

DIVISION H—DEPARTMENTS OF LABOR, HEALTH AND HUMAN
SERVICES, AND EDUCATION, AND RELATED AGENCIES
APPROPRIATIONS ACT, 2016

In implementing this agreement, the Departments and agencies should be guided by the language and instructions set forth in House Report 114-195 accompanying the House bill, H.R. 3020, and Senate Report 114-74 accompanying the Senate bill, S. 1695.

Where the explanatory statement speaks to an issue that was addressed in the House or Senate reports, the explanatory statement should supersede the language in the House or Senate reports. In cases where the House Report and the Senate Report address a particular issue not specifically cited in the explanatory statement, the House Report and the Senate Report should be complied with and carry the same emphasis as the language included in the explanatory statement.

Each department and agency funded in this Act shall follow the directions set forth in this Act and the accompanying statement, and shall not reallocate resources or reorganize activities except as provided herein. Funds for individual programs and activities are displayed in the detailed table at the end of the explanatory statement for this division. Funding levels that are not displayed in the detailed table are identified within this explanatory statement. Any action to eliminate or consolidate programs, projects, and activities should be pursued through a proposal in the President's Budget so it can be considered by the Committees on Appropriations of the House of Representatives and the Senate.

Congressional Reports.—Each Department and agency is directed to provide the Committee on Appropriations of the House of Representatives and the Senate, within 30 days of enactment of this Act and quarterly thereafter, a summary

describing each requested report to the Committees on Appropriations along with its status.

TITLE I
DEPARTMENT OF LABOR
EMPLOYMENT AND TRAINING ADMINISTRATION
TRAINING AND EMPLOYMENT SERVICES

State Grants.—Governors are expected to utilize the reserve for innovative, cost-effective programs consistent with the Workforce Innovation and Opportunity Act (WIOA) to meet unique or pressing workforce needs in their states, to foster constructive partnerships to the benefit of job-seekers and employers, to effectively respond to unforeseen dislocations or local shortfalls, and to improve overall program performance as measured by the new uniform performance measurement system established by WIOA.

Dislocated Worker National Reserve.—The funding provided may be used for National Dislocated Worker Grants, technical assistance, demonstrations, and other activities as authorized by WIOA. The agreement provides \$19,000,000 requested in the fiscal year 2016 budget for grants under the authority of WIOA to provide job training and services for workers dislocated from the coal industry.

Reintegration of Ex-Offenders.—Within funds to provide services for young ex-offenders and school dropouts in high-poverty communities with high crime rates, the Department is also directed to consider the needs of communities that have recently experienced significant unrest.

Apprenticeship.—The agreement includes \$90,000,000 for Registered Apprenticeship grants and capacity building as requested in the fiscal year 2016 budget.

JOB CORPS

In light of recent events, significant concerns remain regarding the safety of students on Job Corps campuses. Efforts on the part of the Employment and Training Administration (ETA) to review and address these concerns are appreciated. ETA is directed to work with center operators and other appropriate entities to identify and implement improvements across the Job Corps system to improve the safety of students and maintain safe and effective learning environments.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

The agreement includes \$67,653,000 for the One-Stop Career Centers and Labor Market Information activity, including \$7,500,000 for the new occupational licensing State consortium initiative as described in Senate Report 114-74.

OFFICE OF LABOR-MANAGEMENT STANDARDS

The agreement does not provide funding for the proposed Electronic Labor Organization Reporting System Modernization project.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

Significant concerns remain about the Occupational Safety and Health Administration's (OSHA) use of guidance documents to change longstanding OSHA policy. In June and July of 2015, OSHA issued three guidance documents related to Executive Order 13650, "Improving Chemical Facility Safety and Security." They are Process Safety Management of Highly Hazardous Chemicals and Covered Concentrations of Listed Appendix A Chemicals, RAGAGEP in Safety Process Management Enforcement, and PSM Retail Exemption Interim Enforcement Policy. These along with other OSHA "letters of interpretation" attempt to change prevailing agency policies without proposing regulatory changes

under the requirements of the Administrative Procedures Act (5 U.S.C.551 et. seq.). OSHA has issued letters of interpretation on substantive policy matters that leave the agency open to liability that can be avoided by going through the proper rulemaking process, including notice and period of public comment. OSHA is expected to implement agency policy changes through the formal regulatory process. As such, the agreement directs that the revised enforcement policy relating to the exemption of retail facilities from coverage of the Process Safety Management of Highly Hazardous Chemicals standard (29 CFR 191 0.119(a)(2)(i)) issued by the Occupational Safety and Health Administration on July 22, 2015, shall not be enforced nor deemed by the Department of Labor to be in effect in fiscal year 2016 until: the Bureau of the Census establishes a new North American Industry Classification System code under Sector 44-45 Retail Trade for Farm Supply Retailers, and the Secretary of Labor, acting through the Assistant Secretary of Labor for Occupational Safety and Health, has carried out all notice and comment rulemaking procedures and invited meaningful public participation in the rulemaking.

OSHA is directed to continue to provide notification to the Committees on Appropriations of the House of Representatives and the Senate 10 days prior to the announcement of any new National, Regional or Local Emphasis Program including the circumstances and data used to determine the need for the launch of a new Program.

MINE SAFETY AND HEALTH ADMINISTRATION

The Mine Safety and Health Administration (MSHA) is directed to provide assistance and data necessary for the National Academy of Sciences study provided in the Centers for Disease Control and Prevention, National Institute of Occupational Safety and Health account. MSHA is directed to report to the

Committees on Appropriations of the House of Representatives and the Senate and authorizing committees of jurisdiction within 72 hours of determining that compliance rates under the new sampling protocols taking effect in 2016 fall below 95 percent, and to provide such committees with quarterly reports on actual compliance rates under the new coal dust rule.

BUREAU OF LABOR STATISTICS

The Bureau of Labor Statistics shall submit a report to Congress within one year of enactment of this Act on the Bureau's efforts to account for and report on all forms of employment in the current economy, including those working in small businesses, part-time or temporary workers, those with fluctuating schedules, and the self-employed.

OFFICE OF DISABILITY EMPLOYMENT POLICY

The agreement does not incorporate the Office of Disability Employment Policy (ODEP) into its partner agency, the Employment and Training Administration. The Department is directed to evaluate and report to the Committees on Appropriations of the House of Representatives and the Senate within 150 days of enactment of this Act on the capacity of ETA to continue providing leadership, effective policy development and grant programs, and subject matter expertise in carrying out the mission of ODEP as proposed in the Senate bill. The report should also consider the potential synergies, efficiencies, and other benefits of unifying ODEP into the direct leadership of ETA along with the broader workforce training system it oversees. Any potential organizational challenges, programmatic concerns, or other issues such an integration might create should also be discussed. Finally, the report should discuss the Department's current utilization of the specialized policy development and analysis resources available from the National Council on Disability.

DEPARTMENTAL MANAGEMENT

For the Office of the Chief Evaluation Officer, the agreement includes a direct appropriation of \$8,040,000. The agreement contains language, as proposed by the Administration, allowing the Office of the Chief Evaluation Officer to administer grants for the purposes of conducting evaluations. The authority will allow preeminent research institutions to qualify and apply for contracts to conduct rigorous and scientific evaluations of the Department's programs, projects, and activities. It is hoped that these evaluations will inform decision-making and lead to improved program performance and taxpayer value. Language is also included ensuring that grant competitions for evaluation contracts are fair and open. Finally, the transfer authority for the Office of the Chief Evaluation Officer is increased from 0.5 percent to 0.75 percent.

The administration requested \$2,620,000 and 15 full time staff to initiate an Office of Labor Compliance. This request is denied by the agreement; no funds in the bill have been provided for this purpose.

IT MODERNIZATION

The agreement includes significant new resources for information technology (IT) modernization, including a total of \$24,880,000 for IT infrastructure modernization and \$4,898,000 for Departmental Support Systems. The new Digital Government Integration Platform Initiative is not funded.

GENERAL PROVISIONS

Funds requested for a temporary surge capacity to clear the backlog of permanent labor certification program applications are available through authority to utilize H-1B fees as proposed by the Senate. Although funds are available through September 30, 2017, to accommodate a potential contract performance

period extending beyond the end of fiscal year 2016, ETA is directed to obligate the funds as expeditiously as practicable to resolve the backlog.

The bill includes a new provision related to the competitive award of contracts to operate a Jobs Corps Civilian Conservation Center.

The agreement includes a new provision related to seasonal employees offering recreational services on federal lands.

The agreement includes new provisions related to the H-2B program.

TITLE II

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Department is directed to include in its fiscal year 2017 congressional budget justification the amount of expired unobligated balances available for transfer to the Nonrecurring Expenses Fund (NEF) and the amount of any such balances transferred to the NEF. This should include actual or estimated amounts for the prior, current, and budget years. The description should include specific projects, costs, project total cost, and years expected to complete as well as the specific projects supported in the current year.

HEALTH RESOURCES AND SERVICES ADMINISTRATION

HEALTH WORKFORCE

Oral Health Training.—The agreement includes not less than \$10,000,000 for General Dentistry programs and not less than \$10,000,000 for Pediatric Dentistry programs. The agreement provides \$875,000 for section 748 authority for the Dental Faculty Loan Repayment Program. The Health Resources and Services Administration (HRSA) is directed to publish a new funding opportunity and then award grants in fiscal year 2016 from the funding provided.

Geriatric Education.—The agreement provides \$38,737,000 for Geriatric Education programs. In fiscal year 2015, HRSA combined the Geriatrics Education Centers program, Geriatric Training for Physicians, Dentists, and Behavioral/Mental Health Professionals program, and the Geriatric Academic Career Awards programs authorized under the Public Health Service (PHS) Act section 753 with the Comprehensive Geriatric Education Program authorized under PHS Act section 865 into one competition, the Geriatric Workforce Enhancement Program. HRSA stated the combined competition would, “improve health outcomes for older adults by integrating geriatrics with primary care, maximizing patient and family engagement, and transforming the healthcare system.” Therefore, the agreement has consolidated the PHS Act Title VII Geriatric Program with the PHS Act Title VIII Comprehensive Geriatric Education program.

MATERNAL AND CHILD HEALTH

Maternal and Child Health Block Grant.—The agreement includes language setting aside \$77,093,000 for Special Projects of Regional and National Significance (SPRANS). The agreement provides the following amounts within SPRANS:

Budget Activity	FY 2016 Agreement
Set-aside for oral health.....	\$5,000,000
Set-aside for epilepsy.....	3,642,000
Set-aside for sickle cell disease.....	2,961,000

	FY 2016
Budget Activity	Agreement
Set-aside for fetal alcohol syndrome demo.....	477,000

Autism and Other Developmental Disorders.—The agreement provides \$47,099,000 for the Autism and Other Developmental Disorders program and directs that HRSA provide no less than \$28,990,000 for the Leadership Education in Neurodevelopmental and Related Disabilities (LEND) program. The increased funding should be used to initiate LEND programs in States that do not currently have an established program, yet have a high incidence rate of Autism spectrum disorders.

Traumatic Brain Injury.—The agreement includes bill language transferring the Traumatic Brain Injury program from HRSA to the Administration for Community Living (ACL).

Heritable Disorders Program.—The agreement provides \$13,883,000 for the Heritable Disorders Program, of which \$2,000,000 is provided for newborn screening for Severe Combined Immune Deficiency and related disorders.

RYAN WHITE HIV/AIDS PROGRAM

Children, Youth, Women, and Families.—The agreement does not consolidate this program with the Early Intervention Services program.

HEALTH CARE SYSTEMS

340B Drug Program.—HRSA is requested to provide a briefing to update the Committees on Appropriations of the House of Representatives and the Senate on the status of 340B guidance, the secure website, and covered entities in the 340B drug program.

RURAL HEALTH

Rural Health Outreach.—The agreement provides \$63,500,000 for the Rural Health Outreach program, an increase of \$4,500,000 above the fiscal year 2015 level. This program supports projects that demonstrate new and innovative modes of outreach in rural areas, such as integration and coordination of health services. The agreement provides not more than \$12,514,000 for Outreach Service Grants; not more than \$19,412,000 for Rural Network Development Grants; not less than \$10,000,000 for Delta States Network Grant Program; not more than \$2,400,000 for Network Planning Grants; and not less than \$4,148,000 for Small Healthcare Provider Quality Improvement Grants.

Rural Access to Emergency Devices.—As requested by the Administration, the agreement does not provide funding for the Rural Access to Emergency Devices program.

CENTERS FOR DISEASE CONTROL AND PREVENTION

The agreement includes a program level of \$7,233,403,000, which includes \$6,326,103,000 in appropriated funds for the Centers for Disease Control and Prevention (CDC). In addition, it provides \$892,300,000 in transfers from the Prevention and Public Health (PPH) Fund and \$15,000,000 in Public Health and Social Services Emergency Fund (PHSSEF) unobligated balances from pandemic influenza supplemental appropriations.

IMMUNIZATION AND RESPIRATORY DISEASES

The agreement includes a total of \$798,405,000 for Immunization and Respiratory Diseases, which includes \$459,055,000 in discretionary appropriations, \$324,350,000 in transfers from the PPH Fund and \$15,000,000 in

transfers from PHSSEF unobligated balances. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Section 317 Immunization Program.....	\$610,847,000
Influenza Planning and Response.....	187,558,000

Immunizations.—The agreement reiterates the requests for an updated Section 317 Immunization Program report in the fiscal year 2017 budget request as noted by the House Report 114-195 and Senate Report 114-74. The agreement includes the requested \$8,000,000 to support the capacity of public health departments to bill health insurers for immunization services. Further, the increase above the request is intended to continue providing a comprehensive program to educate and inform the public, monitor vaccine effectiveness, account for the use of Federal and State dollars, decrease ethnic and racial disparities, build strong outbreak investigation capacity, improve tracking systems, provide the necessary support to providers, and support an appropriate level of vaccine purchases.

Influenza.—The agreement directs the Department to use \$15,000,000 in pandemic influenza supplemental balances to support CDC’s global influenza activity. CDC and the Department are expected to clearly identify in budget documents when and how prior year supplemental appropriations are used.

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

The agreement includes \$1,122,278,000 for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases and Tuberculosis Prevention. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Domestic HIV/AIDS Prevention and Research...	\$788,712,000
HIV Prevention by Health Departments.....	397,161,000
HIV Surveillance.....	119,861,000
Activities to Improve Program Effectiveness.....	103,208,000
National, Regional, Local, Community and Other Organizations.....	135,401,000
School Health.....	33,081,000
Viral Hepatitis.....	34,000,000
Sexually Transmitted Infections.....	157,310,000
Tuberculosis.....	142,256,000

EMERGING AND ZOOONOTIC INFECTIOUS DISEASES

The agreement includes \$579,885,000 for Emerging and Zoonotic Infectious Diseases, which includes \$527,885,000 in discretionary appropriations and \$52,000,000 made available from amounts in the PPH Fund. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Antibiotic Resistance Initiative.....	\$160,000,000
Lab Safety and Quality.....	8,000,000
Emerging and Zoonotic Core Activities.....	29,840,000
Vector-borne Diseases.....	26,410,000
Lyme Disease.....	10,663,000
Prion Disease.....	6,000,000
Chronic Fatigue Syndrome.....	5,400,000
Emerging Infectious Diseases.....	147,000,000
Food Safety.....	52,000,000
National Healthcare Safety Network.....	21,000,000
Quarantine.....	31,572,000
Advanced Molecular Detection.....	30,000,000
Epidemiology and Lab Capacity program.....	40,000,000
Healthcare-Associated Infections.....	12,000,000

Antimicrobial Resistance.—The agreement expects a significant level of support for State and regional lab capacity and intends for the funds provided to support programs with measurable goals and objectives which should be reported annually

in the budget request for this program. Further, CDC is directed to support States in the use of evidence-based approaches to stop the spread of drug-resistant bacteria and preserve existing antibiotics. The agreement directs CDC to coordinate with the Biomedical Advanced Research and Development Authority (BARDA), the National Institute for Allergy and Infectious Diseases (NIAID), and other government agencies and support collaborations between entities such as academic medical centers, veterinary schools, schools of public health, State public health departments, and other academic institutions whose activities are in line with the Federal strategy for addressing antibiotic resistant bacteria. CDC shall provide a detailed spend plan to the Committees on Appropriations of the House of Representatives and the Senate within 60 days after enactment of this Act.

CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

The agreement includes \$1,177,096,000 for Chronic Disease Prevention and Health Promotion, which includes \$838,146,000 in discretionary appropriations, and \$338,950,000 made available from amounts in the PPH Fund. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Tobacco.....	\$210,000,000
Nutrition, Physical Activity, and Obesity.....	49,920,000
High Obesity Rate Counties.....	10,000,000
School Health.....	15,400,000
Health Promotion.....	14,025,000

Budget Activity	FY 2016 Agreement
Glaucoma.....	3,300,000
Visual Screening Education.....	525,000
Alzheimer's Disease.....	3,500,000
Inflammatory Bowel Disease.....	750,000
Interstitial Cystitis.....	850,000
Excessive Alcohol Use.....	3,000,000
Chronic Kidney Disease.....	2,100,000
Prevention Research Centers.....	25,461,000
Heart Disease and Stroke.....	160,037,000
Diabetes.....	170,129,000
National Diabetes Prevention Program.....	20,000,000
Cancer Prevention and Control.....	356,174,000
Breast and Cervical Cancer.....	210,000,000
WISEWOMAN.....	21,120,000
Breast Cancer Awareness for Young Women..	4,960,000
Cancer Registries.....	49,440,000
Colorectal Cancer.....	43,294,000

Budget Activity	FY 2016 Agreement
Comprehensive Cancer.....	19,675,000
Johanna's Law.....	5,500,000
Ovarian Cancer.....	7,500,000
Prostate Cancer.....	13,205,000
Skin Cancer.....	2,125,000
Cancer Survivorship Resource Center.....	475,000
Oral Health.....	18,000,000
Safe Motherhood/Infant Health.....	46,000,000
Preterm Birth.....	2,000,000
Arthritis.....	11,000,000
Epilepsy.....	8,000,000
National Lupus Patient Registry.....	6,000,000
Racial and Ethnic Approaches to Community Health (REACH).....	50,950,000
Million Hearts.....	4,000,000
National Early Child Care Collaboratives.....	4,000,000
Hospitals Promoting Breastfeeding.....	8,000,000

Burden of Disease.—The agreement directs the CDC Director to implement a population-adjusted burden of disease criteria as a significant factor for new competitive awards within the Chronic Disease portfolio for Heart Disease, Stroke, and Diabetes.

Diabetes, Heart Disease and Stroke.—The agreement provides a significant increase to support Diabetes, Heart Disease and Stroke prevention. The agreement expects funding to support communities with the highest burden of disease, as adjusted for population, and to use risk factor reduction measures. The agreement requests a report in the fiscal year 2017 budget request on how funds will be provided to address the highest burden.

Glaucoma.—The agreement continues to support telemedicine efforts to identify, detect, treat, and manage people with glaucoma in order to build on successful research, screening, and treatment for populations at greatest risk for diseases such as glaucoma.

Interstitial Cystitis.—The agreement directs the increase in funding for Interstitial Cystitis to be allocated to support education, outreach, and public awareness activities.

Obesity.—The agreement requests an update in the fiscal year 2017 budget request on the evidence-based practices CDC is undertaking to reduce obesity, which should include education and outreach related to the role of fruit and vegetable consumption in reducing obesity in at-risk populations, including both adult and pediatric populations.

Partnerships to Improve Community Health (PICH).—To lessen the disruption during PICH close out, the agreement directs CDC to shift fiscal year 2016 continuation costs to specific chronic disease budget lines for current activities of grantees, such as cities, counties, tribal grantees, and nongovernmental organizations.

Tobacco Prevention.—The agreement provides support for CDC’s comprehensive efforts to reduce tobacco use. The agreement requests an update in the fiscal year 2017 budget request identifying all CDC programs that provide support for tobacco control or prevention activities and requests that CDC explore ways to reduce duplication with tobacco prevention programs and activities not funded in the specific tobacco-funding line. The CDC is urged to coordinate with the National Institutes of Health (NIH) to identify meritorious tobacco research opportunities for NIH to consider through its peer-reviewed process and its existing portfolio funding level.

BIRTH DEFECTS AND DEVELOPMENTAL DISABILITIES

The agreement includes \$135,610,000 for Birth Defects and Developmental Disabilities. Within the total for Birth Defects and Developmental Disabilities, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Child Health and Development.....	\$65,800,000
Birth Defects.....	19,000,000
Fetal Death.....	900,000
Fetal Alcohol Syndrome.....	11,000,000
Folic Acid.....	3,150,000
Infant Health.....	8,650,000
Autism.....	23,100,000

Health and Development for People with Disabilities.....	54,710,000
Disability & Health.....	22,050,000
Tourette Syndrome.....	2,000,000
Early Hearing Detection and Intervention.....	10,760,000
Muscular Dystrophy.....	6,000,000
Attention Deficit Hyperactivity Disorder.....	1,900,000
Fragile X.....	2,000,000
Spina Bifida.....	6,000,000
Congenital Heart Failure.....	4,000,000
Public Health Approach to Blood Disorders.....	4,500,000
Hemophilia CDC Activities.....	3,500,000
Hemophilia Treatment Centers.....	5,000,000
Thalassemia.....	2,100,000

Improving the Health of People with Intellectual Disabilities.—The CDC Healthy Athletes Initiative was established in 2002 to support efforts to address the unmet health care needs of people with intellectual disabilities. The agreement includes an additional \$2,000,000 above the fiscal year 2015 level to maintain and expand support for this important initiative.

PUBLIC HEALTH SCIENTIFIC SERVICES

The agreement includes a total of \$491,597,000 for Public Health Scientific Services in discretionary appropriations. Within the total for Public Health Scientific Services, the agreement includes the following amounts:

	FY 2016
Budget Activity	Agreement
Health Statistics.....	\$160,397,000
Surveillance, Epidemiology, and Informatics.....	279,000,000
Lab Training.....	5,000,000
Public Health Workforce.....	52,200,000

ENVIRONMENTAL HEALTH

The agreement includes \$182,303,000 for Environmental Health programs, which includes \$165,303,000 in discretionary appropriations, and \$17,000,000 that is made available from amounts in the PPH Fund. The agreement provides support for CDC’s environmental health research, evaluation, and surveillance activities. These activities are intended to be complementary to the biomedical research conducted at the National Institute of Environmental Health Sciences. Within this total, the agreement includes the following amounts:

	FY 2016
Budget Activity	Agreement
Environmental Health Laboratory.....	\$56,000,000
Newborn Screening Quality Assurance Program.....	8,300,000

Newborn Screening /Severe Combined	
Immuno-deficiency Diseases.....	1,200,000
Environmental Health Activities.....	46,303,000
Environmental Health Activities.....	17,703,000
Safe Water.....	8,600,000
Amyotrophic Lateral Sclerosis Registry.....	10,000,000
Climate Change.....	10,000,000
Environmental and Health Outcome Tracking Network.....	34,000,000
Asthma.....	29,000,000
Childhood Lead Poisoning.....	17,000,000

INJURY PREVENTION AND CONTROL

The agreement includes \$236,059,000 for Injury Prevention and Control activities. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Intentional Injury.....	\$97,730,000
Domestic Violence and Sexual Violence.....	32,700,000
Child Maltreatment.....	7,250,000

Budget Activity	FY 2016 Agreement
Youth Violence Prevention.....	15,100,000
Domestic Violence Community Projects.....	5,500,000
Rape Prevention.....	44,430,000
National Violent Death Reporting System.....	16,000,000
Unintentional Injury.....	8,800,000
Traumatic Brain Injury.....	6,750,000
Elderly Falls.....	2,050,000
Injury Prevention Activities.....	28,950,000
Opioid Prescription Drug Overdose.....	70,000,000
Illicit Opioid Use Risk Factors.....	5,579,000
Injury Control Research Centers	9,000,000

Opioid Prescription Drug Overdose (PDO) Prevention Activity.—The agreement commends CDC for its leadership in expanding efforts combatting prescription and opioid drug overdoses. The agreement directs the CDC Director to implement these activities based on population-adjusted burden of disease criteria, including mortality data (age adjusted rate), as significant criteria when distributing funds for the State PDO Prevention activities. The CDC is expected to

adhere to the conditions identified in the fiscal year 2015 Appropriations Act and explanatory statement as CDC expands beyond prescription drugs and into the broader category of opioids. The agreement assumes these funds will be distributed via a competitive mechanism and not merely a mathematical formula or standard allocation to each State.

