

DIVISION H – DEPARTMENTS OF LABOR, HEALTH AND HUMAN
SERVICES, AND EDUCATION, AND RELATED AGENCIES
APPROPRIATIONS ACT, 2014

The Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2014, put in place by this division incorporates the following agreements. Funds for the individual programs and activities within the accounts in this division 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.

In implementing this agreement, the Departments and agencies should be guided by the language and instructions set forth in Senate Report 113-71 accompanying the bill, S. 1284, unless specifically addressed in this statement. In cases where the language and instructions in the Senate report specifically address the allocation of funds, each has been reviewed and those that are jointly concurred on have been endorsed in this statement.

TITLE I

DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

TRAINING AND EMPLOYMENT SERVICES

(INCLUDING TRANSFER OF FUNDS)

The agreement modifies a provision increasing the amount of Workforce Investment Act (WIA) State grant funding that may be set aside by Governors to 8.75 percent to support statewide and regional projects. The agreement is supportive of Governors' Reserve funding being used to support on-the-job and

incumbent training to improve the skills of workers, avert layoffs, or lead to employment in in-demand occupations or industries.

OFFICE OF JOB CORPS

Contracts provided for the operation and maintenance of Job Corps facilities are generally let on a two-year basis, with as many as three option years depending on the quality of performance. When evaluating contract renewals or re-bids, due consideration should be provided to the federal investment already made in high-performing incumbent contractors as a part of a full, fair, and open competitive process. As part of this process, the Department of Labor (DOL) should consider documented past performance of student outcomes and cost-effective administration as important factors in Job Corps procurements.

The agreement recognizes that construction on a new Job Corps center will be substantially completed in December 2014 and provides sufficient funds to ensure that competitively awarded contracts will be in place to keep the process of opening the new center on course.

The agreement includes increased funding for Job Corps Administration to strengthen financial management, oversight, and monitoring of the program.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

To the extent that funds not needed for workload become available at the end of the fiscal year, the Department is encouraged to make funding available to States for program integrity, performance improvement, and technology investments, with a portion of funds not needed for workload to be distributed to all States proportionally based on each State's base allocation.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

The bill continues the exemption of small farming operations from Occupational Safety and Health Administration (OSHA) regulation. The OSHA is encouraged to work with the Department of Agriculture before moving forward with any attempts to redefine and regulate post-harvest activities, to include, but not limited to, storing, drying, grinding, and other activities necessary to market farm products to subsequent users in the agricultural value chain, and clarify that this exemption shall apply to on farm post-harvest activities.

MINE SAFETY AND HEALTH ADMINISTRATION

The agreement includes new language setting aside not less than \$8,441,000 for State assistance grants and modifies language relating to the Mine Safety and Health Administration (MSHA)'s existing authority to collect certain fees. The agreement also includes new language relating to relocation of the Office of the Solicitor.

Coal production within the United States has shifted across regions. Unfortunately, mine inspectors are not always distributed in a manner that keeps pace with existing mining activity needs. Certain areas of the country in which mines have closed may have the same number of inspectors that existed when all mines were operational, while some areas opening new mining operations may not have appropriate coverage. MSHA should do a better job in allocating mining inspectors in proportion to the actual mining activity and need occurring in various regions. While MSHA has taken initial steps to address this discrepancy, in part to address a coming retirement wave of inspectors, MSHA is directed to accelerate these efforts to better align enforcement resources with current mining activity and workload demand across regions.

The Government Accountability Office (GAO) is currently conducting a study to examine existing technological options for reducing coal mine dust and the costs, advantages and disadvantages of various methods for reducing the concentration of dust in coal mines. The MSHA is directed to provide to GAO any information or assistance requested in connection with this study. In addition, MSHA should take any pertinent information from GAO into account in developing the rule now under consideration regarding lowering miners' exposure to coal dust, to the extent that GAO completes its work before the rule is finalized. In any event, MSHA should take into consideration all relevant information and conclusions from the GAO study when addressing compliance assistance, training, or post-implementation needs in connection with any such rule. The MSHA is further directed to consider the feasibility of all available technologies and work practices that would allow mine operators to comply with the rule in a manner that is not economically prohibitive for the long-term viability of the affected mines, while reducing miners' exposure to respirable mine dust.

