

On page 255, following the paragraph beginning with “Publicizing Research Findings”, insert the following new paragraph:

Diverse Geographic Areas.—The Committee encourages the Department to take steps necessary to ensure the statutory set-aside for rural areas is met and that EIR funds are awarded to diverse geographic areas.

On page 267, following the paragraph beginning with “Parent Supports”, insert the following new paragraph:

Students with Speech-Language Disorders.—The Committee encourages the Department to offer technical assistance to support students with speech-language disorders within school settings. The Committee notes the importance of providing guidance and sharing best practices to ensure the delivery of effective services for all children and youth with disabilities and speech-language disorders.
On page 278, following the paragraph beginning with “Spousal Consolidation Loans”, insert the following new paragraph:

*Postsecondary Research and Analysis.*—The Committee is supportive of the Office of the Chief Economist’s mission to conduct rigorous research in postsecondary education and notes that the Department maintains robust data sets that provide vital information on student outcomes, including those for student borrowers. The Committee supports the Department’s continuous efforts to provide user-friendly, accessible postsecondary data through enhanced fields on the College Scorecard; however, the Committee believes the Department has fallen short in its efforts to interpret these data for policymakers and stakeholders. Accordingly, the Committee encourages the Office of the Chief Economist to produce regular working papers that present meaningful original research on the Department’s postsecondary data, including outcomes for student borrowers. Specifically, the Committee is interested in analysis around the rapid growth of graduate student borrowing and whether this expansion in borrowing is beneficial to student borrowers and the overall economy.

On page 289, following the paragraph beginning with “Reserve Officers’ Training Corps (ROTC) Programs”, insert the following new paragraph:

*Foreign Gift Disclosures.*—The Committee notes that, under section 117 of the HEA, colleges and universities receiving Federal funds must disclose certain gifts from or contracts with foreign entities and that the Department makes such information publicly available on its website. The Committee supports efforts by the Department to work with institutions to improve the reporting process in order to increase transparency, protect our national security, and preserve academic integrity.

On page 302, following the paragraph beginning with “Digital Equity”, insert the following new paragraph:

*Randomized Control Trials.*—The Committee encourages AmeriCorps to continue its use of randomized control trials to build causal evidence for effective interventions.

On page 306, following the paragraph beginning with “Information Literacy Taskforce”, insert the following new paragraph:

*Public Library Assessment.*—The Committee notes growing concern regarding the physical condition of public libraries. The Committee supports efforts to assess the availability and condition of public library facilities, the availability and condition of public library facilities located in economically disadvantaged or underserved communities, the accessibility of public library facilities for individuals with disabilities, the condition of public library facilities affected by natural disasters and extreme weather, and potential costs associated with bringing public library facilities to a state of good repair.
On page 319, in the 4th item in the table, strike “Thornton” and insert “Media”

On page 343, in the 4th item in the table, strike “Frederick” and insert “Prince Frederick”.

On page 367, in the 2nd item in the table, strike “University of Massachusetts” and replace with “Edward M. Kennedy Health Center, Inc.,”.

On page 412, in the 2nd item in the table, strike “Thornton” and insert “Media”

On page 439, in the 13th item in the table, strike “Frederick” and insert “Prince Frederick”.

On page 469, in the 8th item in the table, strike “University of Massachusetts” and replace with “Edward M. Kennedy Health Center, Inc.,”.
Amendment to Labor, HHS, Education Appropriations Bill

Offered by Mr. Cole of Oklahoma, Ms. Granger of Texas, Dr. Harris of Maryland, Mr. Fleischmann of Tennessee, Ms. Herrera Beutler of Washington, Mr. Moolenaar of Michigan, Mr. Cline of Virginia, Mr. Rogers of Kentucky, Mr. Aderholt of Alabama, Mr. Simpson of Idaho, Mr. Carter of Texas, Mr. Calvert of California, Mr. Diaz-Balart of Florida, Mr. Womack of Arkansas, Mr. Joyce of Ohio, Mr. Amodei of Nevada, Mr. Stewart of Utah, Mr. Palazzo of Mississippi, Mr. Valadao of California, Mr. Newhouse of Washington, Mr. Rutherford of Florida, Mr. Reschenthaler of Pennsylvania, Mr. Garcia of California, Mrs. Hinson of Iowa, Mr. Gonzales of Texas, and Ms. Letlow of Louisiana.
After section 505, insert the following (and renumber the subsequent sections accordingly):

SEC. 506. (a) None of the funds appropriated in this Act, and none of the funds in any trust fund to which funds are appropriated in this Act, shall be expended for any abortion.

(b) None of the funds appropriated in this Act, and none of the funds in any trust fund to which funds are appropriated in this Act, shall be expended for health benefits coverage that includes coverage of abortion.

(c) In this section, the term “health benefits coverage” means the package of services covered by a managed care provider or organization pursuant to a contract or other arrangement.