Surveillance of Heroin.—The agreement directs CDC to expand surveillance of heroin-related deaths beyond CDC’s current work in HHS’s Region 1 and to require applicants for the PDO Prevention for States Programs to collaborate with the State’s substance abuse agency or agency managing the State’s Prescription Drug Monitoring Program.

Violence Data Collection.—The agreement notes that CDC should continue its current National Vital Statistics System and National Violent Death Reporting System (NVDRS) data collections activities and ensure the activities continue to comply with funding restrictions. The agreement provides an increase for NVDRS to support States not previously funded.

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

The agreement includes a total of \$339,121,000 for the National Institute for Occupational Safety and Health (NIOSH) in discretionary appropriations. Within the total for NIOSH, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
National Occupational Research Agenda.....	\$115,500,000
Agriculture, Forestry, Fishing.....	25,000,000
Education and Research Centers.....	28,500,000

Budget Activity	FY 2016 Agreement
Personal Protective Technology.....	20,000,000
Mining Research.....	61,300,000
Other Occupational Safety and Health Research.....	112,721,000
National Mesothelioma Registry and Tissue Bank.....	1,100,000

National Academy of Sciences (NAS) Review.—The agreement provides \$1,800,000 within the Mining Research funding line and directs the NIOSH Director to charter a NAS review within 90 days of enactment of this Act. Specifically the NAS effort should examine and describe: current monitoring and sampling protocols and requirements to understand miners’ occupational exposure to respirable coal mine dust in the United States and other industrialized countries; coal mine dust composition and application procedures, including the impact of new rock dust mixtures and regulatory requirements; monitoring and sampling technologies, and sampling protocols and frequency; and the efficacy of those technologies and protocols in aiding decisions regarding the control of respirable coal mine dust and mine worker exposure. The NAS study will develop science-based conclusions regarding optimal monitoring and sampling strategies that support mine operational decision making as it relates to reducing miner respirable coal mine dust exposure. It is expected the report will be completed within 12 months after enactment of this Act.

Total Worker Health.—The agreement provides funding in the Other Occupational Safety and Health Research line to continue to support the Total Worker Health program at no less than the fiscal year 2015 level.

ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION PROGRAM

The agreement includes \$55,358,000 in mandatory funding for CDC’s responsibilities with respect to the Energy Employee Occupational Illness Compensation Program.

GLOBAL HEALTH

The agreement includes \$427,121,000 for Global Health activities. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Global AIDS Program.....	\$128,421,000
Global Immunization Program.....	219,000,000
Polio Eradication.....	169,000,000
Measles and Other Vaccine Preventable Diseases.....	50,000,000
Parasitic Diseases/Malaria.....	24,500,000
Global Public Health Protection.....	55,200,000
Global Disease Detection and Emergency Response.....	45,400,000
Global Public Health Capacity.....	9,800,000

Global Public Health Capacity.—The agreement understands the importance of CDC’s global work to protect Americans at home and abroad, including collaborating with other nations to identify, prepare for, investigate and respond to

public health threats. The agreement requests a report, within 90 days after enactment of this Act, for all international activities funded through this CDC activity to the Committees on Appropriations of the House of Representatives and the Senate.

PUBLIC HEALTH PREPAREDNESS AND RESPONSE

The agreement includes \$1,405,000,000 for public health preparedness and response activities. Within the total for Public Health Preparedness and Response, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Public Health Emergency Preparedness	
Cooperative Agreements.....	\$660,000,000
Academic Centers for Public Health	
Preparedness.....	8,200,000
CDC Preparedness and Response.....	161,800,000
BioSense.....	23,000,000
All Other CDC Preparedness.....	138,800,000
Strategic National Stockpile.....	575,000,000

Technical Assistance.—Within the Public Health Emergency Preparedness (PHEP) activity, the agreement provides no less than the fiscal year 2015 level for technical assistance and directs CDC to use the balance of the increase for the PHEP cooperative agreements.

Select Agent Program.—The agreement provides a \$5,000,000 increase for CDC’s Select Agent Program and expects a report within 120 days after enactment of this Act providing an update on these efforts.

Strategic National Stockpile (SNS) Replenishment of Medical Countermeasures.—The agreement notes certain assets in the SNS will begin to expire soon. The agreement directs the CDC Director to conduct a review of the current SNS antivirals supply. The review should include: the current stockpile; product expiration and/or extension of dating; cost of replenishment; contract requirements; manufacturing capability (including capacity and lead production time), and distribution methods. The CDC is to provide the report within 120 days after the date of enactment of this Act to the Committees on Appropriations of the House of Representatives and the Senate. Further, the agreement requests the inclusion of additional detail pertaining to SNS data in its annual budget request beginning in fiscal year 2017, including the total projected costs of expired or expiring SNS assets. Specifically, the request should identify the projected percentage allocation of the current and budget request resources expected to support expiring asset replacement, new asset purchases, and other operational costs.

BUILDINGS AND FACILITIES

The agreement includes \$10,000,000 for Buildings and Facilities. In addition, the agreement directs unobligated funds in the Individual Learning Accounts from prior employees’ closed accounts to be used to support the replacement of the underground and surface coal mine safety and health research capacity facility.

Demolition.—The agreement provides demolition authority for fiscal year 2016 to allow CDC to eliminate structures that are no longer used and have gone beyond their intended lifespan, such as small modular trailers and storage facilities. Due to

the age and condition of some of the structures, they pose a significant danger if left in their current state. By eliminating these structures, the Federal government will save almost \$90,000 per year in maintenance costs. If this authority is necessary beyond fiscal year 2016, CDC shall request such authority as part of their annual congressional justification.

CDC-WIDE ACTIVITIES

The agreement includes \$273,570,000 for CDC-wide activities, which includes \$113,570,000 in discretionary appropriations and \$160,000,000 made available through the PPH Fund. Within this total, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Preventative Health and Health Services	
Block Grant.....	\$160,000,000
Public Health Leadership and Support.....	113,570,000

Burden of Disease Review.—The agreement urges CDC and Center Directors to explore ways to review its programs and public health activities, where population adjusted burden of disease is not already being used as a significant factor to award funds, in order to determine how the programs can use or increase the use of burden of disease as significant criteria for awarding, tracking, and evaluating CDC supported activities.

CDC Budget Policy.—The agreement expects that, unless provided for differently through this agreement, CDC will provide advance notification to the Committees on Appropriations of the House of Representatives and the Senate if it

does not follow the policy, funding source, and levels described in its budget request.

CDC Director's Discretionary Fund.—The CDC Director shall provide timely semi-annual reports on all obligations made with the CDC Director's Discretionary Fund to the Committees on Appropriations of the House of Representatives and the Senate and post the end of the year report online within 30 days after it is submitted to such Committees.

CDC Laboratory Safety and Training.—The agreement notes that CDC established a Laboratory Safety Review Board (LSRB) to conduct safety reviews of laboratory protocols for work in biosafety level 3 (BSL-3) and biosafety level 4 (BSL-4) laboratories. CDC is directed to provide an annual report beginning in April 2016 that identifies the total number of CDC laboratories operated or maintained by CDC with a breakout for all labs, BSL-3 labs, and BSL-4 labs. For each category, it should identify the number of employees in each category of laboratory, the number of Standard Operating Procedures (SOPs), the number of employees who attended the new biological risk assessments training in the past year, and the number of SOPs reviewed annually by the LSRB. In addition, the fiscal year 2017 budget request shall provide a detailed update on activities that enhance and support CDC laboratory safety and training.

Cross-cutting Coordination with NIH.—CDC is expected to provide an update in the fiscal year 2017 budget request on how CDC's programs coordinate with NIH Institutes and Centers to share scientific gaps related to activities supported in NIH research portfolios, reduce duplication of effort, and prevent overlapping core mission focus area.

Individual Learning Accounts (ILA).—The agreement directs CDC to allow current employees to continue to expend the remainder of their ILA balances for employee training. In addition, the agreement directs each program to use

available resources to provide employee training for all employees, in lieu of the previously congressionally directed ILA program. The CDC Director shall provide an annual report, no later than 60 days after the end of the fiscal year, on the cumulative dollar amount spent on CDC employee training activities for the recently closed fiscal year and prior three fiscal years.

Laboratories.—The CDC is directed to provide a specific CDC-wide consolidated laboratory funding table in the fiscal year 2017 budget and future budget requests. The single consolidated table shall (at a minimum) identify for each Center and its specific program activities that fund laboratory activity, funding levels provided to State, Regional, and other laboratory activity requested, for the current, and prior three budget years. It should include a narrative section describing CDC’s process to coordinate the various laboratory funding activities across the Centers to support laboratory capabilities, upgrades, and other related initiatives that are linked to measurable laboratory goals and objectives across CDC. The agreement urges CDC to work with its State and Regional laboratory partners to explore ways to consolidate, streamline, and improve the ability for laboratories to most effectively utilize CDC provided funds.

Respirator Certification Program.—CDC has been operating the Respirator Certification Program since 1972. Under Federal law, this program must be self-sustaining, and CDC must recover the entire costs of services provided for the examination, inspection, and testing of respirators. The agreement includes language allowing CDC to have an additional fiscal year to spend user fees collected late in the year through the Respirator Certification program.

Reoccurring Reports.—The agreement notes the scope of the reoccurring reports language in Senate Report 114-74 is limited to free standing reports requested prior to fiscal year 2012 but not information requested for inclusion in the annual budget request.

Sodium Consumption.—The agreement notes that a growing body of evidence suggests low sodium consumption can lead to health problems in healthy individuals. The U.S. and Canadian governments each established Federal Dietary Reference Intake (DRI) Committees that work to identify DRI needs and coordinate government sponsorship of DRI reviews. The DRI's reflect nutrient reference values, and are based on significant, new, and relevant data. In August 2014, four nutrient areas for updated DRIs were selected, including sodium. The agreement requests an update in the fiscal year 2017 budget request on the timeline and plan for the update of the DRI for sodium.

Public Health Leadership and Supporting Details.—The agreement reiterates the request from last year and directs the CDC Director to include in the fiscal year 2017 and future budget requests specific details of each budget activity supported with these funds, including functions, mission, full time employees, bonus, travel costs, and other typical object class data and information for each separate activity supported through the Public Health Leadership and Support funding line.

NATIONAL INSTITUTES OF HEALTH

The agreement provides \$32,084,000,000 for NIH activities within the jurisdiction of this bill, an increase of \$2,000,000,000. The agreement also includes the budget request of \$200,000,000 for the new Precision Medicine Initiative (PMI); an increase of \$350,000,000 for Alzheimer's disease research; an increase of \$85,000,000 for the Brain Research through Application of Innovative Neurotechnologies (BRAIN) Initiative; an increase of \$100,000,000 for research to combat Antimicrobial Resistance; and an increase to every Institute and Center (IC) to continue investments in innovative research that will advance

fundamental knowledge and speed the development of new therapies, diagnostics, and preventive measures to improve the health of all Americans.

The agreement expects NIH to support the number of Ruth L. Kirschstein National Research Service Awards and other training grants in proportion to at least the general IC level funding increase. The agreement expects NIH to provide a stipend level and inflationary increases to grantees that is at least consistent with any fiscal year 2016 Federal employee pay raise.

The agreement continues to support the Clinical and Translational Science Awards program, the Institutional Development Award program, and the follow-on to the National Children’s Study in bill language.

The Common Fund is supported as a set-aside within the Office of the Director at \$675,639,000, which includes \$130,000,000 for PMI and \$12,600,000 to support pediatric research as authorized by the Gabriella Miller Kids First Research Act.

NATIONAL CANCER INSTITUTE (NCI)

Kidney Cancer.—The agreement encourages support of meritorious scientific research on kidney cancer, specifically early detection of the disease. The agreement encourages the NCI to support a Specialized Program of Research Excellence in kidney cancer and other research programs for subtypes of kidney cancer, such as papillary and chromophobe. NCI should provide an update on these efforts in the fiscal year 2017 budget request.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE (NINDS)

Alternating Hemiplegia of Childhood (AHC).—The agreement notes AHC is a rare neurodevelopmental disorder characterized by repeated episodes of weakness or paralysis that may affect one side of the body or the other. It is one of several diseases caused by mutations in the gene ATP1A3. Recently NIH participated in

the 4th Symposium on ATP1A3 in Disease. The agreement encourages NINDS to support promising research on AHC and the gene mutation ATP1A3 and to provide a summary of the recent symposium and associated recommendations in the fiscal year 2017 budget request.

Hydrocephalus Research.—In June 2014, NINDS held a conference “Hydrocephalus: Myths, New Facts, Clear Directions” that in part updated the 2005 state of the science on hydrocephalus research. The agreement requests NINDS provide a summary of the conference workshop and associated recommendations in the fiscal year 2017 budget request.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES (NIAID)

Antimicrobial Resistance (AMR).—The agreement provides the requested increase of \$100,000,000 for AMR research. The NIAID is directed to work with the Biomedical Advanced Research and Development Authority (BARDA) to develop a joint plan to address the serious threat of antimicrobial resistance. NIAID is also directed to work with the Assistant Secretary for Preparedness and Response on the five-year spending plan for the medical countermeasure (MCM) enterprise, which should provide additional detail on NIAID’s biodefense activities, including priorities for MCM candidates in its portfolio and efforts to transition these projects to advanced research at BARDA. The agreement also directs the Department of Health and Human Services to work with the Departments of Defense, Agriculture, Veterans Affairs, and the Food and Drug Administration to both track and store AMR genes and the mobile genetic elements from AMR bacteria. The Secretary is directed to include an update in the fiscal year 2017 budget request on the Administration’s progress in implementing the National Strategy for Combating Antibiotic Resistant Bacteria.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES (NIGMS)

Institutional Development Award (IDeA).—The agreement provides a significant increase to the IDeA program in recognition of its success. The agreement anticipates NIH will maintain at least this percentage in subsequent budget requests. It also reflects the disappointment of the Committees on Appropriations of the House of Representatives and the Senate that NIH ignored Congressional language in last year’s explanatory statement to provide a legislative plan to update eligibility criteria for the IDeA program. The agreement restates the direction in last year’s explanatory statement to report to the Committees on Appropriations of the House of Representatives and the Senate within 60 days after enactment of this Act legislative language to update eligibility criteria that specifically incorporates the Experimental Program to Stimulate Competitive Research qualifying States into IDeA’s criteria.

NATIONAL INSTITUTE ON AGING (NIA)

Alzheimer’s Disease.—The agreement includes \$936,000,000, an increase of \$350,000,000 above fiscal year 2015, for high quality research on Alzheimer’s disease, subject to the scientific opportunity presented in the peer review process. In 2012, the National Plan to Address Alzheimer’s Disease was released to address the major challenges Alzheimer’s disease will pose by 2025. Since then, although Alzheimer’s research has received annual increases for federally funded research, it is still funded significantly below the annual level needed to accomplish the goal of the National Plan. NIA is encouraged to continue addressing the research goals set forth in the National Plan to Address Alzheimer’s Disease, as well as the recommendations from the Alzheimer’s Disease Research Summit in 2015.

NATIONAL INSTITUTE ON MINORITY HEALTH AND HEALTH DISPARITIES (NIMHD)

Research Centers in Minority Institutions (RCMIs).—The agreement continues to support RCMIs and expects the RCMIs to receive no less than \$56,758,601,

which is the fiscal year 2015 level plus the proportional share of the general increase provided to NIMHD.

NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES (NCATS)

Clinical and Translational Science Awards (CTSA).—The agreement provides \$500,000,000 for the CTSA program, an increase of \$25,254,000 above fiscal year 2015, to implement the recommendations from the 2013 Institute of Medicine report on CTSA. In particular, the agreement supports the goal of using CTSA to build networking capacity and support for innovative collaborative projects. Additional funding is included to allow the program to retain its merit-based CTSA funding to institutions while expanding the network capacity to conduct multi-site clinical studies and collaborative projects.

OFFICE OF THE DIRECTOR (OD)

The agreement provides, to the extent practicable, to all the offices and functions within the OD an increase equal to the general increase provided to the ICs of approximately 4 percent. The agreement maintains the NIH Director's Discretionary Fund, Challenge Fund and NIH Foundation level at the fiscal year 2015 levels.

Gabriella Miller Kids First Research Act.—The agreement continues bill language for specific funds authorized by the Gabriella Miller Kids First Research Act within the Common Fund to support the second year of the 10-year Pediatric Research Initiative. The agreement encourages NIH to prioritize research relating to childhood cancer within the program and requests an update in the fiscal year 2017 budget request on the 10-year program, planned activities, and on-going research.

Capstone Awards.—NIH is exploring the establishment of new grants, called Capstone Awards that could promote partnership between a senior and junior

investigator or provide opportunities for acquiring skills needed for transitioning to a new role. The agreement requests an update in the fiscal year 2017 budget request on these efforts, including NIH's consultations with internal and external constituencies with a stake in this potential endeavor.

Common Fund.—The agreement notes continued support for the Common Fund High Risk High Reward (HRHR) programs, such as the Pioneer, New Innovator, and the Transformative R01 awards. The HRHR awards have shown great success over the years. The agreement requests an update in the fiscal year 2017 budget request on how HRHR awards are supported through the Common Fund and across the NIH ICs.

Director's Discretionary Fund (DDF).—The NIH Director shall provide timely semi-annual reports on all obligations made with the NIH DDF to the Committees on Appropriations of the House of Representatives and the Senate and post the end of the year report online within 30 days after it is submitted to such Committees.

Multi-institute Research Issues

Anhydramnios.—To augment knowledge about anhydramnios and related conditions, the Eunice Kennedy Shriver National Institute for Child Health and Human Development (NICHD) is planning a science workshop on the biology, pathophysiology, and clinical aspects of amniotic fluid abnormalities. It is expected to focus on mechanisms of production and regulation of amniotic fluid, possible causes of anhydramnios, neonatal outcomes, and early diagnostic and treatment approaches, identifying knowledge gaps for future research. The agreement requests an update in the fiscal year 2017 budget request on the timeline for the workshop and its relationship to Human Placenta Project.

BRAIN Initiative.—The agreement continues to strongly support the BRAIN Initiative. The bill provides \$150,000,000, an increase of \$85,000,000 above fiscal year 2015, to be pooled from various ICs.

Coordination with CDC.—NIH is expected to provide an update in the fiscal year 2017 budget request on how NIH’s ICs and programs coordinate with the CDC Centers and programs on cross-cutting initiatives, ensuring they avoid duplication of effort.

Basic Biomedical Research.—The agreement urges the NIH Director to continue the traditional focus on basic biomedical research. The purpose of NIH basic research is to discover the nature and mechanics of disease, and identify potential therapeutic avenues likely to lead to its prevention and treatment. Without this early scientific investigation, future development of treatments and cures would be impossible. Basic biomedical research must remain a key component of both the intramural and extramural research portfolio at the NIH. The agreement requests NIH provide an update in the fiscal year 2017 budget request on steps NIH plans to take to ensure the traditional focus on basic science is preserved.

Child Abuse and Neglect.—The agreement commends the NIH and NICHD Pediatric Trauma and Critical Illness Branch’s new initiative to form CAPSTONE Centers for Multidisciplinary Research and Training in Child Abuse and Neglect. The agreement encourages all relevant ICs to ensure reviewers with knowledge and expertise of the subject are included on appropriate peer review committees.

Enhanced NIH Reporting on Research Spending by Disease and Affected Populations.—The agreement reiterates the direction identified in the fiscal year 2015 explanatory statement for NIH to make public, on an annual basis, enhanced Research, Condition, and Disease Categorization (RCDC) spending data with the number of Americans affected by each category of disease according to CDC or other federally-sourced data. The agreement directs NIH to include this

data as a column for each category row on the RCDC table page that is available online and not in a separate file linked to the web page. The agreement expects available data to be uploaded within 60 days after enactment of this Act. In the rare circumstance, if data is not readily available, NIH shall provide a plan to the Committees on Appropriations of the House of Representatives and the Senate within 60 days of enactment of this Act to populate the category before the end of fiscal year 2016. Further, the agreement encourages NIH to add pediatric cardiomyopathy as a RCDC category.

Grant Review.—The fiscal year 2017 budget request shall provide an update on NIH policies and procedures to ensure appropriate review and approval for grants awarded through the ICs.

National Center for Biotechnology Information (NCBI).—The agreement includes funding directly to the National Library of Medicine (NLM) for NCBI to meet the challenge of collecting, organizing, analyzing, and disseminating the increasing amounts of data related to research in molecular biology and genomics and to support the deposit of manuscripts in PubMed Central under the NIH Public Access Policy. Providing the increase specifically to NLM, as opposed to previous years where NLM received funding from individual ICs for these activities, should improve funding transparency and enhance NCBI's ability to provide an integrated, genomic resource for biomedical researchers at NIH and around the globe.

National Children's Study Follow-on.—The agreement commends the efforts of NIH to work with the community to begin to address concerns related to the follow-on to the National Children's Study. The agreement provides funding in the OD and expects NIH to continue to move forward based on the directions provided by the Committees on Appropriations of the House of Representatives and the Senate.

New Initiatives.—The agreement requests NIH provide a table in the fiscal year 2017 and future budget requests reflecting the current year plus five-year planned funding levels for each of the following initiatives: Building Infrastructure Leading to Diversity, BRAIN, Big Data, PMI, CTSA, AMR, Accelerating Medicines Partnership, Human Microbiome, HRHR, Cures Acceleration Network, Biomedical Workforce, and new initiatives proposed in fiscal year 2017. For each initiative, the table should identify, at a minimum, the planned budget level; a list of participating ICs; linkage to the NIH-wide strategic plan, and percentage of the funds focused on basic science.

Precision Medicine Initiative (PMI).—The agreement supports the new PMI and provides \$70,000,000 to NCI and \$130,000,000 in the Common Fund to fund activities in fiscal year 2016.

Prioritization of Funding.—The agreement expects NIH to consider burden of disease when setting priorities and developing strategic plans across its ICs to address conditions (such as Alzheimer’s disease, diabetes, heart disease, and cancer) with significant opportunity to improve the current or future health of the American population by targeting funding toward cures and better treatments. Further, the agreement expects NIH to prioritize funds on medical research discovery over outreach and education. The agreement expects NIH to continue policies to distribute funding based on the merit of researchers’ ideas and productivity, and to ensure consistent application of scientific policies between extramural and intramural researchers. The agreement requests NIH provide an update in the fiscal year 2017 budget request on how it plans to use the NIH 5-year scientific strategic plan as part of its resource allocation process to improve the health of the American population.

Reproducibility of Scientific Methods.—The agreement notes that the gold standard of science is the ability to reproduce a method and finding. There

continues to be concern with reports that some published biomedical research cannot be easily reproduced. The agreement expects NIH to continue to stress the importance of experimental rigor and transparency of reporting of research findings to enhance the ability of others to replicate them. To the extent practicable, the agreement requests an update in the fiscal year 2017 budget request on how NIH is measuring the effectiveness of each step NIH has taken to develop and implement best practice guidelines to better facilitate the conduct of replicable research and research transparency in the reporting of methods and findings.

Science Education.—The Science Education Partnership Awards (SEPA) fosters important connections between biomedical researchers and K-12 teachers and their students. These connections establish an education pipeline to careers in biomedical sciences, which is one of the most important areas of workforce development for the U.S. economy. Therefore, NIH is directed to continue funding the SEPA program at no less than last year’s level.

Trisomy.—The agreement encourages the NIH to explore the molecular, cellular, and physiological mechanisms that predestine individuals born with a third copy of human chromosome 21 (trisomy 21) to either live with – or be protected from – a range of diseases that cause nearly 60 percent of deaths today in the U.S. The agreement requests that NIH submit a report within one year of enactment of this Act to the Committees on Appropriations of the House of Representatives and the Senate on the feasibility of a multi-year study of children and adults with trisomy 21.