BUREAU OF LABOR STATISTICS

The data produced through National Longitudinal Surveys of Labor Market Experience (NLS) are an essential source for both long-term and ongoing analysis of the economic health of America and are an invaluable resource for Congress and the public and private sectors, especially during these times of economic uncertainty. As such, the bill provides sufficient funding necessary to ensure that the frequency of NLS data collection occurs not less than biennially.

Within available resources, the Bureau of Labor Statistics is encouraged to add an annual supplement to the Current Population Survey, including contingent work and alternative work arrangements, as proposed in the budget request.

DEPARTMENTAL MANAGEMENT

Within available resources, agencies of DOL should take steps to improve the quality of information on workplace safety violations, including steps to clearly and correctly identify entities that are penalized for any type of violation of federal labor laws. These improvements could assist federal contracting officers with using accurate data to determine whether or not a prospective contractor has a record of compliance with federal labor law.

VETERANS EMPLOYMENT AND TRAINING

The agreement modifies language relating to Veterans Employment and Training specifying amounts for various activities within this account.

A September 2013 GAO report highlighted that the Department has yet to implement fully the recommendations in its October 2010 report assessing the employment needs of Native American veterans living on tribal lands, including Indian reservations, Alaska Native villages, and Hawaiian Home Lands. The agreement directs the Secretary to submit a report to the House and Senate Appropriations Committees by June 30, 2014 that includes a strategy to implement the October 2010 report's recommendations, including goals, benchmarks, costs, and time frames. If recommendations are disputed by the Department, the Committee requests the report include information on why the recommendations cannot be implemented. The agreement encourages the Department to continue to work with the Departments of Defense and Veterans Affairs and other agencies to develop or obtain data to assess the employment needs of Native American veterans returning to live on tribal lands.

GENERAL PROVISIONS

H1-B VISA PROGRAM

The bill modifies a provision related to the H-1B visa program.

TRANSFER AUTHORITY FOR TECHNICAL ASSISTANCE

The bill modifies a provision providing the Employment and Training Administration with authority to transfer funds provided for technical assistance services to grantees to program administration, so that it does not apply to section 173A(f)(2) of the WIA.

TRANSFER AUTHORITY FOR EVALUATION PURPOSES

The bill modifies a provision that allows up to 0.5 percent of discretionary appropriations provided in this act for all DOL agencies to be used by the Chief Evaluation Office for evaluation purposes consistent with the terms and conditions in this act applicable to such office.

TRADE ADJUSTMENT ASSISTANCE COMMUNITY COLLEGE

AND CAREER TRAINING GRANT PROGRAM

The bill includes a new provision allowing the Secretary to reserve up to three percent of funds provided for the Trade Adjustment Assistance Community College and Career Training Grant program to be used for evaluation and technical assistance purposes and to allow grantees to award subgrants.

WAGE AND HOUR SALARY CAP

The bill includes a new provision adjusting the salary level for the

Administrator of the Wage and Hour Division to reflect a reorganization within the Department.

TEMPORARY NONIMMIGRANT VISA PROGRAMS

The bill includes a new provision related to the H-2A temporary agricultural program. The bill also includes a provision providing flexibility with respect to the crossing of H-2B nonimmigrants working in the seafood industry.

TITLE II

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The agreement includes tables within and at the end of the statement allocating funding for the programs, projects, and activities in this act. The agencies within this act are directed to fully implement these allocations in accordance with the statement, except as permitted by the reprogramming and transfer authorities provided in this act. 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.

The Department is directed to include in its fiscal year 2015 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.