SEC. 507. (a) The limitations established in the preceding section shall not apply to an abortion—

(1) if the pregnancy is the result of an act of rape or incest; or

(2) in the case where a woman suffers from a physical disorder, physical injury, or physical illness, including a life endangering physical condition caused by or arising from the pregnancy itself, that would, as certified by a physician, place the woman in danger of death unless an abortion is performed.
(b) Nothing in the preceding section shall be construed as prohibiting the expenditure by a State, locality, entity, or private person of State, local, or private funds (other than a State's or locality's contribution of Medicaid matching funds).

(c) Nothing in the preceding section shall be construed as restricting the ability of any managed care provider from offering abortion coverage or the ability of a State or locality to contract separately with such a provider for such coverage with State funds (other than a State's or locality's contribution of Medicaid matching funds).

(d)(1) None of the funds made available in this Act may be made available to a Federal agency or program, or to a State or local government, if such agency, program, or government subjects any institutional or individual health care entity to discrimination on the basis that the health care entity does not provide, pay for, provide coverage of, or refer for abortions.

(2) In this subsection, the term "health care entity" includes an individual physician or other health care professional, a hospital, a provider-sponsored organization, a health maintenance organization, a health insurance plan,
or any other kind of health care facility, organization, or plan.
Amendment to Labor, HHS, Education Appropriations Bill

Offered by Ms. Lee of California

On page 221 of the committee report, before the paragraph beginning with “Mental Health Parity”, insert the following new paragraph:

_Medication Abortion._ — The Committee urges the Department of Health and Human Services to use every tool at its disposal to ensure that medication abortion care is accessible, affordable, covered, and convenient for patients including through access to telehealth.
AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL
OFFERED BY MR. WOMACK OF ARKANSAS

Insert after section 113 the following:

SEC. 113. (a) None of the funds made available by
this Act may be used by the Department of Labor to pro-
pose any regulation after the date of enactment of this
Act that is not estimated to—
(1) reduce the 12-month all items index percentage
change, before seasonal adjustment, in the Consumer
Price Index, as measured by the Bureau of Labor Statis-
tics; or
(2) support the quality and availability of career and
technical education (as that term is defined in section 3
the Carl D. Perkins Career and Technical Education Act
(b) Subsection (a) shall not apply to any regulation
regarding national security or employee physical safety.
(c) This section shall apply through fiscal year 2023
or until the 12-month all items index percentage change,
before seasonal adjustment, in the Consumer Price Index,
as measured by the Bureau of Labor Statistics, is at or below 2.3 percent.
AMENDMENT TO THE LABOR, HEALTH AND HUMAN SERVICES, EDUCATION, AND RELATED AGENCIES APPROPRIATIONS BILL

OFFERED BY MS. CLARK OF MASSACHUSETTS

On page 221 of the committee report, before the paragraph beginning with "Home Health Aides", insert the following new paragraph:

Health Care Providers Safety.—The Committee includes $5,000,000 for the Secretary to award grants to health care providers to pay for security services or otherwise to enhance the security of their facilities, personnel, and patients to ensure safe access. A health care provider receiving a grant may use the grant to pay the costs of necessary security services or enhancements to physical access and cyber security, including video surveillance camera systems, data privacy enhancements, and structural improvements.
AMENDMENT TO CLARK #1
OFFERED BY MS. HINSON OF IOWA

Insert the following:

After Health Care Providers insert “, including Pregnancy Help Centers,” both times it appears

After health care provider insert “, including a pregnancy help center,”
AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL
OFFERED BY MS. HERRERA BEUTLER OF
WASHINGTON

Page 190, line 19, insert before the period ": Provided further, That of the total amount made available under this heading, 5 percent of such amount shall be made available upon submission by the Commissioner to the Committee on Appropriations of the House of Representatives a certification that all Social Security Field Offices are open at pre-pandemic capacity for in-person and walk-up appointments".
AMENDMENT TO LABOR, HHS, EDUCATION APPROPRIATIONS BILL
OFFERED BY MR. HARRIS OF MARYLAND

Page 105, line 22, after the dollar amount insert
"(increased by $989,000,000)".
AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL

OFFERED BY MR. MOOLENAAR OF
MICHIGAN, MR. COLE OF OKLAHOMA, MR.
CLINE OF VIRGINIA, MR. ADERHOLT OF
ALABAMA, MS. LETLOW OF LOUISIANA, AND
MR. WOMACK OF ARKANSAS

Strike section 313.

At the end of title III (before the short title), add the following:

SEC. _____ None of the funds made available by
this Act may be used to implement or enforce the proposed
rule entitled “Notice of Proposed Priorities, Require-
ments, Definitions, and Selection Criteria for the Charter
School Programs” published by the Department of Edu-
cation in the Federal Register on March 14, 2022 (87
Fed. Reg. 14197 et seq.).
AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL
OFFERED BY MR. CLINE OF VIRGINIA

Page 48, beginning on line 1, strike section 113.