Undiagnosed Disease Program (UDP).—The agreement continues support for the Undiagnosed Disease Network within the UDP, and requests an update in the fiscal year 2017 budget request on steps NIH has taken to accelerate discovery and innovation in the way we diagnose and treat patients with previously undiagnosed diseases, including its efforts to support data collection and sharing within the

research community. Further, NIH is encouraged to explore public/private partnership opportunities and other ways to expand the impact of the program.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

The agreement continues bill language directing the Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA) to exempt the Mental Health Block Grant and the Substance Abuse Prevention and Treatment (SAPT) Block Grant from being used as a source for the PHS evaluation set-aside in fiscal year 2016, as was done prior to fiscal year 2012.

MENTAL HEALTH

Within the total provided for Mental Health Programs of Regional and National Significance (PRNS), the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Capacity:	
Seclusion & Restraint.....	\$1,147,000
Youth Violence Prevention.....	23,099,000
Project Aware State Grants.....	49,902,000
Mental Health First Aid.....	14,963,000
Healthy Transitions.....	19,951,000
National Traumatic Stress Network.....	46,887,000

Budget Activity	FY 2016 Agreement
Children and Family Programs.....	6,458,000
Consumer and Family Network Grants.....	4,954,000
Mental Health System Transformation and Health Reform.....	3,779,000
Project LAUNCH.....	34,555,000
Primary and Behavioral Health Care Integration.....	49,877,000
National Strategy for Suicide Prevention.....	2,000,000
Suicide Lifeline.....	7,198,000
Garrett Lee Smith–Youth Suicide Prevention– States.....	35,427,000
Garrett Lee Smith–Youth Suicide Prevention– Campus.....	6,488,000
American Indian and Alaskan Native Suicide Prevention Initiative.....	2,931,000
Homelessness Prevention Programs.....	30,696,000
Tribal Behavioral Grants.....	15,000,000
Minority AIDS.....	9,224,000

Budget Activity	FY 2016 Agreement
Criminal and Juvenile Justice Programs.....	4,269,000
Assisted Outpatient Treatment.....	15,000,000
Science and Service:	
Garrett Lee Smith–Suicide Prevention Resource Center.....	5,988,000
Practice Improvement and Training.....	7,828,000
Primary/Behavioral Health Integration T.A.....	1,991,000
Consumer & Consumer Support T.A. Centers.....	1,918,000
Minority Fellowship Program.....	8,059,000
Disaster Response.....	1,953,000
Homelessness.....	2,296,000
HIV/AIDS Education.....	771,000

Mental Health Programs.—SAMHSA is directed to work with the Government Accountability Office (GAO) in implementing the recommendations provided in GAO report GAO–15–113 and GAO–15–405 issued in February and May of 2015, respectively. The agreement directs SAMHSA to provide a detailed update and timeline on the progress of these recommendations 90 days after enactment of this Act. Furthermore, the agreement directs SAMHSA to develop a grants compliance plan that will ensure that SAMHSA’s grants process is in accordance with the

Department's grants manual. The compliance plan shall include periodic, and random, internal audits of grant files to confirm all the necessary documentation is accounted for and that the compliance plan is meeting its objectives. SAMHSA shall provide any additional grants training necessary to prevent these issues from arising in the future.

Mental Health Block Grants.—The agreement includes a \$50,000,000 increase over fiscal year 2015 for the Mental Health Block Grant program and increases the set-aside to 10 percent for evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders. The increase to the set-aside for serious mental illness is fully offset by the additional funds provided to the Mental Health Block Grant program. Furthermore, after taking into account the offset funds for serious mental illness activities, the balance of the increase to the block grants will provide over \$20,000,000 in additional funds to States and territories through their traditional formula grants. The agreement directs SAMHSA to continue its collaboration with NIMH to ensure that funds from the set-aside are only used for programs showing strong evidence of effectiveness and targets the first episode of psychosis. SAMHSA shall not expand the use of the set-aside to programs outside of those that address first episode psychosis. Within six months after enactment of this Act, the agreement directs SAMHSA to provide a detailed table showing at a minimum each State's allotment, name of the program being implemented, and a short description of the program.

Project AWARE.—The agreement supports the continuation of Project AWARE which increases awareness of mental health issues and connects young people with behavioral health issues and their families with needed services. Of the amount provided for Project AWARE, the agreement provides an additional \$10,000,000 for discretionary grants to communities that have recently faced civil unrest. These

grants should focus on high risk youth and family populations in these communities and surrounding areas that have experienced significant exposure to trauma and can benefit from additional evidence-based violence prevention and community youth engagement programs as well as linkages to trauma-informed behavioral health services. SAMHSA should prioritize funding grants from communities that have formed partnerships between key stakeholders including State and local governments (including multiple cities and counties if impacted); public or private universities and colleges; and non-profit community- and faith-based organizations. The agreement includes related funding in the Department of Education. The Department of Education and SAMHSA should coordinate extensively in the administration of these resources.

Childhood Trauma.—The agreement appreciates SAMHSA's ongoing support of the National Child Traumatic Stress Network. A recent report, *Childhood Adversity Narratives*, makes clear that childhood trauma is an all-encompassing and costly national public health problem contributing directly to serious mental and medical conditions. The agreement encourages SAMHSA to more broadly disseminate information regarding evidence-based interventions for the prevention and treatment of childhood trauma so more children can benefit from proven practices.

Assisted Outpatient Treatment.—The agreement includes \$15,000,000 to implement section 224 of the Protecting Access to Medicare Act of 2014 (Public Law 113–93), the Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness (AOT). The agreement recognizes that nearly half of individuals with schizophrenia or bipolar disorder do not recognize they have a mental illness, making it exceedingly difficult for them to follow through on a treatment regimen. The AOT program will work with families and courts to allow these individuals to obtain treatment while continuing to live in

their communities and homes. AOT has been proven to reduce the imprisonment, homelessness and emergency room visit rate among this population by 70 percent. The agreement requests a report in the fiscal year 2017 budget request on the planned uses of this \$15,000,000.

SUBSTANCE ABUSE TREATMENT

Within the total provided for Substance Abuse Treatment Programs of Regional and National Significance, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Capacity:	
Opioid Treatment Programs/Regulatory Activities.....	\$8,724,000
Screening, Brief Intervention, Referral, and Treatment.....	44,889,000
<i>PHS Evaluation Funds</i>	<i>2,000,000</i>
Targeted Capacity Expansion - General.....	36,303,000
Pregnant & Postpartum Women.....	15,931,000
Recovery Community Services Program.....	2,434,000
Children and Families.....	29,605,000
Treatment Systems for Homeless.....	41,304,000
Minority AIDS.....	65,570,000
Criminal Justice Activities.....	78,000,000

Budget Activity	FY 2016 Agreement
Science and Service:	
Addiction Technology Transfer Centers.....	9,046,000
Minority Fellowship Program.....	3,539,000

Targeted Capacity Expansion.—The agreement provides \$36,303,000 for Targeted Capacity Expansion activities. The agreement provides \$25,000,000, an increase of \$13,000,000, to expand services that address prescription drug abuse and heroin use in high-risk communities. The funding provided will increase the number of States that receive funding from 11 to 22, and SAMHSA should target States with the highest rates of admissions and that have demonstrated a dramatic increase in admissions for the treatment of opioid use disorders. The United States has seen a 500 percent increase in admissions for treatment for prescription drug abuse since 2000. Moreover, according to a recent study, 28 States saw an increase in admissions for treatment for heroin dependence during the past two years. The Center for Substance Abuse Treatment is directed to include as an allowable use medication-assisted treatment and other clinically appropriate services to achieve and maintain abstinence from all opioids and heroin and prioritize treatment regimens that are less susceptible to diversion for illicit purposes.

Since the passage of the Drug Addiction Treatment Act of 2000, SAMHSA has led the nation in educating physicians, patients and treatment systems on the use of medication-assisted treatment. To keep pace with advancements in science and research, the agreement directs SAMHSA to update all of its public-facing

information and treatment locators such that all evidence-based innovations in counseling, recovery support, and abstinence-based relapse prevention medication-assisted treatments are fully incorporated.

Criminal Justice Activities.—The agreement provides \$78,000,000 for Criminal Justice Activities and directs that no less than \$60,000,000 will be used exclusively for Drug Court activities. SAMHSA is directed to ensure that all Drug Treatment Court funding is allocated to serve people diagnosed with a substance use disorder as their primary condition. SAMHSA is further directed to ensure that all drug treatment court grant recipients work directly with the corresponding State substance abuse agency in the planning, implementation, and evaluation of the grant. SAMHSA is further directed to expand training and technical assistance to drug treatment court grant recipients to ensure evidence-based practices are fully implemented.

SUBSTANCE ABUSE PREVENTION

Within the total provided for Substance Abuse Prevention Programs of Regional and National Significance, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Capacity:	
Strategic Prevention Framework/Partnerships for Success..	\$109,484,000
Strategic Prevention Framework Rx.....	10,000,000
Grants to Prevent Prescription Drug/Opioid Overdose.....	12,000,000

Budget Activity	FY 2016 Agreement
Mandatory Drug Testing.....	4,894,000
Minority AIDS.....	41,205,000
Sober Truth on Preventing Underage Drinking (STOP Act).	7,000,000
<i>National Adult-Oriented Media Public Service</i>	
<i>Campaign.....</i>	<i>1,000,000</i>
<i>Community-based Coalition Enhancement Grants.....</i>	<i>5,000,000</i>
<i>Intergovernmental Coordinating Committee on the</i>	
<i>Prevention of Underage Drinking.....</i>	<i>1,000,000</i>
Tribal Behavioral Health Grants.....	15,000,000
Science and Service:	
Center for the Application of Prevention Technologies.....	7,493,000
Science and Service Program Coordination.....	4,072,000
Minority Fellowship Program.....	71,000

The agreement directs that all of the funding appropriated explicitly for substance abuse prevention purposes both in the Center for Substance Abuse Prevention’s PRNS lines as well as the funding from the 20 percent prevention set-aside in the SAPT Block Grant be used only for bona fide substance abuse prevention programs and not for any other purpose.

Combating Opioid Abuse.—The agreement provides \$12,000,000 for discretionary grants to States to prevent opioid overdose-related deaths. This program will help States equip and train first responders with the use of devices that rapidly reverse the effects of opioids. SAMHSA is directed to ensure applicants outline how proposed activities in the grant would work with treatment and recovery communities in addition to first responders. Furthermore, the agreement provides \$10,000,000 for the Strategic Prevention Framework Rx program to increase awareness of opioid abuse and misuse in communities. SAMHSA shall collaborate with CDC to implement the most effective outreach strategy and to reduce duplication of activities.

Overdose Fatality Prevention.—The agreement reflects strong concerns about the increasing number of unintentional overdose deaths attributable to prescription and nonprescription opioids. SAMHSA is urged to take steps to encourage and support the use of Substance Abuse and Prevention Block Grant funds for opioid safety education and training, including initiatives that improve access for licensed healthcare professionals, including paramedics, to emergency devices used to rapidly reverse the effects of opioid overdoses. Such initiatives should incorporate robust evidence-based intervention training, and facilitate linkage to treatment and recovery services.

HEALTH SURVEILLANCE AND PROGRAM SUPPORT

Within the total provided for health surveillance and program support, the agreement includes the following amounts:

	FY 2016
Budget Activity	Agreement

Budget Activity	FY 2016 Agreement
Health Surveillance.....	\$16,830,000
<i>PHS Evaluation Fund</i>	<i>30,428,000</i>
Program Management.....	79,559,000
Performance and Quality Info. Systems.....	12,918,000
Public Awareness and Support.....	15,571,000
Behavioral Health Workforce.....	50,000,000
Behavioral Health Workforce Data.....	0
<i>PHS Evaluation Fund</i>	<i>1,000,000</i>

Behavioral Health Workforce Education and Training.—Eligible entities for this program shall include accredited programs that train Master’s level social workers, psychologists, counselors, marriage and family therapists, psychology doctoral interns, as well as behavioral health paraprofessionals. The agreement directs SAMHSA to share information concerning pending grant opportunity announcements with State licensing organizations and all the relevant professional associations. Furthermore, SAMHSA is directed to ensure that funding is distributed relatively equally among the participating health professions and to consider strategies such as issuing separate funding opportunity announcements for each participating health profession. In addition, the agreement directs SAMHSA to include doctoral psychology schools in the funding opportunities to support

doctoral level students completing their practicums, which are necessary to move on to internships. Awards shall be given to meritorious applications for doctoral psychology interns first, before doctoral psychology schools applying to support practicums.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

HEALTHCARE RESEARCH AND QUALITY

The agreement provides \$334,000,000 for the Agency for Healthcare Research and Quality (AHRQ). Within the total for Health Costs, Quality, and Outcomes, the agreement includes the following amounts:

Budget Activity	FY 2016 Agreement
Patient-Centered Health Research.....	\$0
Prevention/Care Management.....	11,649,000
Health Information Technology (IT).....	21,500,000
<i>Health IT to Improve Quality</i>	<i>19,000,000</i>
Patient Safety Research.....	74,253,000
<i>Healthcare-Associated Infections (HAI)</i>	
<i>Prevention</i>	<i>37,253,000</i>
<i>Combating Antibiotic-Resistant Bacteria</i>	<i>10,000,000</i>
<i>Healthcare Delivery Systems</i>	<i>10,000,000</i>

Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research.....	89,398,000
<i>Health Services Contract/IAA Research....</i>	<i>14,000,000</i>
<i>Health Services Research Grants (Non Investigator-Initiated)</i>	<i>6,000,000</i>
<i>Investigator-Initiated Research Grants.....</i>	<i>47,398,000</i>
Medical Expenditure Panel Survey.....	66,000,000
Program Management.....	71,200,000

The agreement expects AHRQ to focus its research on its traditional mission, such as improving patient safety and preventing healthcare associated infections.

Combating Antibiotic-Resistant Bacteria (CARB).—The agreement recognizes the importance of developing scientific based approaches related to CARB. The AHRQ is directed to work closely with BARDA, CDC, and NIAID and coordinate with other government-wide agencies like the Departments of Defense, Agriculture, and Veterans Affairs, to leverage resources toward this end. These activities should have coordinated goals and measurable objectives to best leverage the funds provided. The agreement requests an update in the fiscal year 2017 budget request on the planned activity.

Investigator-Initiated Research.—The agreement provides increased support for investigator-initiated research. Investigator-initiated research should not be targeted to any specific area of health services research so as to generate the best unsolicited ideas from the research community about a wide variety of topics.

Medication Assisted Treatment (MAT).—The agreement requests an update in the fiscal year 2017 budget request on activity AHRQ supports related to MAT.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

PROGRAM MANAGEMENT

The agreement includes \$3,669,744,000 for the Program Management account to support a broad range of activities including claims processing and program safeguard activities performed by Medicare contractors.

Critical Access Hospitals (CAH).—The agreement continues to note concerns about the proposal to eliminate CAH status from facilities located less than 10 miles from another hospital and reducing the reimbursement rate from 101 to 100 percent on the hospitals to properly provide care to local residents. The agreement directs the Centers for Medicare & Medicaid Services (CMS) to engage with CAH facilities to assess the impact of the proposed reimbursement reduction and provide a report within 180 days of enactment of this Act to the appropriate Committees of the House of Representatives and the Senate on the impact of the proposed rate reduction from the perspective of the CAH ability to fully operate if the reduction is implemented.

Health Insurance Exchange Transparency.—The agreement continues to include bill language in section 223 that requires CMS to provide cost information for the following categories: Federal Payroll and Other Administrative Costs; Exchange-related Information Technology (IT); Non-IT Program Costs, including Health Plan Benefit and Rate Review, Exchange Oversight, Payment and Financial Management, Eligibility and Enrollment; Consumer Information and Outreach, including the Call Center, Navigator Grants and Consumer Education and Outreach; Exchange Quality Review; Small Business Health Options Program and Employer Activities; and Other Exchange Activities. Cost information should be provided for each fiscal year since the enactment of the Patient Protection and

Affordable Care Act (Public Law 111–148). CMS is also required to include the estimated costs for fiscal year 2017.

Medicare Advantage in the Territories.—The agreement is concerned with the lack of availability of data to accurately calculate Medicare Advantage payments in the territories. The Secretary is directed to examine the unique costs associated with delivering care in the territories and submit a report to the Committees on Appropriations of the House of Representatives and the Senate within 120 days on availability of data for determining Medicare Advantage payments in the territories.

Prescription Drug Report.—The agreement directs the Secretary of HHS in consultation with the Secretary of the Department of Veterans Affairs, to submit a report to the Committee on Appropriations of the House of Representatives and the Senate, using data only available under current law that is not proprietary, not later than 180 days after the date of the enactment of this Act to which this explanatory statement pertains regarding the following topics, as described further below: price changes of prescription drugs (net of rebates) since 2003; access to prescription drugs by patients in the four programs listed below; health outcomes and patient satisfaction with care in the four programs listed below; and an analysis of the current cost and length of time necessary to bring new drugs to market.

The report should include prescription drug prices (net of rebates) paid by Federal programs for the 10 most frequently prescribed drugs and the 10 highest-cost drugs under the following programs:

1. The Medicare program under part B of title XVIII of the Social Security Act.
2. The Medicare prescription drug program under part D of title XVIII of the Social Security Act.

3. The Medicaid program under title XIX of the Social Security Act.

4. The Department of Veterans Affairs.

In addition, the report should include total annual prescription drug costs (net of rebates) to the Medicare program under part B of title XVIII of the Social Security Act, the Medicare prescription drug program under part D of title XVIII of such Act, the Medicaid program under title XIX of such Act, and the Department of Veterans Affairs as a percentage of total health care program expenditures. The report shall make note that the total annual prescription drugs costs do not adjust for biomedical inflation. The Secretary of HHS shall review how the Federal Government has achieved cost reductions for drugs since 2001.

The report should also include an evaluation of access to prescription drugs by the four programs listed above, measured consistently across each program using one or more metrics that are generally accepted by healthcare professionals and health policy experts as reliable and appropriate measures of patient access to prescription drugs. The evaluation of patient access shall take into account the extent to which each program uses: formularies (including the breadth and adequacy of such formularies); utilization management techniques; and the average interval between the time a patient attempts to fill a prescription and receipt of the prescription drug, as applicable.

The report should also include an evaluation of patient satisfaction with care (based on a survey with statistically significant results) and of patient outcomes in the four programs listed above, measured consistently across these programs using one or more metrics that are generally accepted by healthcare professionals and health policy experts as reliable and appropriate measures of patient health outcomes and patient satisfaction with care, respectively.

Finally, the report should include an analysis of the current cost and length of time necessary to bring new drugs to market including the impact of biomedical inflation.

Recovery Audit Contractors (RACs).—The agreement reiterates the fiscal year 2015 explanatory statement language directing HHS to take steps to improve consistency, transparency, and processing of appeals. CMS is encouraged, within the existing authorities, to use offsetting collections it maintains from the RAC program to further educate health care providers on how to reduce errors and take other actions aimed at reducing the backlog of appeals at the Office of Medicare Hearings and Appeals. The agreement expects audits to be conducted in a manner that is valid and statistically sound and requests CMS to continue to monitor the return on investment for compensating auditors on a contingency fee basis, review contractor audit practices, and provide an update on actions related to these items in the fiscal year 2017 budget request. The agreement reiterates its request for CMS’s actuarial data to be included in the annual budget request as noted in the fiscal year 2015 explanatory statement. Finally, CMS is expected to provide the Committees on Appropriations of the House of Representatives and the Senate a quarterly update from the inter-agency working group actions taken or planned to address the various issues related to the RAC process.

Risk Corridor Program.—The agreement continues bill language to prevent the CMS Program Management appropriation account from being used to support risk corridor payments. The agreement directs CMS to provide a report starting with plan year 2014 and continuing through the duration of the program to the Committees on Appropriations of the House of Representatives and the Senate detailing the receipts and transfer of payments for the Risk Corridor Program.

State-Based Exchanges (SBEs).—CMS shall ensure that SBEs are not using section 1311 funds for operational expenses which is specifically prohibited by law. SBEs were expected to be self-sustaining by 2015 and were specifically prohibited from using these funds for operational costs after January 1, 2015. The agreement directs CMS to implement the recommendations put forth by the HHS Office of Inspector General (OIG) in their Early Alert Memorandum (A-01-14-02509) issued on April 27, 2015, and expects a detailed report providing an update on these efforts 120 days after enactment of this Act. CMS and the OIG shall immediately notify the Committees on Appropriations of the House of Representatives and the Senate of any unauthorized use of section 1311 funds along with a detailed report, which shall include how CMS plans to recoup those funds from the State.

Third Party Premium Assistance.—The agreement is concerned about the CMS Interim Final Rule: Patient Protection and Affordable Care Act; Third Party Payment of Qualified Health Plan Premiums, which allows marketplace insurance plans to prohibit the acceptance of health insurance premium assistance from non-profit organizations. CMS is directed to submit a report to the Committees on Appropriations of the House of Representatives and the Senate within 90 days explaining the rationale for excluding non-profit organizations.

HEALTH CARE FRAUD AND ABUSE CONTROL ACCOUNT

The agreement includes \$681,000,000, to be transferred from the Medicare trust funds, for Health Care Fraud and Abuse Control activities. This includes a base amount of \$311,000,000 and an additional \$370,000,000 through a budget cap adjustment authorized by section 251(b) of the Balanced Budget and Emergency Deficit Control Act of 1985.

Senior Medicare Patrol Program.—The bill includes language to fully fund the Senior Medicare Patrol Program administered through the Administration for Community Living from the level provided in this account.

ADMINISTRATION FOR CHILDREN AND FAMILIES

REFUGEE AND ENTRANT ASSISTANCE

Victims of Trafficking.—The agreement includes \$13,000,000 for services for foreign national victims, and \$5,755,000 to improve services available for U.S. citizens and legal permanent residents. Within the total for Victims of Trafficking, the Department is directed to increase funding for the national human trafficking hotline to help respond to increased call volume and overall need for services.

CHILDREN AND FAMILIES SERVICES PROGRAMS

Head Start.—The agreement includes an increase of \$294,000,000 in quality improvement funds to support grantees in expanding to full-school-day and full-school-year services. While early childhood research shows that expanded services are associated with better cognitive outcomes, the agreement notes that communities will face logistical and financial challenges moving toward this model. Since the recommendation is less than the amount requested to move all programs to full day/full year services, the Department is expected to prioritize grantees that volunteer for this expansion and can do so in a way that limits disruption to existing programs and services. The Department is directed to provide technical assistance to grantees and carefully monitor issues that arise as grantees implement the expanded service model.

Early Head Start Expansion/Child Care Partnerships.—The agreement includes a \$135,000,000 increase for expanding Early Head Start (EHS), including

through EHS-Child Care Partnerships. The agreement reflects support for EHS-Child Care Partnerships, which is a promising model that significantly expands on what many high-quality providers were already doing in their communities. However, EHS-Child Care Partnerships will not be viable in every community. Prioritizing this one model will limit the pool of competitive applicants, particularly in rural communities, and discourage the expansion of Early Head Start programs designed to meet the needs of their local communities. This new fiscal year 2016 funding, whether for expansion, conversion, or partnerships, should give equal priority to each model and be awarded based on how effectively the model design fits the needs of the local community.

Runaway and Homeless Youth Program.—The agreement does not include funding for the “Prevalence, Needs and Characteristics of Homeless Youth” study.

Child Abuse and Neglect. —The agreement is aware of the recommendations contained within the Institute of Medicine’s (IOM) New Directions in Child Abuse and Neglect Research report as well as other federally supported research. The agreement encourages the Administration for Children and Families (ACF), in conjunction with other relevant agencies in HHS, such as NIH or SAMHSA, to synthesize research done by IOM and other federal partners to identify gaps in this area and to develop a peer reviewed approach to address research gaps related to child abuse and neglect.