HEALTH RESOURCES AND SERVICES ADMINISTRATION

PRIMARY HEALTH CARE

Health Centers.—The agreement includes bill language to require that, of all the funds provided for the Health Center program, not less than \$110,000,000 shall

agreement provides) be obligated for base grant adjustments to existing health centers and not less than \$350,000,000 shall be obligated for new access points or expanded medical services. Bill language also requires the aforementioned funding levels to be obligated by October 1, 2014. Within the funds provided for Primary Health Care, the ~~conference provide~~ not less than the fiscal year 2013 level of funding for the Native Hawaiian Health Care Program.

The Administrator is directed to provide a report within 60 days of enactment outlining the requirements for allowing Community Health Centers to add a new or expand an existing dental facility. This report should address all the factors weighed in the grant making decision process and whether the Health Resources and Services Administration (HRSA) considers the number of private providers available to the population of patients, particularly in rural areas, when evaluating a grant applicant's certificate of need.

HEALTH WORKFORCE

Oral Health Training.—The agreement includes not less than \$8,000,000 for General Dentistry programs and not less than \$8,000,000 for Pediatric Dentistry programs. The agreement includes bill language prohibiting health workforce funds to be used for section 340G-1, the Alternative Dental Health Care Providers Demonstration program.

Alzheimer Disease Outreach and Education.—Within the funds provided for Geriatric Education programs, this agreement includes \$4,000,000 to train health professionals on issues related to Alzheimer's disease. These funds will support Geriatric Education Centers for outreach and education efforts to enhance healthcare providers' knowledge of the disease, improve detection and early

intervention, and improve care for people with Alzheimer's disease and their caregivers.

Public Health and Preventive Medicine Training.—The agreement includes not less than \$2,500,000 for Public Health Traineeships, not less than \$3,813,000 for the Preventive Medicine Residency Program and up to \$9,864,000 for Public Health Training Centers. In addition, the bill includes not less than \$2,000,000 for the Integrative Medicine Program for a new competitive award to support a national center of excellence on integrative primary care.

Mental and Behavioral Health.—The agreement provides \$7,916,000 for Mental and Behavioral Health programs and intends not less than \$1,000,000 of the increase over fiscal year 2013 be used to continue and expand the Leadership Training in Social Work program, formerly funded in the Maternal Child Health Bureau of HRSA. The Bureau of Health Professions is directed to work with the Maternal Child Health Bureau to ensure a smooth transition for grantees.

Health Professions Training.—The Administrator of HRSA is directed to provide a briefing to the House and Senate Appropriations Committees within sixty days of enactment to detail the health professions training resources currently available to rural underserved areas with significant Native American populations.

MATERNAL AND CHILD HEALTH

Maternal and Child Health Block Grant.—The agreement includes bill language setting aside \$77,093,000 for Special Projects of Regional and National Significance (SPRANS), which is intended to include sufficient funding to continue the set-asides for oral health, epilepsy, sickle cell, and fetal alcohol syndrome at not less than fiscal year 2012 levels. The agreement also provides \$546,632,000 for State grants.

Heritable Disorders Program.—The agreement includes a \$2,000,000 increase to support wider implementation, education, and awareness of newborn screening for Severe Combined Immune Deficiency and related disorders.

RYAN WHITE HIV/AIDS PROGRAMS

The agreement intends that the increase provided for the AIDS Drug Assistance Program be awarded according to the statutory formula. The agreement directs HRSA to allocate funds for the Minority AIDS Initiative within the Ryan White HIV programs at not less than the fiscal year 2013 funding level.

HEALTH CARE SYSTEMS

340B Drug Pricing Program.—The agreement provides \$6,000,000 to implement a new program integrity effort within the 340B Drug Pricing Program. The Director of the 340B Program is directed to brief the House and Senate Appropriations Committees within 45 days of enactment regarding the plans to strengthen program oversight to ensure compliance with existing requirements. Further, the briefing should address the timetable for issuing new regulations that address compliance concerns raised by both the Office of Inspector General and the Government Accountability Office.

The agreement includes bill language facilitating the transfer of the Hansen's Disease programs to the Health Care Systems Bureau.

RURAL HEALTH

The agreement includes sufficient funding to continue the five key program areas identified in the President's budget: outreach services grants, rural network development grants, network planning grants, small healthcare provider quality improvement grants, and the Delta States network grant program.