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AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL

OFFERED BY MRS. HINSON OF IOWA

At the end of title III (before the short title), add
the following:

SEC. ______. (a)(1) None of the funds appropriated
by this title may be used by the Secretary of Education,
the Secretary of the Treasury, or the Attorney General
to take any action to cancel or forgive the outstanding bal-
ances, or portion of balances, of covered loans, except as
provided in paragraph (2).

(2) The prohibition described in paragraph (1) shall
not apply to targeted Federal student loan forgiveness,
cancellation, or repayment programs carried out under the
Higher Education Act of 1965 (20 U.S.C. 1001 et seq.),
under final regulations as in effect on March 12, 2020.

(b) In this section, the term “covered loan” means—
(1) a loan made, insured, or guaranteed under
part B, D, or E of title IV of the Higher Education
Act of 1965 (20 U.S.C. 1071 et seq.; 1087a et seq.;
1087aa et seq.) before, on, or after the date of en-
actment of this Act; or
(2) a loan under the Health Education Assistance Loan Program under title VII of the Public Health Service Act (42 U.S.C. 292 et seq.) made before, on, or after the date of enactment of this Act.

(c) None of the funds appropriated by this title may be used by the Secretary of Education, the Secretary of the Treasury, or the Attorney General to implement, or publish in any form, any regulation, or take any action, that modifies, alters, amends, cancels, discharges, forgives, or defers the repayment of any student debt not expressly permitted within statute or regulation as in effect on March 12, 2020, regarding covered loans, except to the extent that such regulation or action reflects the clear and unequivocal intent of Congress in legislation.
AMENDMENT TO LABOR, HHS, EDUCATION APPROPRIATIONS BILL
OFFERED BY MS. LETLOW OF LOUISIANA AND MR. MOOLENAAR OF MICHIGAN

Page 149, line 11, increase the first dollar amount by $40,000,000.

Page 149, line 14, increase the dollar amount by $40,000,000.

Page 164, line 9, reduce the first dollar amount by $40,000,000.

◊
Amendment to Labor, HHS, Education Appropriations Bill

Offered by Mr. Moolenaar of Michigan, Mr. Fleischmann of Tennessee, Mr. Aderholt of Alabama, Mr. Rutherford of Florida, and Mr. Calvert of California

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

1 Sec. _____ None of the funds made available by this Act may be used to develop, implement, administer, or enforce any rule that requires COVID-19 vaccination.

◊
AMENDMENT TO LABOR, HHS,
EDUCATION APPROPRIATIONS BILL
OFFERED BY MR. CLINE OF VIRGINIA

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

1 Sec. ___ None of the funds made available by this
2 Act may be used by the Secretary of Health and Human
3 Services, for the purposes of gun control, to declare a pub-
4 lic health emergency pursuant to section 319 of the Public
5 Health Service Act (42 U.S.C. 247d).
AMENDMENT TO LABOR, HHS,
EDUCATION APPROPRIATIONS BILL
OFFERED BY MR. NEWHOUSE OF WASHINGTON

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

1 SEC. ___. TERMINATION OF SUSPENSION OF ENTRIES AND
2 IMPORTS FROM DESIGNATED PLACES RELATED TO THE COVID-19 PANDEMIC.
3 (a) IN GENERAL.—An order of suspension issued
4 under section 362 of the Public Health Service Act (42
5 U.S.C. 265) as a result of the public health emergency
6 relating to the Coronavirus Disease 2019 (COVID-19)
7 pandemic declared under section 319 of such Act (42
8 U.S.C. 247d) on January 31, 2020, and any continuation
9 of such declaration (including the continuation described
10 in Proclamation 9994 on February 24, 2021), shall be lift-
11 ed not earlier than 60 days after the date on which the
12 Surgeon General provides written notification to the ap-
13 propriate authorizing and appropriating committees of
14 Congress that such public health emergency declaration
15 (including the continuation described in Proclamation
16 9994 on February 24, 2021) have been terminated.
(b) PROCEDURES DURING 60-DAY TERMINATION WINDOW.—

(1) PLAN.—Not later than 30 days after the date on which a written notification is provided under subsection (a) with respect to an order of suspension, the Surgeon General, in consultation with the Secretary of Homeland Security, and the head of any other Federal agency, State, local or Tribal government, or nongovernmental organization that has a role in managing outcomes associated with the suspension, as determined by the Surgeon General (or the designee of the Surgeon General), shall develop and submit to the appropriate committees of Congress, a plan to address any possible influx of entries or imports, as defined in such order of suspension, related to the termination of such order.

(2) FAILURE TO SUBMIT.—If a plan under paragraph (1) is not submitted to the appropriate committees of Congress within the 30-day period described in such paragraph, not later than 7 days after the expiration of such 30-day period, the Secretary shall notify the appropriate committees of Congress, in writing, of the status of preparing such a plan and the timing for submission as required under paragraph (1). The termination of order re-
lated to such plan shall be delayed until that date
that is 30 days after the date on which such plan
is submitted to such committees.