Child Welfare Research, Training and Demonstration.—The agreement includes funding within this program to continue the National Survey of Child and Adolescent Well-Being.

Social Services and Income Maintenance Research.—The agreement includes \$750,000 for the Secretary to enter into an agreement with the National Academy of Sciences to provide an evidence-based, non-partisan analysis of the macroeconomic, health, and crime/social costs of child poverty, to study current

efforts aimed at reducing poverty, and to propose recommendations with the goal of reducing the number of children living in poverty in the United States by half in 10 years.

Native American Programs.—The agreement includes \$3,000,000 for the Generation Indigenous initiative focused on improving Native American language instruction across the education continuum.

Domestic Violence Hotline.—The agreement includes an increase of \$3,750,000 for the Hotline. These funds shall be used to develop a tribal hotline, provide additional phone advocates to ensure the Hotline can answer all contacts, and help make the Love Is Respect website a complete resource for teens and youth seeking to prevent and end abusive relationships.

Faith-Based Center.—The agreement transfers the Center for Faith-Based and Neighborhood Partnerships to the General Departmental Management account under the Office of the Secretary.

ADMINISTRATION FOR COMMUNITY LIVING

AGING AND DISABILITY SERVICES PROGRAMS

Aging Network Support Activities.—The agreement provides \$9,961,000 for Aging Network Support Activities. The agreement includes \$2,500,000 to help provide supportive services for aging Holocaust survivors living in the United States.

Senior Medicare Patrol Program.—The agreement includes bill language fully funding the Senior Medicare Patrol Program from the Health Care Fraud and Abuse Control Account in the Centers for Medicare & Medicaid Services.

Elder Rights Support Activities.—The agreement includes \$11,874,000 for Elder Rights Support Activities, of which \$8,000,000 is included for the Elder

Justice and Adult Protective Services program to provide competitive grants to States to test and evaluate innovative approaches to preventing and responding to elder abuse.

Traumatic Brain Injury.—The agreement includes bill language transferring the Traumatic Brain Injury program from HRSA to ACL.

Developmental Disabilities Projects of National Significance.—The agreement includes \$643,000 for technical assistance and training for the State Councils on Developmental Disabilities and \$1,000,000 to fund transportation assistance activities for older adults and persons with disabilities. The transportation activities should focus on the most cost-effective and sustainable strategies that can be replicated to other communities.

University Centers for Excellence in Developmental Disabilities.—Within the amount appropriated for the University Centers for Excellence in Developmental Disabilities (UCEDD), the agreement provides no less than the fiscal year 2015 level for technical assistance for the UCEDD network.

Medicaid-Licensed Intermediate Care Facilities.—There is a nationwide trend towards deinstitutionalization of patients with intellectual or developmental disabilities in favor of community-based settings. The Department is strongly urged to continue to factor the needs and desire of patients, their families, caregivers, and other stakeholders, as well as the need to provide proper settings for care, into its enforcement of the Developmental Disabilities Act. The agreement includes bill language requiring notification of affected individuals of their legal rights in this regard.

Independent Living.—The agreement provides \$101,183,000 for the Independent Living program, of which \$22,878,000 is for the Independent Living State Grants program and \$78,305,000 is for the Centers for Independent Living program.

Assistive Technology.—The agreement includes \$2,000,000 for competitive grants as specified in House Report 114-195 to accompany H.R. 3020.

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

Breast Cancer Patient Education Campaign.—The agreement directs the Secretary to plan and implement the breast cancer patient education campaign and the annual update in the congressional justification as described in the Senate fiscal year 2016 report (114-74) accompanying S. 1695.

Center for Faith-Based and Neighborhood Partnerships.—To complete the realignment of the Center for Faith-Based and Neighborhood Partnerships from ACF to the Secretary's Office of Intergovernmental and External Affairs, the agreement transfers the Center for Faith-Based and Neighborhood Partnerships' budget of \$1,299,000 from ACF to the General Departmental Management account as requested in the Administration's budget.

Healthcare and Education Costs of Illegal Immigration.—The agreement directs the Department of Health and Human Services to provide a report to the Committees on Appropriations of the House of Representatives and the Senate on available information regarding the costs borne by State and local governments for providing services to individuals without legal immigration status, including the federal resources from the Department of Health and Human Services that are being used to assist States in fiscal year 2016 to cover these expenses.

Seafood Sustainability.—The agreement prohibits the Department from using or recommending third party, nongovernmental certification for seafood sustainability.

Severe Wounds.—The agreement directs the Secretary to conduct the study on the treatment needs of individuals requiring specialized wound care as described in the Senate fiscal year 2016 report (114-74) accompanying S. 1695.

Lupus Initiative.—The agreement continues to provide \$2,000,000 for Lupus activities at the Office of Minority Health (OMH). Within this funding, the agreement includes \$1,000,000 to complete the implementation of the health education program in fiscal year 2016 to transition to another priority in the Lupus community. Clinical trial education and successful recruitment of minorities into trials is a significant challenge in the drug development for Lupus. Therefore, OMH shall initiate a program to develop a clinical trial education action plan for Lupus and begin preliminary steps towards implementation of the action plan. OMH shall work with the relevant Lupus stakeholders in this effort. The agreement includes the remaining \$1,000,000 for this new initiative, and it should focus on developing public-private and community partnerships, evaluate current minority clinical trial education and participation programs, and development of a research plan for creating new clinical trial education models in lupus. OMH shall provide an update to the Committees on Appropriations of the House of Representatives and the Senate on the progress of this new initiative 120 days after enactment of this Act.

Office of Women's Health.—The agreement includes \$3,100,000 to continue the State partnership initiative to reduce violence against women, which provides funding to State-level public and private health programs to improve healthcare providers' ability to help victims of violence and improve prevention programs.

Idea lab and Digital Services.—The agreement does not include funding for either the proposed “Idea lab” or the Digital Services team.

Overhead costs.—The agreement continues to direct the Department to include the amount and percentage of administrative and overhead costs spent by the

Department for every program, project and activity in the fiscal year 2017 justification and each year thereafter.

Health Reform Oversight.—The agreement directs GAO to conduct a comprehensive review of the process and coordination between HHS and the Department of the Treasury functions with respect to health care subsidies and to make recommendations to prevent improper payments, as outlined in House Report 114-195 to accompany H.R. 3020.

Quick Health Data.—The agreement directs the Secretary to continue the operation of the Quick Health Data Online system. The Secretary is directed to submit a report to the Committees on Appropriations of the House of Representatives and the Senate on the feasibility of moving the online system to another HHS agency.

Children with Disabilities.—The agreement recognizes the importance of accurate, complete, confidential, and transportable health records, especially for those children most in need of care, such as children with disabilities. The agreement urges the Office of the Assistant Secretary for Health to support a demonstration project to test new and improved methods of providing a patient-centered electronic medical record that is complete and interoperable, secure, and cost effective for children with disabilities.

OFFICE OF MEDICARE HEARINGS AND APPEALS

Appeals Backlog.—The substantial backlog in the number of cases pending before the administrative law judges at the Office of Medicare Hearings and Appeals (OMHA) is a serious concern. Specifically, the number of appeals related to RACs has risen dramatically in the past years. The agreement directs OMHA to use the additional funds provided to address the current backlog and requests a spend plan within 45 days after enactment of this Act. OMHA should focus on

reducing the backlog of appeals without undermining the accuracy and quality of their decisions. Furthermore, in collaboration with the intra-agency working group focusing on RACs, OMHA shall provide semi-annual updates to the Committees on Appropriations of the House of Representatives and the Senate reflecting the total number of appeals filed, appeals pending, and appeals disposed of for all four levels of the appeal process.

OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY

Precision Medicine.—The agreement encourages the coordination and development of data standards necessary to advance the Precision Medicine Initiative.

OFFICE OF INSPECTOR GENERAL

The agreement includes \$75,000,000 for the HHS Office of Inspector General (OIG) account. The agreement expects the OIG to continue to improve its annual budget request with more details and performance measures related to discretionary oversight.

PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

The agreement provides \$1,532,958,000 for the Public Health and Social Services Emergency Fund to support a comprehensive program to prepare for and respond to the health and medical consequences of all public health emergencies, including bioterrorism, and support the cybersecurity efforts of HHS.

Biomedical Advanced Research and Development Authority (BARDA).—The agreement increases funding for BARDA to support its work on combatting antibiotic resistance (CARB) and other priorities that address chemical, biological, radiological, and nuclear threats. BARDA is directed to work closely with CDC, AHRQ, and NIAID on CARB and coordinate with other government agencies such as the Departments of Defense, Agriculture, and Veterans Affairs, to leverage

resources to develop therapeutics. The agreement provides increased support to NIAID and CDC and directs these organizations to jointly work with BARDA on coordinated goals, measurable objectives, and funding plans that will spur research and development on CARB and build laboratory capacity in States. The agreement requests an update in the fiscal year 2017 budget request on the joint BARDA, NIAID, and CDC goals and measurable objectives to ensure the best leveraging of the funds provided.

Centers for Innovation in Advanced Development and Manufacturing (ADM).—The agreement notes BARDA has partnered with private sector entities in recent years to develop centers to improve access to ADM capabilities. To further enhance the Nation’s preparedness and response capabilities, BARDA is encouraged to review the ADM network’s current access to advanced technological platforms. The review should determine if the existing network includes the necessary mix of technological capabilities to address potential gaps in the medical countermeasure enterprise and to ensure rapid deployment of medical countermeasures.

Drug Delivery Devices.—The agreement commends the Department’s efforts to develop and procure additional medical countermeasures (MCM) on top of the twelve MCMs procured since 2004. However, these MCM’s require readily available drug delivery devices. The Department is urged, as practicable, to secure enough injection devices necessary to ensure that these MCMs that require such devices can be delivered to patients in real time.

Pandemic Influenza Response Activities.—The agreement directs the Department to use available no-year carry over funding along with the resources provided to support the fiscal year 2016 budget request level of requirements to support pandemic influenza activity.

Treatment Capacity.—There is concern about the sustainability of the highly-pathogenic infectious disease treatment capacity supported by the FY 2015 Ebola emergency appropriations. Without affecting funding set aside for Project BioShield, the Assistant Secretary for Preparedness and Response should allocate a portion of the unobligated emergency funds to partially reimburse facilities for renovation and alteration undertaken in preparation for, or in response to, the need to improve preparedness and response capability at the State and local level—as authorized by the FY 2015 Ebola emergency appropriations—to help ensure that such treatment capacity is maintained.

GENERAL PROVISIONS

PREVENTION AND PUBLIC HEALTH TRANSFER TABLE

The agreement includes a provision that directs the transfer of the Prevention and Public Health (PPH) Fund. In fiscal year 2016, the level appropriated for the fund is \$932,000,000 after accounting for sequestration. The agreement includes bill language in section 221 of this Act that requires that funds be transferred within 45 days of enactment of this Act to the following accounts, for the following activities, and in the following amounts:

Agency	Budget Activity	FY 2016 Agreement
ACL	Alzheimer's Disease Prevention Education and Outreach.....	\$14,700,000
ACL	Chronic Disease Self-Management.....	8,000,000
ACL	Falls Prevention.....	5,000,000

Agency	Budget Activity	FY 2016 Agreement
CDC	Breast Feeding Grants (Hospitals Promoting Breastfeeding).....	8,000,000
CDC	Diabetes.....	73,000,000
CDC	Epidemiology and Laboratory Capacity Grants.....	40,000,000
CDC	Healthcare Associated Infections.....	12,000,000
CDC	Heart Disease & Stroke Prevention Program.....	73,000,000
CDC	Million Hearts Program.....	4,000,000
CDC	Office of Smoking and Health.....	126,000,000
CDC	Preventative Health and Health Services Block Grants.....	160,000,000
CDC	REACH.....	50,950,000
CDC	Section 317 Immunization Grants.....	324,350,000
CDC	Lead Poisoning Prevention.....	17,000,000
CDC	Early Care Collaboratives.....	4,000,000
SAMHSA	Suicide Prevention (Garrett Lee Smith).....	12,000,000

The agreement modifies a provision requiring advanced Congressional notification of certain public reports.

The agreement includes a new provision related to expiring HRSA balances.

The agreement restates a requirement for HHS to conduct an analysis of the ACA's impact on eligibility for certain discretionary programs.

The agreement includes a new provision related to breast cancer screening recommendations.

The agreement modifies a provision extending the Temporary Assistance for Needy Families program.

The agreement includes a new provision related to rural long-term care hospitals.

TITLE III

DEPARTMENT OF EDUCATION

EDUCATION FOR THE DISADVANTAGED

Striving Readers.—Not later than 30 days prior to the announcement or publication of any notice of proposed priorities or inviting applications for the Comprehensive Striving Readers Literacy program, the Department shall brief the Committees on Appropriations of the House of Representatives and the Senate, Committee on Education and the Workforce of the House of Representatives, and Committee on Health, Education, Labor and Pensions of the Senate on its plans for this grant competition and related evaluation and technical assistance.

SCHOOL IMPROVEMENT PROGRAMS

Supporting Effective Educator Development (SEED) Grants.—The agreement includes funding within the SEED set-aside for competitive grants to non-profit organizations with demonstrated effectiveness in the development and implementation of civic learning programs. Priority should be given to applicants

that demonstrate innovation, scalability, and a focus on underserved populations, including rural schools and students. The agreement also includes funding within the SEED set-aside for non-profit organizations with effective programs to enhance primary source utilization in the classroom.

Expanded Learning Time.—The agreement prohibits funds made available for 21st Century Community Learning Centers from being used to support expanded learning time unless those activities are consistent with the requirements in section 4204(a)(2) of the Elementary and Secondary Education Act (ESEA), as amended by the Every Student Succeeds Act (ESSA).

Alaska Native Educational Equity.—In awarding funds under the Alaska Native Educational Equity program, the Department shall: ensure the maximum participation of Alaska Native organizations and other required Alaska Native partners, guarantee that all grantees have meaningful plans for consultation with Alaska Native leaders, and make every effort to ensure that Alaska Natives and Alaskans represent a significant proportion of peer reviewers for grant applications.

Comprehensive Centers.—The agreement includes \$1,500,000 to establish a new comprehensive center on students at risk of not attaining full literacy skills due to a disability, in accordance with section 2244 of the ESEA, as reauthorized by the ESSA.

INDIAN EDUCATION

Native Youth Community Projects.—Within the total for Special Programs for Indian Children, the agreement includes \$22,890,000 for Native Youth Community Projects. This program makes competitive awards to support culturally-relevant coordinated strategies to improve the college- and career-readiness of Native American youth.

INNOVATION AND IMPROVEMENT

Javits Gifted and Talented.—Within the funds provided for the Javits Gifted and Talented Students Education program, the Department is directed to continue supporting a National Research Center on the Gifted and Talented.

Arts in Education.—The agreement includes an increase in the Arts in Education program to support new competitive awards to national non-profit organizations engaged in arts education, professional development activities and model arts education programs that address the arts access gap.

Innovative Approaches to Literacy.—The agreement includes \$27,000,000 for Innovative Approaches to Literacy competitive awards to national non-profit organizations or school libraries for providing books and childhood literacy activities to children and families living in high-need communities.

Fund for the Improvement of Education (FIE).—Within FIE, the agreement includes funding for the following activities in the following amounts:

Budget Activity	FY 2016 Agreement
Arts in Education.....	\$27,000,000
Non-Cognitive Skills Initiative.....	3,000,000
Full Service Community Schools.....	10,000,000
Preschool Development Grants.....	250,000,000
Innovative Approaches to Literacy.....	27,000,000

Budget Activity	FY 2016 Agreement
Javits Gifted and Talented Students Education Program	12,000,000
Presidential and Congressional History Teaching Academies	1,815,000
TOTAL.....	330,815,000

SAFE SCHOOLS AND CITIZENSHIP EDUCATION

Safe and Drug-Free Schools and Communities National Activities.—The agreement includes \$5,000,000 for competitive grants to eligible entities, including community-based organizations, Local Educational Agencies, and partnerships thereof, in communities that have experienced significant episodes of civil unrest. This funding is to support establishing school-based programs in such communities to address, including through counseling services, the comprehensive educational, behavioral, and mental health needs of youth who have experienced significant trauma related to recent events in their communities. The agreement includes related funding in the Substance Abuse and Mental Health Services Administration (SAMHSA). The Department of Education and SAMHSA should coordinate extensively in the administration of these resources.

Elementary and Secondary School Counseling Program.—The agreement includes \$49,561,000 for the Elementary and Secondary School Counseling program. School counselors help to create a safe school environment. However, too few students have access to these benefits. This program recognizes the

importance of addressing student mental health issues and the critical role that school counselors play in this area.

Carol M. White Physical Education Program.—The agreement includes \$47,000,000 for the Carol M. White Physical Education program to pay the Federal share of the costs of initiating, expanding and improving school-based physical education programs. According to the CDC, the prevalence of unhealthy body weights among children has more than doubled over the past 30 years. This program underscores the importance of supporting students’ access to physical education.

SPECIAL EDUCATION

The Department should consider ways to support paperwork reduction and administrative streamlining under the Individuals with Disabilities Education Act.

Within Technical Assistance and Dissemination, the agreement includes \$10,083,000 for education activities authorized under Public Law 108-406.

Education Technology, Media, and Materials Program.—Progress has been made with tools and services provided under the Education Technology, Media and Materials program that have allowed more than 320,000 students free access to more than 280,000 books in multiple digitally accessible formats. Understanding the obligation to serve all K-12 students, the agreement includes an additional \$2,000,000 for the purpose of expanding the program’s reach to 120,000 K-12 students with a focus in underserved areas.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

American Printing House for the Blind (APH).—The agreement continues to recognize that students who are blind or have a vision loss must have equal access to the same education content and should receive that information at the same time

as their sighted peers if they are to achieve academically. Accordingly, the agreement continues to support implementation of APH's Resources with Enhanced Accessibility for Learning (REAL) plan, and includes no less than \$475,000 for such activities. The REAL plan supports new advances in software and hardware technology to ensure that students with vision loss receive high-quality educational material in a timely manner and in the appropriate formats required to meet individual student learning needs.

National Technical Institute for the Deaf (NTID).—The agreement includes \$2,000,000 to establish a formal regional partnership, via subcontract, with at least one organization to expand the geographic reach of activities and services supported by NTID, consistent with its mission and strategic plan. The partnership activities should include a focus on promoting training and postsecondary participation in STEM fields; working with NTID faculty to develop postsecondary preparation for students; providing professional development for teachers and developing partnerships with business and industry to promote employment opportunities.

STUDENT FINANCIAL ASSISTANCE

Work Colleges.—The agreement includes \$8,390,000 for the Work Colleges program authorized under section 448 of the Higher Education Act from the Federal Work Study appropriation.

STUDENT AID ADMINISTRATION

Federal Student Loan Servicing.—The first goal of the Federal student loan servicing process should be ensuring high-quality servicing to borrowers and safeguarding taxpayer dollars. The Department recently established a common set of performance metrics by which to measure all student loan servicers to ensure

consistency and accountability toward that goal. However, in allocating new student loan volume, the Department does not apply these metrics among all servicers but only within defined subsets of servicers, contradicting the intention of common metrics. The agreement includes new bill language requiring the Department to allocate new student loan accounts based on performance compared against all servicers. The Department shall adjust allocations based on the capacity of servicers to handle all new and current volume, provided that information about servicer capacity is made publicly available. Further, in developing the framework for a new student loan servicing process, with contracts expected to be awarded in 2016, the Department should ensure the participation of a sufficient number of servicers, including in servicing consolidated student loans, to help promote high quality customer service for student loan borrowers. The agreement does not intend in any way to constrain the Department from pursuing efforts to improve the servicing process to best serve the interests of student loan borrowers and taxpayers.

The Department shall brief the Committees on Appropriations of the House of Representatives and the Senate, Committee on Education and the Workforce of the House of Representatives, and Committee on Health, Education, Labor and Pensions of the Senate within 30 days of enactment of this Act on how it plans to carry out these directives. Further, the Secretary shall, no later than March 1, 2016, publish a common policies and procedures manual for servicing that applies to all Direct Loan servicers.

HIGHER EDUCATION

TRIO.—The agreement provides funding for a new competition for the Talent Search and Educational Opportunity Centers programs as well as an increase in funding for existing grantees. The Department is strongly encouraged to publish

the notice inviting applications as soon as possible and issue award notices for these programs no later than July 31, 2016. The agreement does not include funding requested in the budget for a new TRIO Demonstration Initiative.

There is concern that the draft competitive preference priorities proposed by the Department for the Talent Search competition could exclude proven successful grantees, particularly those at under-resourced institutions and small community agencies, by awarding additional points for certain activities with varying levels of methodological rigor.

The agreement strongly urges the Secretary to give fair consideration to prior experience when making awards under the Talent Search and Educational Opportunity Center competitions.

INSTITUTE OF EDUCATION SCIENCES

Teachers-in-Training.—The National Center for Education Statistics shall submit a report by December 31, 2016 to the Committees on Appropriations of the House of Representatives and the Senate, Committee on Education and the Workforce of the House of Representatives, and Committee on Health, Education, Labor and Pensions of the Senate, using and reporting data from the most recent school year by State and each local educational agency, regarding the extent at the school-level to which students in the following categories are taught by teachers who have not yet obtained full State certification: students with disabilities, English Learners, students in rural areas, students from low-income families, and minority students. “Full State certification” means that a teacher has met all teacher preparation requirements applicable to their years of experience; that the teacher is not authorized to teach on an emergency, temporary, provisional or waiver basis; that certification may be obtained through traditional or alternative routes; and, except that when used with respect to any teacher teaching in a public charter

school, the term means that the teacher meets the requirements set forth in the State's public charter school law.

Applied Research on Infant and Toddler Education.—The foundation for success begins early in a child's life. Research shows that the achievement gap begins to emerge among children as young as nine months of age. However, there are few funding sources available to support applied research related to infant and toddler care and education. Given the demand for high-quality and enriching infant and toddler care by families at all income levels, expanded research would help inform best practices and improve the quality of care and education for infants and toddlers. The Institute is encouraged to make grant funding available for research on typically-developing infants and toddlers, as well as infants and toddlers with special needs, to help fill the existing gaps in the literature and answer the questions posed by program developers and policy makers. The Institute should collaborate with the Department of Health and Human Services in identifying research gaps and the needs of program developers and practitioners as it develops future funding opportunities in this area.

Geographic Disparities in Education Research.—The Department is encouraged to evaluate the geographic distribution of Institute of Education Sciences-funded research, and pursue efforts to expand, in particular, research on early learning programs and policies in rural and other parts of the country facing unique challenges where there is a shortage of current research.

DEPARTMENTAL MANAGEMENT

College Ratings System.—There is concern about the Department's proposal to develop a College Ratings System, as described in the framework published for public comment on December 19, 2014. The Department has since significantly

changed its plan for a College Rating System and the agreement supports the Department moving away from its originally proposed plan.

Education Costs of Illegal Immigration.—The agreement directs the Department to provide a report to the Committees on Appropriations of the House of Representatives and the Senate on available information regarding the costs borne by State and local governments for providing services to individuals without legal immigration status, including the Federal resources from the Department that are being used to assist States in fiscal year 2016 to cover these expenses.

GENERAL PROVISIONS

The agreement includes bill language extending authorization of the National Advisory Committee on Institutional Quality and Integrity through 2016.

The agreement includes a new general provision extending authority through 2016 to provide account maintenance fees to guaranty agencies for Federal student loans.

The agreement includes a new general provision requiring the Department to provide reinsurance at 100 percent of the defaulted loan claim amount for guaranty agencies.

The agreement directs the Department to submit a report to the Committees on Appropriations of the House of Representatives and the Senate, Committee on Education and the Workforce of the House of Representatives, and Committee on Health, Education, Labor and Pensions of the Senate, within 180 days of enactment of this Act on a plan to assist guaranty agencies, lenders and borrowers in the wind down of the Federal Family Education Loan (FFEL) program as the outstanding loan portfolio continues to decline. That plan shall specifically address guaranty agencies and their subsidies, the current status of the wind down, the financial stability of guaranty agencies, and an assessment of any authority necessary for

purposes of the wind down. The agreement also directs the Department to conduct outreach to current FFEL borrowers who may be eligible for income-driven repayment plans and other repayment options.

The agreement includes a general provision clarifying that funds provided in this Act for ESEA formula grant programs for academic year 2016-2017 are to be administered under the provisions of the ESEA in effect prior to the reauthorization of the ESEA by the ESSA. The transition provisions in ESSA generally call for implementation of the new law starting with the 2017-2018 school year. The general provision and the funding levels and directives included in this agreement are consistent with that intent.

The agreement includes a new general provision modifying the changes made in division G of Public Law 113-235 concerning career pathways programs.

TITLE IV

RELATED AGENCIES

COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED

Committee For Purchase From People Who Are Blind or Severely Disabled—Written Agreement Elements.—The agreement directs the Committee For Purchase From People Who Are Blind or Severely Disabled (“the Commission,” also known as the AbilityOne Commission) to enter into a written agreement with its central nonprofit agencies (CNA). The agreement shall establish key expectations for each CNA and mechanisms for the Commission to oversee their implementation. The agreement shall include the following:

1. Roles and responsibilities on the part of the Commission and the CNA in project assignment procedures, including decision-making processes,
2. Expenditures of funds, including policy governing reserve levels,
3. Performance goals and targets,
4. Governance standards and other internal controls to prevent fraud, waste, and abuse, including conflict of interest disclosures (such as the names of CNA board members who have an affiliation with nonprofits receiving contracts) and reports of alleged misconduct,
5. Access to data and records,
6. Consequences for not meeting expectations,
7. Periodic evaluations and audits on affiliates,
8. Periodic review and updates on pricing information, and
9. Provisions for updating the agreement.

Committee For Purchase From People Who Are Blind or Severely Disabled—Requested Reports.—The Committee for Purchase From People Who Are Blind or Severely Disabled shall submit in an electronic format quarterly reports, due at the end of each calendar month after the end of the fiscal year quarter, to the Committees on Oversight and Government Reform and Education and the Workforce of the House of Representatives, Committees on Homeland Security and Governmental Affairs and Health, Education, Labor, and Pensions of the Senate, and Committees on Appropriations of the House of Representatives and the Senate. The first report (Report 1) will include information on CNA Fees. The report shall include the following:

1. Each fee charged pursuant to section 51–3.5 of title 41, Code of Federal Regulations

2. Each organization charged a fee pursuant to section 51–3.5 of title 41, Code of Federal Regulations
3. For each fee charged, for each Government order, please include the following information:
 - a. name of the nonprofit agency,
 - b. description of product or service ordered,
 - c. ordering government agency,
 - d. order price (total), and
 - e. contract award ID associated with any order, where applicable.

The second report (Report 2) will include information on CNA Expenditures. Each CNA designated pursuant to section 8503(c) of title 41, United States Code shall submit, in an electronic format, a report on expenditures, due at the end of each calendar month after the end of the fiscal year quarter, to the Committees on Oversight and Government Reform and Education and the Workforce of the House of Representatives, Committees on Homeland Security and Governmental Affairs and Health, Education, Labor, and Pensions of the Senate, and Committees on Appropriations of the House of Representatives and the Senate. The report shall include the total amount obligated by the CNA in the previous quarter for each of the following:

1. Employee salaries (total), including executive salaries,
2. Employee benefits, including executive benefits,
3. Executive salaries,
4. Executive benefits,
5. Total travel expenses,
6. Executive travel,
7. Lobbying,

8. Advertising and promotion,
9. CNA reserve level, and
10. Funds spent to support the efforts of the Committee For Purchase From People Who Are Blind or Severely Disabled, including a description of the activities, services, and products supplied to the Committee For Purchase From People Who Are Blind or Severely Disabled.

Office of Inspector General.—The agreement also establishes an Office of Inspector General to improve oversight and transparency in the program. The agreement includes no less than \$750,000 for the establishment and associated administrative costs for the Office of Inspector General.

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

AmeriCorps Grants.—The agreement includes an increase in funding for both AmeriCorps formula and competitive grant programs, to be allocated consistent with the National and Community Service Act of 1990, as amended.

Training and Technical Assistance.—The agreement modifies bill language to allow the Corporation for National and Community Service (Corporation) to use existing set-asides in statute to provide training and technical assistance to AmeriCorps and other national and community service programs. The Corporation is expected to use this authority to provide additional resources directly to State Commissions to help build the capacity of State Commissions and local AmeriCorps programs in their States.

Communities Experiencing Civil Unrest.—AmeriCorps programs are uniquely situated to respond to sudden crises and episodes of civil unrest in communities, and address the longer-term challenges underlying them. The Corporation is expected to continue to support AmeriCorps program in such communities.

Professional Corps Operating Expenses.—The Corporation is directed to provide guidance on what specifically Professional Corps programs must demonstrate to receive operating funds as part of their AmeriCorps grant. The Corporation should provide programs flexibility in demonstrating this need to ensure the viability of such programs in all communities.

CORPORATION FOR PUBLIC BROADCASTING

The agreement includes an additional \$40,000,000 in fiscal year 2016 funds for the replacement of the public broadcasting interconnection system. The satellite leases for the current public television interconnection system expire in 2016, and the public radio interconnection satellite leases expire in 2018. Improved technology may enable the public television and radio stations to share certain elements of the planned interconnection system, leading to greater efficiencies.

FEDERAL MEDIATION AND CONCILIATION SERVICE

The agreement provides \$48,748,000 for the Federal Mediation and Conciliation Service. The increase of \$3,082,000 is intended to be a one-time provision for necessary relocation costs to be incurred in fiscal year 2016.

INSTITUTE OF MUSEUM AND LIBRARY SERVICES

Within the total for IMLS, the bill includes funds for the following activities in the following amounts:

Budget Activity	FY 2016 Agreement
Library Services Technology Act:	
Grants to States.....	\$155,789,000

Budget Activity	FY 2016 Agreement
Native American Library Services.....	4,063,000
National Leadership: Libraries.....	13,092,000
Laura Bush 21 st Century Librarian.....	10,000,000
Museum Services Act:	
Museums for America.....	21,149,000
Native American/Hawaiian Museum Services.....	972,000
National Leadership: Museums.....	7,741,000
African American History and Culture Act:	
Museum Grants for African American History & Culture.....	1,481,000
Program Administration.....	15,713,000
TOTAL.....	230,000,000

SOCIAL SECURITY ADMINISTRATION
SUPPLEMENTAL SECURITY INCOME

Functional Assessment Battery.—The agreement directs the Social Security Administration (SSA) to provide a report to the Committees on Appropriations of

the House of Representatives and the Senate, Committee on Finance of the Senate, and Committee on Ways and Means of the House of Representatives on how the SSA might use the National Institutes of Health's Functional Assessment Battery (FAB) as part of the disability determination process; how it would ensure the validity and accuracy of the FAB before using it for this purpose; and how it would obtain public comment and ensure transparency if the FAB is incorporated into the determination process.

LIMITATION ON ADMINISTRATIVE EXPENSES

Continuing Disability Reviews and Supplemental Security Income Redeterminations of Eligibility.—The agreement includes a total of \$1,542,000,000 for SSA to conduct Continuing Disability Reviews (CDRs) under the Disability Insurance and Supplemental Security Income (SSI) programs, and redeterminations of eligibility under the SSI program. This includes \$1,426,000,000 specified for the base and cap adjustment amounts included in the Budget Control Act of 2011, and \$116,000,000 in additional funding provided under SSA's Limitation on Administrative Expenses (LAE) account. The Commissioner may allocate more or less than \$116,000,000 from SSA's regular LAE account for CDRs and redeterminations but only for reconciling estimated and actual unit costs for conducting such activities, and after notifying the Committees on Appropriations of the House of Representatives and the Senate at least 15 days prior to any such reallocation. If less funding is allocated for such activities, the funding will be available for regular activities within the LAE account.

Representative Payee Reviews.—The agreement includes funding for SSA to continue efforts to improve oversight of the representative payee process. In the acquisition of services to conduct and manage representative payee reviews, an

eligible entity shall include, but not be limited to, any national organization with significant and demonstrable experience monitoring representative payees, identifying and preventing fraud and abuse, and addressing problems found among individuals with different types of disabilities and among different types of service providers.

TITLE V
GENERAL PROVISIONS

The agreement includes a provision requiring agencies to disclose on advertising materials that such communication is produced at U.S. taxpayer expense.

The agreement includes a provision relating to computation of pay for certain employees activated by HHS for an emergency.

The agreement modifies a provision relating to needle exchange programs.

The agreement modifies a provision relating to performance partnerships.

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DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
TITLE I--DEPARTMENT OF LABOR							
EMPLOYMENT AND TRAINING ADMINISTRATION							
Training and Employment Services							
Grants to States:							
Adult Training, current year	D	64,736	103,556	103,556	+38,820	---	FF
Advance from prior year...	NA	(712,000)	(712,000)	(712,000)	---	---	
FY 2017	D	712,000	712,000	712,000	---	---	
Subtotal		776,736	815,556	815,556	+38,820	---	
Youth Training	D	831,842	873,416	873,416	+41,574	---	FF
Dislocated Worker Assistance, current year...	D	155,530	160,860	160,860	+5,330	---	FF
Advance from prior year	NA	(860,000)	(860,000)	(860,000)	---	---	
FY 2017	D	860,000	860,000	860,000	---	---	
Subtotal		1,015,530	1,020,860	1,020,860	+5,330	---	
Subtotal, Grants to States		2,624,108	2,709,832	2,709,832	+85,724	---	UA
Current Year		(1,052,108)	(1,137,832)	(1,137,832)	(+85,724)	---	
FY 2017		(1,572,000)	(1,572,000)	(1,572,000)	---	---	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request		
National Programs:								
Dislocated Worker Assistance National Reserve:								
Current year.....	D	20,859	40,859	20,859	---	-20,000	FF	
Advance from prior year.....	NA	(200,000)	(200,000)	(200,000)	---	---		
FY 2017.....	D	200,000	200,000	200,000	---	---		
Subtotal.....		220,859	240,859	220,859	---	-20,000		
Subtotal, Dislocated Worker Assistance.....		1,236,389	1,261,719	1,241,719	+5,330	-20,000		
Native American Programs.....	D	46,082	50,000	50,000	+3,918	---	FF	UA
Migrant and Seasonal Farmworker programs.....	D	81,896	81,896	81,896	---	---	FF	UA
Women in Apprenticeship.....	D	994	---	994	---	+994	FF	
YouthBuild activities.....	D	79,689	84,534	84,534	+4,845	---	FF	
Technical assistance.....	D	---	3,232	3,232	+3,232	---		
Reintegration of Ex-Offenders.....	D	82,078	95,078	88,078	+6,000	-7,000		UA
Workforce Data Quality Initiative.....	D	4,000	37,000	6,000	+2,000	-31,000		
Apprenticeship programs.....	D	---	100,000	90,000	+90,000	-10,000		
Total, National Programs.....		515,598	692,599	625,593	+109,995	-67,006	FF	UA
Current Year.....		(315,598)	(492,599)	(425,593)	(+109,995)	(-67,006)		
FY 2017.....		(200,000)	(200,000)	(200,000)	---	---		
Total, Training and Employment Services (TES)...		3,139,706	3,402,431	3,335,425	+195,719	-67,006		
Current Year.....		(1,367,706)	(1,630,431)	(1,563,425)	(+195,719)	(-67,006)		
FY 2017.....		(1,772,000)	(1,772,000)	(1,772,000)	---	---		

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request		

Job Corps								
Operations.....	D	1,580,825	1,597,825	1,581,825	+1,000	-16,000	FF	
Construction, Rehabilitation and Acquisition.....	D	75,000	75,000	75,000	---	---	FF	
Administration.....	D	32,330	43,119	32,330	---	-10,789		

Total, Job Corps.....		1,688,155	1,715,944	1,689,155	+1,000	-26,789	UA	
Current Year.....		(1,688,155)	(1,715,944)	(1,689,155)	(+1,000)	(-26,789)	UA	
Community Service Employment For Older Americans.....	D	434,371	434,371	434,371	---	---	FF	UA
Federal Unemployment Benefits and Allowances (indefinite).....	H	710,600	664,200	861,000	+150,400	+196,800		

State Unemployment Insurance and Employment Service Operations								
Unemployment Compensation (UI):								
State Operations.....	TF	2,777,793	2,883,450	2,745,550	-32,243	-137,900		
National Activities.....	TF	12,892	14,547	14,547	+1,655	---		

Subtotal, Unemployment Compensation.....		2,790,685	2,897,997	2,760,097	-30,588	-137,900		

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Employment Service (ES):							
Allotments to States:							
Federal Funds.....	D	21,413	21,413	21,413	---	---	
Trust Funds.....	TF	642,771	642,771	658,587	+15,816	+15,816	
Supplemental grants.....	TF	---	400,000	---	---	-400,000	
Subtotal, Trust Funds.....		642,771	1,042,771	658,587	+15,816	-384,184	FF
Subtotal, Allotments to States.....		664,184	1,064,184	680,000	+15,816	-384,184	FF
ES National Activities.....	TF	19,818	19,818	19,818	---	---	
Subtotal, Employment Service.....		684,002	1,084,002	699,818	+15,816	-384,184	
Federal Funds.....		(21,413)	(21,413)	(21,413)	---	---	
Trust Funds.....		(662,589)	(1,062,589)	(678,405)	(+15,816)	(-384,184)	
Foreign Labor Certification:							
Federal Administration.....	TF	48,028	61,589	48,028	---	-13,561	
Grants to States.....	TF	14,282	14,282	14,282	---	---	
Subtotal, Foreign Labor Certification.....		62,310	75,871	62,310	---	-13,561	
One-Stop Career Centers/Labor Market Information.....	D	60,153	80,153	67,653	+7,500	-12,500	FF
Total, State UI and ES.....		3,597,150	4,138,023	3,589,878	-7,272	-548,145	
Federal Funds.....		(81,566)	(101,566)	(89,066)	(+7,500)	(-12,500)	
Trust Funds.....		(3,515,584)	(4,036,457)	(3,500,812)	(-14,772)	(-535,645)	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
State Paid Leave Fund.....	D	---	35,000	---	---	-35,000	UA
Program Administration							
Training and Employment.....	D	60,074	73,158	60,074	---	-13,084	
Trust Funds.....	TF	8,639	10,848	8,639	---	-2,207	
Employment Security.....	D	3,489	3,684	3,489	---	-195	
Trust Funds.....	TF	39,284	40,828	39,284	---	-1,564	
Apprenticeship Services.....	D	34,000	36,734	34,000	---	-2,734	
Executive Direction.....	D	7,034	9,204	7,034	---	-2,170	
Trust Funds.....	TF	2,079	2,130	2,079	---	-51	
Total, Program Administration.....		154,559	176,564	154,559	---	-22,005	
Federal Funds.....		(104,577)	(122,780)	(104,577)	---	(-18,183)	
Trust Funds.....		(49,982)	(53,804)	(49,982)	---	(-3,822)	
Total, Employment and Training Administration...		9,724,541	10,566,533	10,064,388	+339,847	-502,145	
Federal Funds.....		6,158,975	6,476,272	6,513,594	+354,619	+37,322	
Current Year.....		(4,386,975)	(4,704,272)	(4,741,594)	(+354,619)	(+37,322)	
FY 2017.....		(1,772,000)	(1,772,000)	(1,772,000)	---	---	
Trust Funds.....		3,565,566	4,090,261	3,550,794	-14,772	-539,467	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
EMPLOYEE BENEFITS SECURITY ADMINISTRATION (EBSA)						
Salaries and Expenses						
Enforcement and Participant Assistance	D	147,400	166,362	147,400	---	-18,962
Policy and Compliance Assistance	D	26,901	34,258	26,901	---	-7,357
Executive Leadership, Program Oversight and Administration	D	6,699	6,835	6,699	---	-136
Total, EBSA		181,000	207,455	181,000	---	-26,455
PENSION BENEFIT GUARANTY CORPORATION (PBGC)						
Pension Benefit Guaranty Corporation Fund						
Consolidated Administrative budget	NA	---	(431,799)	(431,799)	(+431,799)	---
Pension Insurance Activities	NA	(79,526)	---	---	(-79,526)	---
Pension Plan Termination	NA	(179,230)	---	---	(-179,230)	---
Operational Support	NA	(156,638)	---	---	(-156,638)	---
Total, PBGC (program level)		(415,394)	(431,799)	(431,799)	(+16,405)	---
WAGE AND HOUR DIVISION, Salaries and Expenses	D	227,500	277,100	227,500	---	-49,600
OFFICE OF LABOR-MANAGEMENT STANDARDS, Salaries and Expenses	D	39,129	46,981	40,593	+1,464	-6,388

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
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OFFICE OF FEDERAL CONTRACT COMPLIANCE PROGRAMS						
Salaries and Expenses	D	106,476	113,687	105,476	-1,000	-8,211
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OFFICE OF WORKERS' COMPENSATION PROGRAMS	D					
Salaries and Expenses	D	110,823	117,397	113,324	+2,501	-4,073
Trust Funds	TF	2,177	2,177	2,177	---	---
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Total, Salaries and Expenses		113,000	119,574	115,501	+2,501	-4,073
Federal Funds		(110,823)	(117,397)	(113,324)	(+2,501)	(-4,073)
Trust Funds		(2,177)	(2,177)	(2,177)	---	---
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Special Benefits						
Federal Employees' Compensation Benefits	H	207,000	207,000	207,000	---	---
Longshore and Harbor Workers' Benefits	H	3,000	3,000	3,000	---	---
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Total, Special Benefits		210,000	210,000	210,000	---	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Special Benefits for Disabled Coal Miners						
Benefit Payments	M	96,000	85,040	85,000	-11,000	-40
Administration	M	5,262	5,262	5,302	+40	+40
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Subtotal, FY 2016 program level		101,262	90,302	90,302	-10,960	---
Less funds advanced in prior year	M	-24,000	-21,000	-21,000	+3,000	---
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Total, Current Year		77,262	69,302	69,302	-7,960	---
New advances, 1st quarter, FY 2017	M	21,000	19,000	19,000	-2,000	---
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Total, Special Benefits for Disabled Coal Miners		98,262	88,302	88,302	-9,960	---
Energy Employees Occupational Illness Compensation Fund						
Administrative Expenses	M	56,406	58,552	58,552	+2,146	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

	FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Black Lung Disability Trust Fund					
Benefit Payments and Interest on Advances..... M	261,548	275,281	275,261	+13,713	---
Workers' Compensation Programs, Salaries and Expenses. M	33,321	35,244	35,244	+1,923	---
Departmental Management, Salaries and Expenses..... M	30,403	30,279	30,279	-124	---
Departmental Management, Inspector General..... M	327	327	327	---	---
Subtotal, Black Lung Disability.....	325,599	341,111	341,111	+15,512	---
Treasury Department Administrative Costs..... M	356	356	356	---	---
Total, Black Lung Disability Trust Fund.....	325,955	341,467	341,467	+15,512	---
Total, Workers' Compensation Programs...	803,623	817,895	813,822	+10,199	-4,073
Federal Funds.....	801,448	815,718	811,645	+10,199	-4,073
Current year.....	(780,446)	(796,718)	(792,645)	(+12,199)	(-4,073)
FY 2017.....	(21,000)	(19,000)	(19,000)	(-2,000)	---
Trust Funds.....	2,177	2,177	2,177	---	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA)						
Salaries and Expenses						
Safety and Health Standards.....	D	20,000	23,306	20,000	---	-3,306
Federal Enforcement.....	D	208,000	225,608	208,000	---	-17,608
Whistleblower enforcement.....	D	17,500	22,628	17,500	---	-5,128
State Programs.....	D	100,850	104,337	100,850	---	-3,487
Technical Support.....	D	24,469	24,614	24,469	---	-145
Compliance Assistance:						
Federal Assistance.....	D	68,433	73,044	68,433	---	-4,611
State Consultation Grants.....	D	57,775	57,775	57,775	---	---
Training Grants.....	D	10,537	10,687	10,537	---	-150
Subtotal, Compliance Assistance.....	D	136,745	141,506	136,745	---	-4,761
Safety and Health Statistics.....	D	34,250	38,763	34,250	---	-4,513
Executive Direction and Administration.....	D	10,973	11,309	10,973	---	-336
Total, OSHA.....		552,787	592,071	552,787	---	-39,284

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final B111	Final B111 vs. FY 2015	Final B111 vs. Request
MINE SAFETY AND HEALTH ADMINISTRATION						
Salaries and Expenses						
Coal Enforcement.....	D	167,859	175,769	167,859	---	-7,910
Metal/Non-Metal Enforcement.....	D	91,697	93,841	91,697	---	-2,144
Standards Development.....	D	5,418	6,070	5,418	---	-654
Assessments.....	D	6,978	8,122	6,978	---	-1,146
Educational Policy and Development.....	D	36,320	40,448	36,320	---	-4,128
Technical Support.....	D	33,791	34,583	33,791	---	-792
Program Evaluation and Information Resources (PEIR).....	D	17,990	19,783	17,990	---	-1,793
Program Administration.....	D	15,838	16,316	15,838	---	-478
		=====	=====	=====	=====	=====
Total, Mine Safety and Health Administration..		375,887	394,932	375,887	---	-19,045
		=====	=====	=====	=====	=====
Total, Worker Protection Agencies		1,595,779	1,751,800	1,598,744	+2,965	-153,056
Federal Funds.....		(1,593,802)	(1,749,623)	(1,598,567)	(+2,965)	(-153,056)
Trust Funds.....		(2,177)	(2,177)	(2,177)	---	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
BUREAU OF LABOR STATISTICS						
Salaries and Expenses						
Employment and Unemployment Statistics.....	D	204,788	219,129	208,000	+3,212	-11,129
Labor Market Information.....	TF	65,000	65,000	65,000	---	---
Prices and Cost of Living.....	D	200,000	216,048	207,000	+7,000	-9,048
Compensation and Working Conditions.....	D	78,000	85,793	83,500	+5,500	-2,293
Productivity and Technology.....	D	11,424	10,795	10,500	-924	-295
Executive Direction and Staff Services.....	D	33,000	35,972	35,000	+2,000	-972
		=====	=====	=====	=====	=====
Total, Bureau of Labor Statistics.....		592,212	632,737	609,000	+16,788	-23,737
Federal Funds.....		527,212	567,737	544,000	+16,788	-23,737
Trust Funds.....		65,000	65,000	65,000	---	---
OFFICE OF DISABILITY EMPLOYMENT POLICY						
Salaries and Expenses.....	D	38,500	38,203	38,203	-297	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs FY 2015	Final Bill vs Request
DEPARTMENTAL MANAGEMENT						
Salaries and Expenses						
Executive Direction	D	31,010	35,302	31,010	---	-4,292
Departmental Program Evaluation	D	8,040	9,500	8,040	---	-1,460
Legal Services	D	126,136	139,680	125,000	-1,136	-14,680
Trust Funds	TF	308	308	308	---	---
International Labor Affairs	D	91,125	94,517	86,125	-5,000	-8,392
Administration and Management	D	28,413	35,835	28,413	---	-7,422
Adjudication	D	29,420	35,854	32,000	+2,580	-3,854
Women's Bureau	D	11,536	11,788	11,536	---	-252
Civil Rights Activities	D	6,880	7,996	6,880	---	-1,116
Chief Financial Officer	D	5,061	5,205	5,061	---	-144
Total, Departmental Management		337,929	375,985	334,373	-3,556	-41,612
Federal Funds		(337,621)	(375,677)	(334,065)	(-3,556)	(-41,612)
Trust Funds		(308)	(308)	(308)	---	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Veterans Employment and Training						
State Administration, Grants.....	TF	175,000	175,000	175,000	---	---
Transition Assistance Program.....	TF	14,000	14,100	14,100	+100	---
Federal Administration.....	TF	39,458	40,487	40,487	+1,029	---
National Veterans' Employment and Training Services						
Institute.....	TF	3,414	3,414	3,414	---	---
Homeless Veterans Program.....	D	38,109	38,109	38,109	---	---
<hr/>						
Total, Veterans Employment and Training.....		269,981	271,110	271,110	+1,129	---
Federal Funds.....		38,109	38,109	38,109	---	---
Trust Funds.....		231,872	233,001	233,001	+1,129	---
<hr/>						
IT Modernization						
Departmental support systems.....	D	4,898	4,898	4,898	---	---
Infrastructure technology modernization.....	D	10,496	53,880	24,880	+14,384	-29,000
Digital Government Integrated Platform.....	D	---	60,824	---	---	-60,824
<hr/>						
Total, IT Modernization.....		15,394	119,602	29,778	+14,384	-89,824



DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request

Office of Inspector General						
Program Activities	D	76,000	82,325	80,640	+4,640	-1,685
Trust Funds	TF	5,590	5,660	5,660	+70	---

Total, Office of Inspector General		81,590	87,985	86,300	+4,710	-1,685
=====						
Total, Departmental Management		704,894	854,682	721,561	+16,667	-133,121
Federal Funds		487,124	815,713	482,592	+15,468	-133,121
Current Year		(487,124)	(815,713)	(482,592)	(+15,468)	(-133,121)
Trust Funds		237,770	238,969	238,969	+1,199	---
=====						
Total, Workforce Investment Act Programs		4,826,867	5,118,375	5,023,586	+196,719	-94,789
Current Year		(3,054,867)	(3,346,375)	(3,251,586)	(+196,719)	(-94,789)
FY 2017		(1,772,000)	(1,772,000)	(1,772,000)	---	---
=====						
Total, Title I, Department of Labor		13,346,549	14,542,276	13,730,217	+383,668	-812,059
Federal Funds		9,476,036	10,145,869	9,873,277	+397,241	-272,592
Current Year		(7,683,036)	(8,354,869)	(8,082,277)	(+399,241)	(-272,592)
FY 2017		(1,793,000)	(1,791,000)	(1,791,000)	(-2,000)	---
Trust Funds		3,870,513	4,396,407	3,856,940	-13,573	-539,467

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
TITLE II --DEPARTMENT OF HEALTH AND HUMAN SERVICES						
HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA)						
Primary Health Care						
Community Health Centers.....	D	1,491,422	1,491,422	1,491,422	---	---
Free Clinics Medical Malpractice....	D	100	100	100	---	---
Total, Primary Health Care.....		1,491,522	1,491,522	1,491,522	---	---
Health Workforce						
National Health Service Corps.....	D	---	287,370	---	---	-287,370
Training for Diversity:						
Centers of Excellence.....	D	21,711	25,000	21,711	---	-3,289
Health Careers Opportunity Program.....	D	14,189	---	14,189	---	+14,189
Faculty Loan Repayment.....	D	1,190	1,190	1,190	---	---
Scholarships for Disadvantaged Students.....	D	45,970	45,970	45,970	---	---
Health workforce diversity.....	D	---	14,000	---	---	-14,000
Total, Training for Diversity.....		83,060	86,160	83,060	---	-3,100
Training in Primary Care Medicine.....	D	38,924	38,924	38,924	---	---
Rural Physician Training Grants.....	D	---	4,000	---	---	-4,000
Oral Health Training.....	D	33,928	33,928	35,873	+1,945	+1,945

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2018
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Interdisciplinary Community-Based Linkages:						
Area Health Education Centers.....	D	30,250	---	30,250	---	+30,250
Geriatric Programs.....	D	34,237	34,237	38,737	+4,500	+4,500
Clinical Training in Interprofessional Practice.....	D	---	10,000	---	---	-10,000
Mental and Behavioral Health.....	D	8,916	8,916	9,916	+1,000	+1,000
Total, Interdisciplinary Community Linkages.....		73,403	53,153	78,903	-5,500	+25,750
Workforce Information and Analysis.....	D	4,663	4,663	4,663	---	---
Public Health and Preventive Medicine programs.....	D	21,000	17,000	21,000	---	+4,000
Nursing Programs:						
Advanced Education Nursing.....	D	63,581	63,581	64,581	+1,000	+1,000
Nurse Education, Practice, and Retention.....	D	39,913	39,913	39,913	---	---
Nursing Workforce Diversity.....	D	15,343	15,343	15,343	---	---
Loan Repayment and Scholarship Program.....	D	81,785	81,785	83,135	+1,350	+1,350
Comprehensive Geriatric Education.....	D	4,500	4,500	---	-4,500	-4,500
Nursing Faculty Loan Program.....	D	26,500	26,500	26,500	---	---
Total, Nursing programs.....		231,622	231,622	229,472	-2,150	-2,150
Children's Hospitals Graduate Medical Education.....	D	265,000	100,000	295,000	+30,000	+195,000
National Practitioner Data Bank.....	D	18,814	19,728	18,814	---	-914
User Fees.....	D	-18,814	-19,728	-18,814	---	+914
Total, Health Workforce.....		751,600	656,820	786,895	+35,295	-89,925

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2018 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Maternal and Child Health							
Maternal and Child Health Block Grant.....	D	837,000	637,000	638,200	+1,200	+1,200	
Sickle Cell Anemia Demonstration Program.....	D	4,455	4,455	4,455	---	---	UA
Traumatic Brain Injury.....	D	9,321	9,321	---	-9,321	-9,321	UA
Autism and Other Developmental Disorders.....	D	47,099	47,099	47,099	---	---	
Heritable Disorders.....	D	13,883	13,883	13,883	---	---	
Healthy Start.....	D	102,000	102,000	103,500	+1,500	+1,500	
Universal Newborn Hearing Screening.....	D	17,818	17,818	17,818	---	---	UA
Emergency Medical Services for Children.....	D	20,182	20,182	20,182	---	---	UA
Total, Maternal and Child Health.....		851,738	851,738	845,117	-6,621	-6,621	
Ryan White HIV/AIDS Program							
Emergency Assistance.....	D	655,876	655,876	655,876	---	---	
Comprehensive Care Programs.....	D	1,315,005	1,315,005	1,315,005	---	---	
AIDS Drug Assistance Program (ADAP) (NA).....	NA	(900,313)	(900,313)	(900,313)	---	---	
Early Intervention Program.....	D	201,079	280,167	205,079	+4,000	79,088	
Children, Youth, Women, and Families.....	D	75,088	---	75,088	---	+75,088	
AIDS Dental Services.....	D	13,122	13,122	13,122	---	---	
Education and Training Centers.....	D	33,611	33,611	33,611	---	---	
Special Projects of National Significance.....	D	25,000	25,000	25,000	---	---	
Total, Ryan White HIV/AIDS program.....		2,318,781	2,322,781	2,322,781	+4,000	---	UA

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Health Care Systems							
Organ Transplantation.....	D	23,549	23,549	23,549	---	---	UA
National Cord Blood Inventory.....	D	11,266	11,266	11,266	---	---	
Bone Marrow Program.....	D	22,109	22,109	22,109	---	---	
Office of Pharmacy Affairs.....	D	10,238	17,238	10,238	---	-7,000	
340B Drug Pricing User Fees.....	D	---	7,500	---	---	-7,500	
User Fees.....	D	---	-7,500	---	---	+7,500	
Poison Control.....	D	18,846	18,846	18,846	---	---	
National Hansen's Disease Program.....	D	15,206	15,206	15,206	---	---	
Hansen's Disease Program Buildings and Facilities.....	D	122	122	122	---	---	
Payment to Hawaii, Treatment of Hansen's.....	D	1,857	1,857	1,857	---	---	
Total, Health Care Systems.....		103,193	110,193	103,193	---	-7,000	

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 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Rural Health							
Rural Outreach Grants.....	D	58,000	58,000	63,500	+4,500	+4,500	UA
Rural Health Research/Policy Development.....	D	9,351	9,351	9,351	---	---	
Rural Hospital Flexibility Grants.....	D	41,609	26,200	41,609	---	+15,409	UA
Rural and Community Access to Emergency Devices.....	D	4,500	---	---	+4,500	---	UA
State Offices of Rural Health.....	D	9,511	9,511	9,511	---	---	UA
Black Lung Clinics.....	D	6,788	6,788	6,788	---	---	UA
Radiation Exposure Screening and Education Program...	D	1,834	1,834	1,834	---	---	UA
Telehealth.....	D	14,900	14,900	17,000	+2,100	+2,100	UA
Total, Rural Health		147,471	127,582	149,571	+2,100	+22,009	
Family Planning.....	D	286,479	300,000	286,479	---	-13,521	UA
Program Management.....	D	154,000	157,081	154,000	---	-3,081	
Vaccine Injury Compensation Program Trust Fund							
Post-FY 1988 Claims.....	M	235,000	237,000	237,000	+2,000	---	
HRSA Administration.....	TF	7,500	7,500	7,500	---	---	
Total, Vaccine Injury Compensation Trust Fund..		242,500	244,500	244,500	+2,000	---	
Total, Health Resources and Services Administration.		6,347,284	6,482,177	6,384,058	+36,774	-78,119	

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 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
CENTERS FOR DISEASE CONTROL AND PREVENTION							
Immunization and Respiratory Diseases.....	D	573,105	537,766	459,055	-114,050	-78,711	UA
Pandemic Flu balances (Public Law 111-32):	NA	(15,000)		(15,000)	---	(+15,000)	
Prevention and Public Health Fund 1/.....	NA	(210,300)	(210,300)	(324,350)	(+114,050)	(+114,050)	
Subtotal.....		(798,405)	(748,066)	(798,405)	---	(+50,339)	
HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases, and Tuberculosis Prevention	D	1,117,809	1,161,747	1,122,278	+4,669	-39,469	UA
Emerging and Zoonotic Infectious Diseases, Prevention and Public Health Fund 1/..	D	352,990	644,687	527,885	+174,895	-116,802	
	NA	(52,000)	(54,580)	(52,000)	---	(-2,580)	
Subtotal.....		404,990	699,287	579,885	+174,895	-119,382	
Chronic Disease Prevention and Health Promotion...	D	747,220	577,854	838,146	+90,928	+260,292	UA
Prevention and Public Health Fund 1/.....	NA	(452,000)	(460,204)	(338,950)	(-113,050)	(-141,254)	
Subtotal.....		1,199,220	1,058,058	1,177,096	-22,124	+119,038	
Birth Defects, Developmental Disabilities, Disabilities and Health.....	D	131,781	63,815	135,610	+3,829	+71,795	UA
Prevention and Public Health Fund 1/..	NA		(67,966)		---	(-67,966)	
Subtotal.....	NA	131,781	131,781	135,610	+3,829	+3,829	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Public Health Scientific Services.....	D	481,061	474,559	491,597	+10,536	+17,038	
Prevention and Public Health Fund 1/.....	NA	---	(64,250)	---	---	(-64,250)	
Subtotal.....		(481,061)	(538,809)	(491,597)	(+10,536)	(-47,212)	
Environmental Health.....	D	166,404	141,500	165,303	-1,101	+23,803	UA
Prevention and Public Health Fund 1/.....	NA	(13,000)	(37,000)	(17,000)	(+4,000)	(-20,000)	
Subtotal.....		179,404	178,500	182,303	+2,899	+3,803	
Injury Prevention and Control.....	D	170,447	256,977	236,059	+65,812	-20,918	UA
National Institute for Occupational Safety and Health.	D	334,863	283,418	339,121	+4,258	+55,703	
Energy Employees Occupational Illness Compensation Program.....	M	55,358	55,358	55,358	---	---	
Global Health.....	D	416,517	448,092	427,121	+10,604	-20,971	
Ebola funding (Public Law 113-164).....	NA	(30,000)	---	---	(-30,000)	---	
Subtotal.....		(446,517)	(448,092)	(427,121)	(-19,396)	(-20,971)	
Public Health Preparedness and Response.....	D	1,352,551	1,381,818	1,405,000	+52,449	+23,182	
Buildings and Facilities.....	D	10,000	10,000	10,000	---	---	

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 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
CDC-Wide Activities and Program Support						
Prevention and Public Health Fund 1/.....	NA	(180,000)	---	(180,000)	---	(+180,000)
Office of the Director.....	D	113,570	113,570	113,570	---	---
Title VI Ebola funding.....	NA	(1,771,000)	---	---	(-1,771,000)	---
Subtotal, CDC-Wide (including Ebola funding).....		(2,044,570)	(113,570)	(273,570)	(-1,771,000)	(+180,000)
Subtotal, CDC-Wide Activities.....		(273,570)	(113,570)	(273,570)	---	(+180,000)
Total, Centers for Disease Control						
Discretionary.....		6,023,478	6,151,161	6,326,103	+302,627	+174,942
Pandemic Flu balances (Public Law 111-32).....	NA	5,988,118	6,095,803	6,270,745	+302,627	+174,942
Prevention and Public Health Fund 1/.....	NA	(15,000)	---	(15,000)	---	(+15,000)
Title VI Ebola funding.....	NA	(887,300)	(914,300)	(892,300)	(+5,000)	(-22,000)
Total, Centers for Disease Control Program Level (including Ebola funding).....		(1,801,000)	---	---	(-1,801,000)	---
Total, Centers for Disease Control Program Level (including Ebola funding).....		(8,726,778)	(7,065,461)	(7,233,403)	(-1,493,373)	(+167,942)
Total, Centers for Disease Control Program Level		(6,925,778)	(7,065,461)	(7,233,403)	(+307,627)	(+167,942)

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 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
NATIONAL INSTITUTES OF HEALTH						
National Cancer Institute.....	D	4,950,396	5,098,479	5,214,701	+264,305	+116,222
National Heart, Lung, and Blood Institute.....	D	2,997,870	3,071,908	3,115,538	+117,668	+43,632
National Institute of Dental and Craniofacial Research	D	399,686	406,746	415,582	+15,696	+8,836
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK).....	D	1,749,681	1,788,133	1,818,357	+68,676	+30,224
Juvenile Diabetes (mandatory).....	NA	(150,000)	(150,000)	(150,000)	---	---
Subtotal, NIDDK program level.....		1,899,681	1,938,133	1,968,357	+68,676	+30,224
National Institute of Neurological Disorders and Stroke.....	D	1,605,205	1,660,375	1,696,139	+90,934	+35,764
National Institute of Allergy and Infectious Diseases.	D	4,358,841	4,614,779	4,629,928	+271,087	+15,149
Title VI Ebola funding.....	NA	(238,000)	---	---	(-238,000)	---
National Institute of General Medical Sciences.....	D	1,656,476	1,586,291	1,732,073	+75,597	+145,782
Evaluation Tap Funding.....	NA	(715,000)	(847,489)	(780,000)	(+65,000)	(-67,489)
Subtotal, NGMS program level.....		2,371,476	2,433,780	2,512,073	+140,597	+78,293

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 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Eunice Kennedy Shriver National Institute of Child Health and Human Development.....	D	1,286,571	1,318,061	1,339,802	+53,231	+21,741
National Eye Institute.....	D	684,191	695,154	715,903	+31,712	+20,749
National Institute of Environmental Health Sciences...	D	687,502	681,782	693,702	+26,200	+11,920
National Institute on Aging.....	D	1,199,468	1,267,078	1,600,191	+400,723	+333,113
National Institute of Arthritis and Musculoskeletal and Skin Diseases.....	D	521,685	533,232	542,141	+20,476	+8,909
National Institute on Deafness and Other Communication Disorders.....	D	405,302	416,241	423,031	+17,729	+6,790
National Institute of Nursing Research.....	D	140,953	144,515	146,485	+5,532	+1,970
National Institute on Alcohol Abuse and Alcoholism.....	D	447,408	459,833	467,700	+20,292	+7,867
National Institute on Drug Abuse.....	D	1,028,814	1,047,397	1,077,488	+48,874	+30,091
National Institute of Mental Health.....	D	1,483,036	1,489,417	1,548,390	+65,354	+58,973
National Human Genome Research Institute.....	D	499,356	515,491	518,956	+19,600	+3,465
National Institute of Biomedical Imaging and Bioengineering.....	D	330,192	337,314	346,795	+16,803	+8,481
National Center for Complementary and Integrative Health.....	D	124,861	127,521	130,789	+6,108	+3,268
National Institute on Minority Health and Health Disparities.....	D	269,154	281,549	279,718	+10,564	-1,831

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
John E. Fogarty International Center	D	67,786	69,505	70,447	+2,661	+942	
National Library of Medicine (NLM)	D	336,939	394,090	394,664	+57,725	+574	
National Center for Advancing Translational Sciences	D	635,230	660,131	685,417	+50,187	+25,286	
Office of the Director	D	1,401,134	1,430,028	1,558,600	+157,466	+128,572	
Common Fund (non-add)	NA	(533,039)	(553,039)	(675,639)	(+142,600)	(+122,600)	
Gabriella Miller Kids First Research Act (Common Fund) (add)	D	12,600	12,600	12,600	---	---	
Subtotal...		1,413,734	1,442,628	1,571,200	+157,466	+128,572	
Buildings and Facilities	D	128,863	128,863	128,863	---	---	
Total, National Institutes of Health (NIH)		29,369,000	30,236,511	31,304,000	+1,935,000	+1,067,489	UA
(Evaluation Tap Funding)		(715,000)	(847,489)	(780,000)	(+65,000)	(-87,489)	
(Title VI Ebola funding)		(238,000)	---	---	(-238,000)	---	
Total, NIH Program Level (including Ebola funding)		(30,322,000)	(31,084,000)	(32,084,000)	(+1,762,000)	(+1,000,000)	
Total, NIH Program Level		(30,084,000)	(31,084,000)	(32,084,000)	(+2,000,000)	(+1,000,000)	

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)						
Mental Health						
Programs of Regional and National Significance.....	D	366,597	334,289	402,609	+36,012	+68,320
Evaluation Tap Funding.....	NA	---	(5,000)	---	---	(-5,000)
Prevention and Public Health Fund 1/.....	NA	(12,000)	(38,000)	(12,000)	---	(-26,000)
Subtotal.....		378,597	377,289	414,609	+36,012	+37,320
Mental Health block grant.....	D	481,532	481,532	511,532	+50,000	+50,000
Evaluation Tap Funding.....	NA	(21,039)	(21,039)	(21,039)	---	---
Subtotal.....		(482,571)	(482,571)	(532,571)	(+50,000)	(+50,000)
Children's Mental Health.....	D	117,026	117,026	119,026	+2,000	+2,000
Grants to States for the Homeless (PATH).....	D	64,635	64,635	64,635	---	---
Protection and Advocacy.....	D	36,146	36,146	36,146	---	---
Subtotal, Mental Health.....		1,045,936	1,013,628	1,133,948	+88,012	+120,320
(Evaluation Tap Funding).....		(21,039)	(26,039)	(21,039)	---	(-5,000)
Subtotal, Mental Health program level.....		(1,078,975)	(1,077,667)	(1,166,987)	(+88,012)	(+89,320)

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Substance Abuse Treatment						
Programs of Regional and National Significance.....	D	362,002	290,701	335,345	-26,657	+44,644
Evaluation Tap Funding	NA	(2,000)	(30,000)	(2,000)	---	(-28,000)
Subtotal..		(364,002)	(320,701)	(337,345)	(-26,657)	(+16,644)
Substance Abuse block grant..	D	1,740,858	1,740,656	1,778,879	+38,223	+38,223
Evaluation Tap Funding	NA	(79,200)	(79,200)	(79,200)	---	---
Subtotal. block grant..		(1,819,856)	(1,819,856)	(1,858,079)	(+38,223)	(+38,223)
Subtotal, Substance Abuse Treatment. (Evaluation Tap Funding).		2,102,858 (81,200)	2,031,357 (109,200)	2,114,224 (81,200)	+11,566 ---	+82,867 (-28,000)
Subtotal, Program level		(2,183,858)	(2,140,557)	(2,195,424)	(+11,566)	(+54,867)
Substance Abuse Prevention						
Programs of Regional and National Significance..	D	175,219	194,450	211,219	+36,000	+16,769
Evaluation Tap Funding	NA	---	(16,468)	---	---	(-16,468)
Subtotal...		175,219	194,450	211,219	+36,000	+16,769

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Health Surveillance and Program Support.....	D	150,232	156,228	174,878	+24,646	+18,650	
Evaluation Tap Funding (NA).....	NA	(31,428)	(58,917)	(31,428)	---	(-27,489)	
Prevention and Public Health Fund 1/.....	NA	---	(20,000)	---	---	(-20,000)	
Subtotal.....		181,660	235,145	206,306	+24,646	-28,839	
Total, SAMHSA.....		3,474,045	3,395,663	3,834,269	+160,224	+238,606	UA
(Evaluation Tap Funding).....		(133,667)	(210,624)	(133,667)	---	(-78,957)	
(Prevention and Public Health Fund 1/.....)		(12,000)	(58,000)	(12,000)	---	(-46,000)	
Total, SAMHSA Program Level.....		(3,619,712)	(3,664,287)	(3,779,936)	(+160,224)	(+115,648)	
AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ)							
Healthcare Research and Quality							
Research on Health Costs, Quality, and Outcomes:							
Federal Funds.....	D	228,551	134,889	196,800	-31,751	+61,911	
Evaluation Tap funding.....	NA	---	(87,888)	---	---	(-87,888)	
Patient-Centered Outcomes Research transfer...	NA	---	(115,636)	---	---	(-115,636)	
Subtotal, Health Costs, Quality, and Outcomes... (Evaluation Tap Funding).....		(228,551)	(338,413)	(196,800)	(-31,751)	(-141,613)	
			(87,888)			(-87,888)	

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Medical Expenditures Panel Surveys:							
Federal Funds.....	D	65,447	68,877	66,000	+553	-2,877	
Program Support:							
Federal Funds.....	D	69,700	72,044	71,200	+1,500	-844	
Total, AHRQ Program Level.....		(363,698)	(363,698)	(334,000)	(-29,698)	(-29,698)	UA
Federal funds.....		(363,698)	(275,810)	(334,000)	(-29,698)	(+58,190)	
(Evaluation Tap Funding).....		---	(87,888)	---	---	(-87,888)	
Total, Public Health Service (PHS) appropriation		45,577,503	46,521,322	47,982,430	+2,404,927	+1,461,108	
Total, Public Health Service Program Level		(47,340,470)	(48,755,259)	(49,815,397)	(+2,474,927)	(+1,060,138)	
(excluding Ebola funding).....							

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
CENTERS FOR MEDICARE AND MEDICAID SERVICES						
Grants to States for Medicaid						
Medicaid Current Law Benefits	M	315,238,800	334,936,328	334,936,328	+19,697,728	---
State and Local Administration	M	18,766,022	17,771,915	17,771,915	-994,107	---
Vaccines for Children	M	4,078,617	4,109,307	4,109,307	+32,690	---
Subtotal, Medicaid Program Level		338,081,239	356,817,550	356,817,550	+18,736,311	---
Less funds advanced in prior year	M	-103,472,323	-113,272,140	-113,272,140	-9,799,817	---
Total, Grants to States for Medicaid		234,608,916	243,545,410	243,545,410	+8,936,494	---
New advance, 1st quarter, FY 2017	M	113,272,140	115,582,502	115,582,502	+2,310,362	---
Payments to Health Care Trust Funds						
Supplemental Medical Insurance	M	194,343,000	198,530,000	198,530,000	+4,187,000	---
Federal Uninsured Payment	M	187,000	158,000	158,000	-29,000	---
Program Management	M	763,000	1,044,000	1,044,000	+281,000	---
General Revenue for Part D Benefit	M	83,342,000	82,453,000	82,453,000	+19,111,000	---
General Revenue for Part D Administration	M	418,000	691,000	691,000	+273,000	---
HCFAC Reimbursement	M	153,000	291,000	291,000	+138,000	---
State Low-Income Determination for Part D	M	8,000	4,800	4,800	-1,200	---
Total, Payments to Trust Funds, Program Level		259,212,000	283,171,800	283,171,800	+23,959,800	---

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Program Management						
Research, Demonstration, Evaluation.....	TF	20,054	---	20,054	---	+20,054
Program Operations.....	TF	2,519,823	3,024,386	2,519,823	---	-504,563
State Survey and Certification.....	TF	397,334	437,200	397,334	---	-39,866
Federal Administration.....	TF	732,533	783,600	732,533	---	-51,067
Total, Program management.....		3,669,744	4,245,186	3,669,744	---	-575,442
Health Care Fraud and Abuse Control Account						
Centers for Medicare and Medicaid Services.....	TF	477,120	474,175	486,120	+9,000	+11,945
HHS Office of Inspector General.....	TF	67,200	118,631	67,200	---	-51,431
Medicaid/CHIP.....	TF	67,200	---	67,200	---	+67,200
Department of Justice.....	TF	60,480	113,194	60,480	---	-52,714
Total, Health Care Fraud and Abuse Control.....		672,000	706,000	681,000	+9,000	-25,000
Total, Centers for Medicare and Medicaid Services		611,434,800	647,250,898	646,650,458	+35,215,658	-600,442
Federal funds.....		607,093,056	642,299,712	642,299,712	+35,206,656	---
Current year.....		(493,820,916)	(526,717,210)	(526,717,210)	(+32,896,294)	---
New advance, FY 2017.....		(113,272,140)	(115,582,502)	(115,582,502)	(+2,310,362)	---
Trust Funds.....		4,341,744	4,951,186	4,350,744	+9,000	-600,442



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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
ADMINISTRATION FOR CHILDREN AND FAMILIES (ACF)						
Payments to States for Child Support Enforcement and Family Support Programs						
Payments to Territories.....	M	33,000	33,000	33,000	---	---
Repatriation.....	M	1,000	1,000	1,000	---	---
Subtotal.....		34,000	34,000	34,000	---	---
Child Support Enforcement:						
State and Local Administration.....	M	3,117,555	3,541,359	3,541,359	+423,804	---
Federal Incentive Payments.....	M	526,988	519,547	519,547	-7,421	---
Access and Visitation.....	M	10,000	10,000	10,000	---	---
Subtotal, Child Support Enforcement.....		3,654,523	4,070,906	4,070,906	+416,383	---
Total, Family Support Payments Program Level....		3,688,523	4,104,906	4,104,906	+416,383	---
Less funds advanced in previous years.....	M	-1,250,000	-1,160,000	-1,160,000	+90,000	---
Total, Family Support Payments, current year....		2,438,523	2,944,906	2,944,906	+506,383	---
New advance, 1st quarter, FY 2017.....	M	1,160,000	1,300,000	1,300,000	+140,000	---

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Low Income Home Energy Assistance (LIHEAP)							
Formula Grants.....	D	3,390,304	3,190,304	3,390,304	---	+200,000	
Utility Innovation Fund.....	D	---	200,000	---	---	-200,000	
Total, LIHEAP, Program Level.....		3,390,304	3,390,304	3,390,304	---	---	
Refugee and Entrant Assistance							
Transitional and Medical Services.....	D	383,266	426,749	490,000	+106,734	+63,251	UA
Victims of Trafficking.....	D	15,755	22,000	18,755	+3,000	-3,245	
Social Services.....	D	149,927	149,927	155,000	+5,073	+5,073	UA
Preventive Health.....	D	4,600	4,600	4,600	---	---	UA
Targeted Assistance.....	D	47,601	47,601	47,601	---	---	UA
Unaccompanied Minors.....	D	948,000	948,000	948,000	---	---	
Unaccompanied Minors Contingency Fund (CBO estimate).....	D	---	15,000	---	---	-15,000	
Victims of Torture.....	D	10,735	10,735	10,735	---	---	UA
Total, Refugee and Entrant Assistance.....		1,559,884	1,624,612	1,674,691	+114,807	+50,079	

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 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Payments to States for the Child Care and Development Block Grant	D	2,435,000	2,805,149	2,761,000	+326,000	-44,149	UA
Social Services Block Grant (Title XX)	M	1,700,000	1,700,000	1,700,000	---	---	
Children and Families Services Programs							
Programs for Children, Youth and Families:							
Head Start, current funded	D	8,598,095	10,117,706	9,168,095	+570,000	-949,611	
Consolidated Runaway, Homeless Youth Program	D	97,000	105,980	101,980	+4,980	-4,000	
Prevention Grants to Reduce Abuse of Runaway Youth	D	17,141	17,491	17,141	---	-350	
Child Abuse State Grants	D	25,310	25,310	25,310	---	---	UA
Child Abuse Discretionary Activities	D	28,744	48,744	33,000	+4,256	-15,744	
Community Based Child Abuse Prevention	D	39,764	39,764	39,764	---	---	
Abandoned Infants Assistance	D	11,083	11,083	---	-11,083	-11,083	UA
Child Welfare Services	D	268,735	266,735	266,735	---	---	
Child Welfare Training, Research, or Demonstration projects	D	15,984	15,984	17,984	+2,000	+2,000	
Adoption Opportunities	D	39,100	42,622	39,100	---	-3,522	UA
Adoption Incentive	D	37,943	37,943	37,943	---	---	
Social Services and Income Maintenance Research	D	5,762	17,762	6,512	+750	-11,250	
Native American Programs	D	46,520	50,000	50,000	+3,480	---	UA

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	FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Community Services:						
Community Services Block Grant Act programs:						
Grants to States for Community Services..... D	674,000	674,000	715,000	+41,000	+41,000	UA
Economic Development..... D	29,883	---	29,883	---	+29,883	UA
Rural Community Facilities..... D	8,500	---	8,500	---	+8,500	UA
Subtotal.....	710,383	674,000	751,383	+41,000	+77,383	
Individual Development Account Initiative..... D	18,950	18,950	18,950	---	---	UA
Subtotal, Community Services.....	729,333	692,950	770,333	+41,000	+77,383	
Domestic Violence Hotline..... D	4,500	12,300	8,250	+3,750	-4,050	UA
Family Violence/Battered Women's Shelters..... D	135,000	150,000	150,000	+15,000	---	UA
Independent Living Training Vouchers..... D	43,257	43,257	43,257	---	---	
Faith-Based Center..... D	1,299	---	---	-1,299	---	
Disaster Human Services Case Management..... D	1,864	1,864	1,864	---	---	
Program Direction..... D	199,701	211,767	205,000	+5,299	-6,767	
Total, Children and Families Services Programs..	10,348,115	11,911,242	10,984,268	+638,153	-926,974	



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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Promoting Safe and Stable Families.....	M	345,000	345,000	345,000	---	---
Discretionary Funds..	D	59,765	89,765	59,765	---	-30,000
Total, Promoting Safe and Stable Families..		404,765	434,765	404,765		-30,000
Payments for Foster Care and Permanency						
Foster Care.....	M	4,289,000	4,772,100	4,772,100	+483,100	---
Adoption Assistance	M	2,504,000	2,562,900	2,562,900	+58,900	---
Guardianship.....	M	99,000	123,000	123,000	+24,000	---
Independent Living.....	M	140,000	140,000	140,000	---	---
Total, Payments to States		7,032,000	7,598,000	7,598,000	+566,000	---
Less Advances from Prior Year.....	M	-2,200,000	-2,300,000	-2,300,000	-100,000	---
Total, payments, current year.....		4,832,000	5,298,000	5,298,000	+466,000	---
New Advance, 1st quarter, FY 2017.....	M	2,300,000	2,300,000	2,300,000	---	---
Total, ACF.....		30,566,591	33,708,978	32,757,934	+2,191,343	-951,044
Current year.....		(27,106,591)	(30,108,978)	(29,157,934)	(+2,051,343)	(-951,044)
FY 2017.....		(3,460,000)	(3,600,000)	(3,600,000)	(+140,000)	---
Total, ACF Program Level..		30,566,591	33,708,978	32,757,934	+2,191,343	-951,044

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
ADMINISTRATION FOR COMMUNITY LIVING						
Aging and Disability Services Programs						
Grants to States:						
Home and Community-based Supportive Services.....	D	347,724	386,182	347,724	---	-38,458
Preventive Health.....	D	19,848	19,848	19,848	---	---
Protection of Vulnerable Older Americans-Title VII	D	20,658	20,658	20,658	---	---
Subtotal.....		388,230	426,688	388,230	---	-38,458
Family Support Initiative.....	D	---	15,000	---	---	-15,000
Family Caregivers.....	D	145,586	150,586	150,586	+5,000	---
Native American Caregivers Support.....	D	6,031	6,800	7,531	+1,500	+731
Subtotal, Caregivers.....		151,617	172,386	158,117	+6,500	-14,269
Nutrition:						
Congregate Meals.....	D	438,191	458,091	448,342	+10,151	-9,749
Home Delivered Meals.....	D	216,397	236,397	226,342	+9,945	-10,055
Nutrition Services Incentive Program.....	D	160,069	160,069	160,069	---	---
Nutrition Initiative.....	D	---	20,000	---	---	-20,000
Subtotal.....		814,657	874,557	834,753	+20,096	-39,804
Subtotal, Grants to States.....		1,354,504	1,473,631	1,381,100	+26,596	-92,531

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Grants for Native Americans.....	D	26,158	29,100	31,158	+5,000	+2,058	
Aging Network Support Activities.....	D	9,981	9,981	9,981	---	---	
Alzheimer's Disease Demonstrations.....	D	3,800	3,800	4,800	+1,000	+1,000	UA
Prevention and Public Health Fund 1/.....	NA	(14,700)	(14,700)	(14,700)	---	---	
Lifespan Respite Care.....	D	2,360	5,000	3,360	+1,000	-1,640	
Chronic Disease Self-Management Program.....	D	---	---	---	---	---	
Prevention and Public Health Fund 1/.....	NA	(8,000)	(8,000)	(8,000)	---	---	
Elder Falls Prevention.....	D	---	---	---	---	---	
Prevention and Public Health Fund 1/.....	NA	(5,000)	(5,000)	(5,000)	---	---	
Senior Medicare Patrol Program.....	D	8,910	8,910	---	-8,910	-8,910	
Elder Rights Support Activities.....	D	7,874	28,874	11,874	+4,000	-17,000	
Aging and Disability Resources.....	D	6,119	20,000	6,119	---	-13,881	
State Health Insurance Program.....	TF	52,115	52,115	52,115	---	---	
National Clearinghouse for Long-Term Care Information.....	D	---	1,000	---	---	-1,000	
Paralysis Resource Center.....	D	6,700	6,700	7,700	+1,000	+1,000	
Limb Loss.....	D	2,800	2,810	2,810	+10	---	
Traumatic Brain Injury.....	D	---	---	9,321	+9,321	+9,321	

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		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Developmental Disabilities Programs							
State Councils	D	71,692	71,982	73,000	+1,308	+1,018	
Protection and Advocacy	D	38,734	38,734	38,734	---	---	
Voting Access for Individuals with Disabilities	D	4,963	4,963	4,963	---	---	
Developmental Disabilities Projects of National Significance	D	8,857	14,500	10,000	+1,143	-4,500	
University Centers for Excellence in Developmental Disabilities	D	37,674	38,619	38,619	+945	---	
Subtotal, Developmental Disabilities Programs.		181,920	168,778	185,316	+3,396	-3,482	UA
Workforce Innovation and Opportunity Act							
Independent Living	D	---	106,183	101,183	+101,183	-5,000	
National Institute on Disability, Independent Living, and Rehabilitation Research	D	---	108,000	103,970	+103,970	-4,030	
Assistive Technology	D	---	31,000	34,000	+34,000	+3,000	
Subtotal, Workforce Innovation and Opportunity Act		---	245,183	239,153	+239,153	-6,030	UA

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Program Administration.....	D	30,035	40,063	40,063	+10,028	---	
Total, Administration for Community Living (ACL)		1,673,256	2,095,925	1,964,850	+291,594	-131,075	
Federal funds.....		1,621,141	2,043,810	1,912,735	+291,594	-131,075	
Trust Funds.....		(52,115)	(52,115)	(52,115)	---	---	
(Prevention and Public Health Fund 1/)		(27,700)	(27,700)	(27,700)	---	---	
Total, ACL program level.....		1,700,956	2,123,625	1,992,550	+291,594	-131,075	
OFFICE OF THE SECRETARY							
General Departmental Management							
General Departmental Management, Federal Funds.....	D	200,000	225,336	200,000	---	-25,336	UA
Teen Pregnancy Prevention.....	D						
Community Grants.....	D	101,000	104,790	101,000	---	-3,790	
Evaluation Tap Funding.....	NA	(6,800)	(6,800)	(6,800)	---	---	
Subtotal, Grants.....		(107,800)	(111,590)	(107,800)	---	(-3,790)	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Faith-Based Center.....	D	---	---	1,299	+1,299	+1,299
Sexual Risk Avoidance.....	D	5,000	---	10,000	+5,000	+10,000
Minority Health.....	D	56,670	56,670	56,670	---	---
Office of Women's Health.....	D	32,140	31,500	32,140	---	+640
Minority HIV/AIDS prevention and treatment.....	D	52,224	53,900	53,900	+1,676	---
Embryo Adoption Awareness Campaign.....	D	1,000	---	1,000	---	+1,000
DATA Act activities.....	D	---	10,320	---	---	-10,320
HHS Digital Service Team.....	D	---	10,000	---	---	-10,000
Planning and Evaluation, Evaluation Tap Funding.....	NA	(58,028)	(59,278)	(58,028)	---	(-1,250)
Total, General Departmental Management.....		448,034	492,516	456,009	+7,975	-36,507
Federal Funds.....		(448,034)	(492,516)	(456,009)	(+7,975)	(-36,507)
(Evaluation Tap Funding).....		(64,828)	(66,078)	(64,828)	---	(-1,250)
Total, General Departmental Management Program..		512,862	558,594	520,837	+7,975	-37,757
Office of Medicare Hearings and Appeals.....	TF	87,381	140,000	107,381	+20,000	-32,619
Office of the National Coordinator for Health Information Technology.....	D	60,367	---	60,367	---	+60,367
Evaluation Tap Funding.....	D	---	(91,800)	---	---	(-91,800)
Total, Program Level.....		(80,367)	(91,800)	(60,367)	---	(-31,433)

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Office of Inspector General						
Inspector General Federal Funds.....	D	71,000	83,000	75,000	+4,000	-8,000
HCFAC funding (NA).....	NA	(240,455)	(333,893)	(333,893)	(+93,438)	---
Total, Inspector General Program Level.....		(311,455)	(416,893)	(408,893)	(+97,438)	(-8,000)
Office for Civil Rights						
Federal Funds.....	D	38,798	42,705	38,798	---	-3,907
Retirement Pay and Medical Benefits for Commissioned Officers						
Retirement Payments.....	M	432,177	441,977	441,977	+9,800	---
Survivors Benefits.....	M	28,186	28,603	28,603	+417	---
Dependents' Medical Care.....	M	101,878	115,608	115,608	+13,730	---
Total, Medical Benefits for Commissioned Officers		562,241	586,188	586,188	+23,947	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Public Health and Social Services Emergency Fund (PHSSEF)						
Assistant Secretary for Preparedness and Response D						
Operations.....	D	31,305	30,938	30,938	-367	---
Preparedness and Emergency Operations.....	D	24,789	24,654	24,654	-135	---
National Disaster Medical System.....	D	50,054	49,904	49,904	-150	---
Hospital Preparedness Cooperative Agreement Grants:						
Formula Grants.....	D	254,555	254,555	254,555	---	---
Biomedical Advanced Research and Development						
Authority (BARDA).....	D	415,000	521,732	511,700	+96,700	-10,032
Ebola funding (Public Law 113-164).....	NA	(58,000)	---	---	(-58,000)	---
Title VI Ebola funding.....	NA	(733,000)	---	---	(-733,000)	---
Policy and Planning.....	D	14,877	14,877	14,877	---	---
Project BioShield.....	D	255,000	646,425	510,000	+255,000	-136,425
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Subtotal, Preparedness and Response (including Ebola funding).....	D	1,776,580	1,543,085	1,396,828	-381,952	-146,457
Subtotal, Preparedness and Response.....	D	1,045,580	1,543,085	1,396,828	+351,048	-146,457

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Assistant Secretary for Administration	D					
Assistant Secretary for Administration, Cybersecurity, Office of Security and Strategic Information	D	41,125	73,417	50,860	+9,735	-22,557
	D	7,470	7,470	7,470	---	---
Public Health and Science	D					
Medical Reserve Corps	D	8,979	6,000	6,000	-2,979	---
Office of the Secretary	D					
Pandemic Influenza Preparedness	D	71,915	170,009	72,000	+85	-98,009
Emergency response initiative	D	---	110,000	---	---	-110,000
Health insurance initiative (PHS evaluation funding)	D	---	(30,000)	---	---	(-30,000)
Subtotal, Non-pandemic flu/BioShield/Parklawn/Other construction	D	1,581,154	1,123,547	950,958	-630,196	-172,589
Total, PHSSEF (including Ebola funding)		1,908,069	1,939,981	1,532,958	-375,111	-407,023
Total, PHSSEF		1,175,069	1,909,981	1,532,958	+357,889	-377,023

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

	FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Total, Office of the Secretary.....	2,442,890	3,254,390	2,856,701	+413,811	-397,689
Federal Funds.....	2,355,509	3,114,390	2,749,320	+393,811	-365,070
Trust Funds.....	87,381	140,000	107,381	+20,000	-32,619
(Evaluation Tap Funding).....	(64,828)	(187,878)	(64,828)	---	(-123,050)
(Title VI Ebola funding).....	(733,000)	---	---	(-733,000)	---
Total, Office of the Secretary Program Level....	2,507,718	3,442,268	2,921,529	+413,811	-520,739
Total, Title II, Health and Human Services.....	691,695,040	732,831,513	732,212,371	+40,517,331	-619,142
Federal Funds.....	687,206,300	727,680,712	727,694,631	+40,488,331	+13,919
Current year.....	(570,474,160)	(608,498,210)	(608,512,129)	(+38,037,989)	(+13,919)
FY 2017.....	(116,732,140)	(119,182,502)	(119,182,502)	(+2,450,362)	---
Trust Funds.....	4,488,740	5,150,801	4,517,740	+29,000	-633,061
Pandemic Flu balances (Public Law 111-32)...	(15,000)	---	(15,000)	---	(+15,000)
Total, Prevention and Public Health Fund 1/.....	(927,000)	(1,000,000)	(932,000)	(+5,000)	(-68,000)

Title II Footnotes:

1/ Sec. 4002 of Public Law 111-148

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
TITLE III - DEPARTMENT OF EDUCATION						
EDUCATION FOR THE DISADVANTAGED						
Grants to Local Educational Agencies (LEAs)						
Basic Grants:						
Advance from prior year.	NA	(2,915,778)	(2,890,776)	(2,890,776)	(-25,000)	---
Forward funded	D	3,584,641	4,568,625	4,064,641	+500,000	-503,984 FF
Current funded	D	3,984	---	3,984	---	+3,984
Subtotal, Basic grants current year approp..		3,588,625	4,568,625	4,068,625	+500,000	-500,000
Subtotal, Basic grants total funds available		(6,484,401)	(7,459,401)	(6,959,401)	(+475,000)	(-500,000)
Basic Grants FY 2017 Advance	D	2,890,776	1,890,776	2,390,776	-500,000	+500,000
Subtotal, Basic grants, program level.....		6,459,401	6,459,401	6,459,401	---	---
Concentration Grants:						
Advance from prior year	NA	(1,362,301)	(1,362,301)	(1,362,301)	---	---
FY 2017 Advance	D	1,362,301	1,362,301	1,362,301	---	---
Subtotal.....		1,362,301	1,362,301	1,362,301	---	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Targeted Grants:							
Advance from prior year	NA	(3,281,550)	(3,294,050)	(3,294,050)	(+12,500)	---	
FY 2017 Advance	D	3,294,050	3,794,050	3,544,050	+250,000	-250,000	
Subtotal		3,294,050	3,794,050	3,544,050	+250,000	-250,000	
Education Finance Incentive Grants:							
Advance from prior year	NA	(3,281,550)	(3,294,050)	(3,294,050)	(+12,500)	---	
FY 2017 Advance	D	3,294,050	3,794,050	3,544,050	+250,000	-250,000	
Subtotal		3,294,050	3,794,050	3,544,050	+250,000	-250,000	
Subtotal, Grants to LEAs, program level		14,409,802	15,409,802	14,909,802	+500,000	-500,000	
School Improvement Grants	D	505,756	555,756	450,000	-55,756	-105,756	FF
Striving Readers	D	160,000	160,000	190,000	+30,000	+30,000	FF
State Agency Programs:							
Migrant	D	374,751	374,751	374,751	---	---	FF
Neglected and Delinquent/High Risk Youth	D	47,614	47,614	47,614	---	---	FF
Subtotal, State Agency programs		422,365	422,365	422,365	---	---	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Evaluation.....	D	710	---	---	-710	---	
Migrant Education:							
High School Equivalency Program.....	D	37,474	44,623	44,623	+7,149	---	UA
Total, Education for the disadvantaged.....		15,536,107	16,592,546	16,016,790	+480,683	-575,756	
Current Year.....		(4,694,930)	(5,751,369)	(5,175,813)	(+480,683)	(-575,756)	
FY 2017.....		(10,841,177)	(10,841,177)	(10,841,177)	---	---	
Subtotal, Forward Funded.....		(4,652,762)	(5,706,748)	(5,127,006)	(+474,244)	(-579,740)	
PRESCHOOL DEVELOPMENT GRANTS.....	D	---	750,000	---	---	-750,000	
IMPACT AID							
Basic Support Payments.....	D	1,151,233	1,151,233	1,168,233	+17,000	+17,000	
Payments for Children with Disabilities.....	D	48,316	48,316	48,316	---	---	
Facilities Maintenance (Sec. 8008).....	D	4,835	71,648	4,835	---	-66,813	
Construction (Sec. 8007).....	D	17,406	17,406	17,406	---	---	
Payments for Federal Property (Sec. 8002).....	D	66,813	---	66,813	---	+66,813	
Total, Impact aid.....		1,288,603	1,288,603	1,305,603	+17,000	+17,000	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
SCHOOL IMPROVEMENT PROGRAMS							
State Grants for Improving Teacher Quality.....	D	668,389	668,389	668,389	---	---	FF
Advance from prior year.....	NA	(1,681,441)	(1,681,441)	(1,681,441)	---	---	
FY 2017.....	D	1,681,441	1,681,441	1,681,441	---	---	
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Subtotal, State Grants for Improving Teacher Quality, program level.....		2,349,830	2,349,830	2,349,830	---	---	
Mathematics and Science Partnerships.....	D	152,717	202,717	152,717	---	-50,000	FF
Educational Technology State Grants.....	D	---	200,000	---	---	-200,000	FF
Supplemental Education Grants.....	D	16,699	16,699	16,699	---	---	
21st Century Community Learning Centers.....	D	1,151,673	1,151,673	1,166,673	+15,000	+15,000	FF
State Assessments/Enhanced Assessment Instruments.....	D	378,000	403,000	378,000	---	-25,000	FF
Education for Homeless Children and Youth.....	D	65,042	71,542	70,000	+4,958	-1,542	FF
Training and Advisory Services (Civil Rights).....	D	6,575	6,575	6,575	---	---	
Education for Native Hawaiians.....	D	32,397	33,397	33,397	+1,000	---	
Alaska Native Education Equity.....	D	31,453	32,453	32,453	+1,000	---	
Rural Education.....	D	169,840	169,840	175,840	+6,000	+6,000	FF
Comprehensive Centers.....	D	48,445	55,445	51,445	+3,000	-4,000	
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Total, School Improvement Programs.....		4,402,671	4,693,171	4,433,629	+30,958	-259,542	
Current Year.....		(2,721,230)	(3,011,730)	(2,752,188)	(+30,958)	(-259,542)	
FY 2017.....		(1,681,441)	(1,681,441)	(1,681,441)	---	---	
Subtotal, Forward Funded.....		(2,585,661)	(2,867,161)	(2,611,619)	(+25,958)	(-255,542)	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
INDIAN EDUCATION						
Grants to Local Educational Agencies.....	D	100,381	100,381	100,381	---	---
Federal Programs:						
Special Programs for Indian Children.....	D	17,993	67,993	37,993	+20,000	-30,000
National Activities.....	D	5,565	5,565	5,565	---	---
Subtotal, Federal Programs.....		23,558	73,558	43,558	+20,000	-30,000
Total, Indian Education.....		123,939	173,939	143,939	+20,000	-30,000
INNOVATION AND IMPROVEMENT						
Investing in Innovation Fund.....	D	120,000	300,000	120,000	---	-180,000
Teacher and Principal Pathways (proposed legislation).....	D	---	138,762	---	---	-138,762
Transition to Teaching.....	D	13,700	---	---	-13,700	---
School Leadership.....	D	16,368	---	16,368	---	+16,368
Charter Schools Grants.....	D	253,172	375,000	333,172	+80,000	-41,828
Magnet Schools Assistance.....	D	91,647	91,647	96,647	+5,000	+5,000
Fund for the Improvement of Education (FIE).....	D	323,000	186,926	330,815	+7,815	+163,889
Teacher Incentive Fund (Excellent Educators Grants).....	D	230,000	350,000	230,000	---	-120,000
Ready-to-Learn television.....	D	25,741	25,741	25,741	---	---
Next Generation High Schools (proposed legislation).....	D	---	125,000	---	---	-125,000
Advanced Placement.....	D	28,483	28,483	28,483	---	---
Total, Innovation and Improvement.....		1,102,111	1,601,559	1,181,226	+79,115	-420,333
Current Year.....		(1,102,111)	(1,601,559)	(1,181,226)	(+79,115)	(-420,333)

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final B111	Final B111 vs. FY 2015	Final B111 vs. Request
SAFE SCHOOLS AND CITIZENSHIP EDUCATION						
Promise Neighborhoods.....	D	56,754	150,000	73,254	+16,500	-76,746
National Programs.....	D	70,000	90,000	75,000	+5,000	-15,000
Elementary and Secondary School Counseling.....	D	49,561	49,561	49,561	---	---
Carol M. White Physical Education Program.....	D	47,000	60,000	47,000	---	-13,000
		=====	=====	=====	=====	=====
Total, Safe Schools and Citizenship Education...		223,315	349,561	244,815	+21,500	-104,746
ENGLISH LANGUAGE ACQUISITION						
Current funded.....	D	61,021	773,400	47,931	-13,090	-725,469
Forward funded.....	D	676,379	---	689,469	+13,090	+689,469
		=====	=====	=====	=====	=====
Total, English Language Acquisition.....		737,400	773,400	737,400	---	-36,000
SPECIAL EDUCATION						
State Grants:						
Grants to States Part B current year.....	D	2,214,465	2,389,465	2,629,465	+415,000	+240,000
Part B advance from prior year.....	NA	(9,283,383)	(9,283,383)	(9,283,383)	---	---
Grants to States Part B (FY 2017).....	D	9,283,383	9,283,383	9,283,383	---	---
		=====	=====	=====	=====	=====
Subtotal, program level.....		11,497,848	11,872,848	11,912,848	+415,000	+240,000

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2018
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Preschool Grants.....	D	353,238	403,238	368,238	+15,000	-35,000	FF
Grants for Infants and Families.....	D	438,556	503,556	458,556	+20,000	-45,000	FF
Subtotal, program level.....		12,289,642	12,579,642	12,739,842	+450,000	+180,000	
IDEA National Activities (current funded):							
State Personnel Development.....	D	41,630	41,630	41,630	---	---	
Technical Assistance and Dissemination.....	D	51,928	61,928	54,428	+2,500	-7,500	
Personnel Preparation.....	D	83,700	83,700	83,700	---	---	
Parent Information Centers.....	D	27,411	27,411	27,411	---	---	
Technology and Media Services.....	D	28,047	28,047	30,047	+2,000	+2,000	
Subtotal, IDEA special programs.....		232,716	242,716	237,216	+4,500	-5,500	
Total, Special education.....		12,522,358	12,822,358	12,976,858	+454,500	+154,500	
Current Year.....		(3,238,975)	(3,538,975)	(3,693,475)	(+454,500)	(+154,500)	
FY 2017.....		(9,283,383)	(9,283,383)	(9,283,383)	---	---	
Subtotal, Forward Funded.....		(3,006,259)	(3,296,259)	(3,456,259)	(+450,000)	(+160,000)	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
REHABILITATION SERVICES AND DISABILITY RESEARCH						
Vocational Rehabilitation State Grants	M	3,335,074	3,391,770	3,391,770	+56,696	---
Client Assistance State grants	D	13,000	13,000	13,000	---	---
Training	D	30,188	30,188	30,188	---	---
Demonstration and Training programs	D	5,796	5,796	5,796	---	---
Protection and Advocacy of Individual Rights (PAIR)	D	17,650	17,650	17,650	---	---
Supported Employment State grants	D	27,548	30,548	27,548	---	-3,000
Independent Living:						
State Grants	D	22,878	---	---	-22,878	---
Centers	D	78,305	---	---	-78,305	---
Services for Older Blind Individuals	D	33,317	33,317	33,317	---	---
Subtotal		134,500	33,317	33,317	-101,183	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Helen Keller National Center for Deaf/Blind Youth and Adults.....	D	9,127	9,840	10,336	+1,209	+498	
National Inst. Disability and Rehab. Research (NIDRR)	D	103,970	---	---	-103,970	---	
Assistive Technology.....	D	33,000	---	---	-33,000	---	
Subtotal, Discretionary programs.....		374,779	140,339	137,835	-236,944	-2,504	
Total, Rehabilitation services.....		3,709,853	3,532,109	3,529,805	-180,248	-2,504	UA
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES							
American Printing House for the Blind.....	D	24,931	24,931	25,431	+500	+500	
National Technical Institute for the Deaf (NTID): Operations.....	D	87,016	87,016	70,016	+3,000	+3,000	
Gallaudet University: Operations.....	D	120,275	120,275	121,275	+1,000	+1,000	
Total, Special Institutions for Persons with Disabilities		212,222	212,222	216,722	+4,500	+4,500	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
CAREER, TECHNICAL, AND ADULT EDUCATION							
Career Education:							
Basic State Grants/Secondary & Technical Education							
State Grants, current funded.....	D	326,598	526,598	326,598	---	-200,000	FF
Advance from prior year.....	NA	(791,000)	(791,000)	(791,000)	---	---	
FY 2017.....	D	791,000	791,000	791,000	---	---	
Subtotal, Basic State Grants, program level.		1,117,598	1,317,598	1,117,598	---	-200,000	
National Programs.....	D	7,421	9,421	7,421	---	-2,000	FF
Subtotal, Career Education.....		1,125,019	1,327,019	1,125,019	---	-202,000	
Adult Education:							
State Grants/Adult Basic and Literacy Education:	D						
State Grants, current funded.....	D	568,955	568,955	581,955	+13,000	+13,000	FF

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
National Leadership Activities.....	D	13,712	19,712	13,712	---	-6,000	FF
Subtotal, Adult education.....		582,667	588,667	595,667	+13,000	+7,000	UA
Total, Career, Technical, and Adult Education...		1,707,686	1,915,686	1,720,686	+13,000	-195,000	
Current Year.....		(916,686)	(1,124,686)	(929,686)	(+13,000)	(-195,000)	
FY 2017.....		(791,000)	(791,000)	(791,000)	---	---	
Subtotal, Forward Funded.....		(916,686)	(1,124,686)	(929,686)	(+13,000)	(-195,000)	
STUDENT FINANCIAL ASSISTANCE							
Pell Grants -- maximum grant (NA).....	NA	(4,860)	(4,860)	(4,860)	---	---	
Pell Grants.....	D	22,475,352	22,475,352	22,475,352	---	---	
Federal Supplemental Educational Opportunity Grants...	D	733,130	733,130	733,130	---	---	
Federal Work Study.....	D	989,728	989,728	989,728	---	---	
Total, Student Financial Assistance (SFA).....		24,198,210	24,198,210	24,198,210	---	---	
STUDENT AID ADMINISTRATION							
Salaries and Expenses.....	D	675,224	728,643	696,643	+21,419	-30,000	
Servicing Activities.....	D	721,700	855,211	855,211	+133,511	---	
Total, Student Aid Administration.....		1,396,924	1,581,854	1,551,854	+154,930	-30,000	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
HIGHER EDUCATION						
Aid for Institutional Development:						
Strengthening Institutions.....	D	80,462	80,462	86,534	+6,072	+6,072
Hispanic Serving Institutions.....	D	100,231	100,231	107,795	+7,564	+7,564
Promoting Post-Baccalaureate Opportunities for Hispanic Americans.....	D	8,992	10,565	9,671	+879	-894
Strengthening Historically Black Colleges (HBCUs). Strengthening Historically Black Graduate Institutions.....	D	227,524	227,524	244,694	+17,170	+17,170
Strengthening Predominantly Black Institutions....	D	58,840	58,840	63,281	+4,441	+4,441
Asian American Pacific Islander.....	D	9,244	9,244	9,942	+698	+698
Strengthening Alaska Native and Native Hawaiian-Serving Institutions.....	D	3,113	3,113	3,348	+235	+235
Strengthening Native American-Serving Nontribal Institutions.....	D	12,833	12,833	13,802	+969	+969
Strengthening Tribal Colleges.....	D	3,113	3,113	3,348	+235	+235
	D	25,662	25,662	27,599	+1,937	+1,937
Subtotal, Aid for Institutional development.....		530,014	531,587	570,014	+40,000	+38,427
International Education and Foreign Language:						
Domestic Programs.....	D	65,103	67,103	65,103	---	-2,000
Overseas Programs.....	D	7,061	9,061	7,061	---	-2,000
Subtotal, International Education & Foreign Lang		72,164	76,164	72,164	---	-4,000

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
Fund for the Improvement of Postsec. Ed. (FIPSE).....	D	87,775	200,000	---	-87,775	-200,000	
Postsecondary Program for Students with Intellectual Disabilities.....	D	11,800	11,800	11,800	---	---	
Minority Science and Engineering Improvement.....	D	8,971	8,971	9,648	+677	+677	
Tribally Controlled Postsec Voc/Tech Institutions.....	D	7,705	7,705	8,286	+581	+581	
Federal TRIO Programs.....	D	839,752	859,752	900,000	+60,248	+40,248	
GEAR UP.....	D	301,639	301,639	322,754	+21,115	+21,115	
Graduate Assistance in Areas of National Need.....	D	29,293	29,293	29,293	---	---	
Teacher Quality Partnerships.....	D	40,592	---	43,092	+2,500	+43,092	
Child Care Access Means Parents in School.....	D	15,134	15,134	15,134	---	---	
GPRA Data/HEA Program Evaluation.....	D	---	30,000	---	---	-30,000	UA
Total, Higher Education.....		1,924,839	2,072,045	1,982,185	+57,346	-89,860	
HOWARD UNIVERSITY							
Academic Program.....	D	191,091	194,496	191,091	---	-3,405	
Endowment Program.....	D	3,405	---	3,405	---	+3,405	UA
Howard University Hospital.....	D	27,325	27,325	27,325	---	---	
Total, Howard University.....		221,821	221,821	221,821	---	---	
COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS PROGRAM.	D	435	450	435	---	-15	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2018
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
HISTORICALLY BLACK COLLEGE AND UNIVERSITY (HBCU)						
CAPITAL FINANCING PROGRAM ACCOUNT						
HBCU Federal Administration	D	334	340	334	-6	-6
HBCU Loan Subsidies	D	19,096	19,096	20,150	+1,054	+1,054
Total, HBCU Capital Financing Program		19,430	19,436	20,484	+1,054	+1,048
INSTITUTE OF EDUCATION SCIENCES (IES)						
Research, Development and Dissemination	D	179,860	202,273	195,000	+15,140	-7,273
Statistics	D	103,080	124,744	112,000	+8,940	-12,744
Regional Educational Laboratories	D	54,423	54,423	54,423	---	---
Research in Special Education	D	54,000	54,000	54,000	---	---
Special Education Studies and Evaluations	D	10,818	13,000	10,818	---	-2,182
Statewide Data Systems	D	34,539	70,000	34,539	---	-35,461
Assessment:						
National Assessment	D	129,000	149,816	149,000	+20,000	-816
National Assessment Governing Board	D	8,235	7,827	8,235	---	+408
Subtotal, Assessment		137,235	157,443	157,235	+20,000	-208
Total, IES		573,935	675,883	618,015	+44,080	-57,868

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DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request

DEPARTMENTAL MANAGEMENT						
Program Administration:						
Salaries and Expenses.....	D	410,000	460,259	431,000	+21,000	-29,259
Building Modernization.....	D	1,000	13,830	1,000	---	-12,830
Total, Program administration.....		411,000	474,089	432,000	+21,000	-42,089

Office for Civil Rights.....	D	100,000	130,691	107,000	+7,000	-23,691
Office of Inspector General.....	D	57,791	59,256	59,256	+1,465	---
Total, Departmental management.....		568,791	664,036	598,256	+29,465	-65,780
=====						
Total, Title III, Department of Education.....		70,470,650	74,138,889	71,698,533	+1,227,883	-2,440,356
Current Year.....		(47,873,649)	(51,541,888)	(49,101,532)	(+1,227,883)	(-2,440,356)
FY 2017.....		(22,597,001)	(22,597,001)	(22,597,001)	---	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request

TITLE IV--RELATED AGENCIES						
COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED.....	D	5,362	5,441	6,191	+829	+750
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE						
Operating Expenses						
Domestic Volunteer Service Programs:						
Volunteers in Service to America (VISTA).....	D	92,364	96,885	92,364	---	-4,521
National Senior Volunteer Corps:						
Foster Grandparents Program.....	D	107,702	107,702	107,702	---	---
Senior Companion Program.....	D	45,512	45,512	45,512	---	---
Retired Senior Volunteer Program.....	D	48,903	48,903	48,903	---	---
Subtotal, Senior Volunteers.....		202,117	202,117	202,117	---	---
Subtotal, Domestic Volunteer Service.....		294,481	299,002	294,481	---	-4,521

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

	FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
National and Community Service Programs:					
AmeriCorps State and National Grants..... D	335,430	425,105	386,010	+50,580	-39,095
Innovation, Assistance, and Other Activities..... D	77,400	78,601	57,400	-20,000	-21,201
Evaluation..... D	5,000	5,000	4,000	-1,000	-1,000
National Civilian Community Corps (NCCC)..... D	30,000	30,500	30,000	---	-500
State Commission Support Grants..... D	16,038	17,000	16,038	---	-962
Subtotal, National and Community Service.....	463,868	556,206	493,448	+29,580	-62,758
Total, Operating expenses.....	758,349	855,208	787,929	+29,580	-67,279
National Service Trust..... D	209,618	237,077	220,000	+10,382	-17,077
Salaries and Expenses..... D	81,737	86,176	81,737	---	-4,439
Office of Inspector General..... D	5,250	6,000	5,250	---	-750
Total, Corp. for National and Community Service.	1,054,954	1,184,481	1,094,916	+39,962	-89,545
CORPORATION FOR PUBLIC BROADCASTING:					
FY 2018 (current) with FY 2016 comparable..... D	445,000	445,000	445,000	---	---
FY 2017 advance with FY 2015 comparable (NA)..... NA	(445,000)	(445,000)	(445,000)	---	---
FY 2016 advance with FY 2014 comparable (NA)..... NA	(445,000)	(445,000)	(445,000)	---	---
Public television interconnection system (current) D	---	40,000	40,000	+40,000	---

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DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request	
FEDERAL MEDIATION AND CONCILIATION SERVICE.....	D	45,866	48,748	48,748	+3,082	---	
FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION.....	D	16,751	17,085	17,085	+334	---	
INSTITUTE OF MUSEUM AND LIBRARY SERVICES.....	D	227,860	237,428	230,000	+2,140	-7,428	UA
MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION.....		7,650	8,700	7,765	+115	-935	
MEDICARE PAYMENT ADVISORY COMMISSION.....	TF	11,749	12,100	11,925	+176	-175	
NATIONAL COUNCIL ON DISABILITY.....	D	3,250	3,432	3,250	---	-182	UA
NATIONAL LABOR RELATIONS BOARD.....	D	274,224	278,000	274,224	---	-3,776	
NATIONAL MEDIATION BOARD.....	D	13,227	13,230	13,230	+3	---	
OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION.....	D	11,639	13,212	12,639	+1,000	-573	
RAILROAD RETIREMENT BOARD							
Dual Benefits Payments Account.....	D	34,000	29,000	29,000	-5,000	---	
Less Income Tax Receipts on Dual Benefits.....	D	-3,000	-2,000	-2,000	+1,000	---	
Subtotal, Dual Benefits.....		31,000	27,000	27,000	-4,000	---	
Federal Payments to the Railroad Retirement Accounts..	M	150	150	150	---	---	
Limitation on Administration.....	TF	111,225	119,918	111,225	---	-8,693	
Limitation on the Office of Inspector General.....	TF	8,437	9,450	8,437	---	-1,013	

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
SOCIAL SECURITY ADMINISTRATION						
Payments to Social Security Trust Funds.....	M	16,400	20,400	11,400	-6,000	-9,000
Supplemental Security Income Program						
Federal Benefit Payments.....	M	56,201,000	60,683,000	60,686,000	+4,485,000	+3,000
Beneficiary Services.....	M	70,000	70,000	70,000	---	---
Research and Demonstration.....	M	83,000	101,000	101,000	+18,000	---
Afghanistan Special Immigrant Visa.....	M	---	3,000	---	---	-3,000
Administration.....	D	4,578,978	4,765,000	4,648,733	+69,755	-116,267
Subtotal, SSI program level.....		60,932,978	65,622,000	65,505,733	+4,572,755	-116,267
Less funds advanced in prior year.....	M	-19,700,000	-19,200,000	-19,200,000	+500,000	---
Subtotal, regular SSI current year.....		41,232,978	46,422,000	46,305,733	+5,072,755	-116,267
New advance, 1st quarter, FY 2017.....	M	19,200,000	14,500,000	14,500,000	-4,700,000	---
Total, SSI program.....		60,432,978	60,922,000	60,805,733	+372,755	-116,267

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Limitation on Administrative Expenses						
OASI/DI Trust Funds.....	TF	4,913,260	5,248,808	5,100,054	+186,794	-148,554
HI/SMI Trust Funds.....	TF	1,755,378	1,858,882	1,777,800	+22,424	-81,082
Social Security Advisory Board.....	TF	2,300	2,400	2,300	--	-100
SSI.....	TF	3,614,009	3,827,110	3,718,791	+104,782	-108,319
Subtotal, regular LAE.....		10,284,945	10,937,000	10,598,945	+314,000	-338,055
User Fees:						
SSI User Fee activities.....	D	124,000	136,000	136,000	+12,000	--
SSPA User Fee Activities.....	D	1,000	1,000	1,000	--	--
Subtotal, User fees.....		125,000	137,000	137,000	+12,000	--
Subtotal, Limitation on administrative expenses.....		10,409,945	11,074,000	10,735,945	+326,000	-338,055
Program Integrity:						
OASDI Trust Funds.....	TF	431,031	500,580	496,058	+65,027	-4,522
SSI.....	TF	964,969	938,420	929,942	-35,027	-8,478
Subtotal, Program integrity funding.....		1,396,000	1,439,000	1,426,000	+30,000	-13,000
Total, Limitation on Administrative Expenses.....		11,805,945	12,513,000	12,161,945	+356,000	-351,055

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2018
(Amounts in Thousands)

		FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
Office of Inspector General						
Federal Funds.....	D	28,829	31,000	29,787	+958	-1,213
Trust Funds.....	TF	74,521	78,795	75,713	+1,192	-3,082
Total, Office of Inspector General.....		103,350	109,795	105,500	+2,150	-4,295
Adjustment: Trust fund transfers from general revenues	TF	-4,578,978	-4,785,000	-4,848,733	-69,755	+116,267
Total, Social Security Administration.....						
Federal funds.....		67,779,895	68,800,195	68,435,845	+656,150	-364,350
Current year.....		60,603,207	61,110,400	60,983,920	+380,713	-126,480
New advances, 1st quarter, FY 2017.....		(41,403,207)	(46,610,400)	(46,483,920)	(+5,080,713)	(-126,480)
Trust funds.....		(19,200,000)	(14,500,000)	(14,500,000)	(-4,700,000)	---
		7,176,488	7,689,795	7,451,925	+275,437	-237,870
Total, Title IV, Related Agencies.....						
Federal Funds.....		70,047,839	71,263,550	70,787,830	+739,791	-475,920
Current Year.....		62,739,940	63,432,287	63,204,118	+464,178	-228,169
Current Year (emergency).....		(43,094,940)	(48,487,287)	(48,259,118)	(+5,184,178)	(-228,169)
FY 2017 Advance.....		---	---	---	---	---
FY 2018 Advance.....		(19,200,000)	(14,500,000)	(14,500,000)	(-4,700,000)	---
Trust Funds.....		(445,000)	(445,000)	(445,000)	---	---
		7,307,899	7,831,263	7,583,512	+275,813	-247,751
TITLE VI - EBOLA RESPONSE AND PREPAREDNESS (total)...		(2,772,000)	---	---	(-2,772,000)	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

	FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
RECAP					
Mandatory, total in bill.....	681,328,025	717,998,005	718,185,805	+36,857,780	+187,800
Less advances for subsequent years.....	-135,953,140	-133,701,502	-133,701,502	+2,251,638	---
Plus advances provided in prior years.....	126,648,323	135,953,140	135,953,140	+9,306,817	---
Total, mandatory, current year.....	672,021,208	720,249,643	720,437,443	+48,416,235	+187,800
Discretionary, total in bill.....	164,232,053	174,778,223	170,242,946	+8,010,893	-4,535,277
Less advances for subsequent years.....	-24,814,001	-24,814,001	-24,814,001	---	---
Plus advances provided in prior years.....	24,814,001	24,814,001	24,814,001	---	---
Subtotal, discretionary, current year.....	164,232,053	174,778,223	170,242,946	+8,010,893	-4,535,277
Discretionary Scorekeeping adjustments:					
SSI/SSPA User Fee Collection.....	-123,000	-136,000	-136,000	-13,000	---
Ebola funding (Public Law 113-184).....	88,000	---	---	-88,000	---
Average Weekly Insured Unemployment (AWIU)					
Contingent.....	20,000	20,000	5,000	-15,000	-15,000
Medicare Eligible Accruals (permanent, indefinite)					
1/.....	27,947	30,664	29,000	+1,053	-1,664
Rescissions (PL111-148):					
Independent Payment Advisory Board.....	-10,000	---	-15,000	-5,000	-15,000
Childrens Health Insurance Program (rescission)...	-1,745,000	---	---	+1,745,000	---
Childrens Health Insurance Program one-time					
payment (rescission).....	-4,549,000	-3,330,000	-4,678,500	-129,500	-1,348,500
Child Enrollment contingency fund (rescission)....	---	-2,105,000	-2,105,000	-2,105,000	---

DIVISION H: DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016
 (Amounts in Thousands)

	FY 2015 Enacted	FY 2016 Request	Final Bill	Final Bill vs. FY 2015	Final Bill vs. Request
TANF Contingency Fund (transfer out).....	---	(-25,000)	(-25,000)	(-25,000)	---
ACF Children's research and technology assistance (by transfer).....	---	(15,000)	(15,000)	(+15,000)	---
Department of Commerce, Bureau of the Census (by transfer).....	---	(10,000)	(10,000)	(+10,000)	---
Career pathways included in Pell grant benefit....	1,000	---	1,000	---	+1,000
Long-Term Care Hospitals.....	---	---	2,000	+2,000	+2,000
Traditional Medicare program.....	305,000	---	305,000	---	+305,000
HHS unobligated balances (rescission).....	---	-446	-446	-446	---
Pell grant program (reappropriation of mandatory savings).....	---	316	---	---	-316
Total, discretionary.....	158,247,000	169,257,757	163,650,000	+5,403,000	-5,607,757
Grand Total, current year.....	830,268,208	889,507,400	884,087,443	+53,819,235	-5,419,957