HEALTH EDUCATION ASSISTANCE LOANS PROGRAM

The agreement includes bill language transferring the Health Education Assistance Loans Program to the Department of Education.

CENTERS FOR DISEASE CONTROL AND PREVENTION

The agreement includes \$5,807,120,000 in discretionary appropriations for the Centers for Disease Control and Prevention (CDC). In addition, \$210,555,000 is made available under section 241 of the Public Health Service (PHS) Act and \$831,300,000 in transfers from the Prevention and Public Health (PPH) Fund.

IMMUNIZATION AND RESPIRATORY DISEASES

The agreement includes a total of \$744,700,000 for Immunization and Respiratory Diseases, which includes \$571,536,000 in discretionary appropriations, \$12,864,000 that is made available under section 241 of the PHS Act, and \$160,300,000 that is made available from amounts in the PPH Fund.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Section 317 Immunization Program.....	\$588,000,000
National Immunization Survey.....	12,864,000
Influenza Planning and Response.....	156,700,000

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

The agreement includes \$1,072,834,000 for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases and Tuberculosis Prevention, in discretionary appropriations.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Domestic HIV/AIDS Prevention and Research...	\$760,684,000
HIV Prevention by Health Departments.....	390,803,000
HIV Surveillance.....	115,766,000
Activities to Improve Program Effectiveness	94,946,000
National, Regional, Local, Community and Other Organizations.....	130,192,000
School Health.....	28,977,000
Viral Hepatitis.....	28,650,000
Sexually Transmitted Infections.....	148,500,000
Tuberculosis.....	135,000,000

EMERGING AND ZOONOTIC INFECTIOUS DISEASES

The agreement includes \$339,300,000 for Emerging and Zoonotic Infectious Diseases, which includes \$287,300,000 in discretionary appropriations and \$52,000,000 that is made available from amounts in the PPH Fund.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Emerging and Zoonotic core activities.....	\$18,800,000
Vector-borne Diseases.....	22,000,000
Lyme Disease.....	9,000,000
Prion Disease.....	4,900,000
Chronic Fatigue Syndrome.....	4,500,000
Emerging Infectious Diseases.....	124,500,000
Food Safety.....	34,700,000
National Healthcare Safety Network.....	14,150,000
Quarantine.....	24,750,000
Advanced Molecular Detection.....	30,000,000
Epidemiology and Lab Capacity program.....	40,000,000
Healthcare-Associated Infections.....	12,000,000

Advanced Molecular Detection.—The agreement provides support for the Advanced Molecular Detection (AMD) initiative. The CDC Director shall publish a 5-year AMD implementation program plan that includes, at a minimum, program metrics that track the initiative, track projected cost savings, and track improved detection speed, savings, and effectiveness as compared to the existing process. Further, the plan shall describe how funds from the proposed AMD State grants will be re-integrated into the ongoing funding streams for laboratory services. A copy of the plan shall be provided to the House and Senate Appropriations Committees and the metrics should be reported in the annual budget request.

Lyme Disease.—The agreement encourages CDC to consider expanding activities related to developing sensitive and more accurate diagnostic tools and tests for Lyme disease, including the evaluation of emerging diagnostic methods and improving utilization of adequate (validated) diagnostic testing to account for the multiple clinical manifestations of Lyme disease. CDC is further encouraged to expand its epidemiological research activities on tick-borne diseases to include an objective to determine the frequency and nature of the possible long-term complications of Lyme disease and to improve surveillance and reporting of Lyme and other tick-borne diseases in order to produce more accurate data on their incidence. Finally, the agreement suggests that CDC evaluate the feasibility of developing a national reporting system on Lyme disease, including laboratory reporting and to expand prevention of Lyme and tick-borne diseases through increased community-based public education as well as physician and healthcare provider programs based on the latest scientific research on the diseases.

CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

The agreement includes \$1,157,650,000 for Chronic Disease Prevention and Health Promotion, which includes \$711,650,000 in discretionary appropriations, and \$446,000,000 that is made available from amounts in the PPH Fund.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Tobacco.....	\$205,000,000
Nutrition, Physical Activity, and Obesity.....	37,500,000
High Obesity Rate Counties	5,000,000
School Health.....	14,900,000
Food Allergies.....	486,000
Health Promotion.....	18,430,000
Community Health Promotion.....	5,800,000
Glaucoma.....	3,200,000
Visual Screening Education.....	485,000
Alzheimer's Disease.....	3,300,000
Inflammatory Bowel Disease.....	680,000
Interstitial Cystitis.....	650,000
Excessive Alcohol Use.....	2,315,000

	FY 2014
Budget Activity	Agreement
Chronic Kidney Disease.....	2,000,000
Prevention Research Centers.....	25,000,000
Heart Disease and Stroke.....	127,850,000
Diabetes.....	137,300,000
National Diabetes Prevention Program.....	10,000,000
Cancer Prevention and Control.....	343,120,000
Breast and Cervical Cancer.....	204,000,000
WISEWOMAN.....	20,500,000
Breast Cancer Awareness for Young Women.....	4,875,000
Cancer Registries.....	48,200,000
Colorectal Cancer.....	42,000,000
Comprehensive Cancer.....	19,150,000
Johanna's Law.....	4,850,000
Ovarian Cancer.....	4,750,000
Prostate Cancer.....	12,750,000
Skin Cancer.....	2,075,000

Budget Activity	FY 2014 Agreement
Cancer Survivorship Resource Center.....	470,000
Oral Health.....	14,750,000
Safe Motherhood/Infant Health.....	42,000,000
Arthritis.....	12,550,000
Epilepsy.....	7,750,000
National Lupus Patient Registry.....	5,500,000
REACH.....	50,000,000
Community Prevention Grants.....	80,000,000
Million Hearts.....	4,000,000
Workplace Wellness.....	10,000,000
National Early Child Care Collaboratives.....	4,000,000
Hospitals Promoting Breastfeeding.....	8,000,000

Cancer Proportionality.—The agreement does not include additional flexibility in the cancer screening programs of CDC. The CDC director is directed to survey State health departments to determine how many States would use flexibility if it were provided. The results of that survey shall be transmitted to the House and Senate Appropriations Committees.

Community Prevention Grants.—The agreement includes bill language for a new initiative to prevent chronic diseases and reduce their impact by awarding three year grants to community coalitions that include businesses, schools, and non-profit organizations.

Consolidated Chronic Disease Prevention and Health Promotion.—The CDC is encouraged to continue its efforts to coordinate grant requirements in ways that increase efficiency at the State and local level. The agreement continues to reject the consolidation of CDC chronic disease programs and expects CDC to demonstrate that funds are spent in the exact amounts allocated and for the purposes specified in this statement ~~of the managers~~. The CDC shall ensure any efforts to consolidate include an audit trail, measureable outcomes, monitoring and coordination to all support the funding allocations provided herein.

Diabetes/Heart Disease.—The agreement includes a significant increase for grants to States in ~~this program~~. The CDC is urged to put procedures in place to ensure that some portion of the increase in funding is sub-granted to the local level.

Johanna's Law.—Within the funds provided for Johanna's Law, up to \$1,000,000 shall be used for a review of the state of the science on ovarian cancer as described in Senate Report 113-71.

Obesity Outreach.—While some indicators show that slight drops in obesity rates have occurred recently, concern remains that too little is occurring in the areas with the highest obesity rates, particularly in rural areas. For that reason, \$5,000,000 in competitive funding is provided to conduct pilot programs that focus on the use of existing extension and outreach services in the counties with the highest prevalence of obesity. All counties with an obesity prevalence of over 40 percent, as determined by CDC's latest county level data in the Behavioral Risk

Factor Surveillance System, shall be eligible to participate in this extension and outreach program.

REACH.—The CDC is directed to award all increased funds under the terms and conditions by which the funds were awarded prior to fiscal year 2012.

BIRTH DEFECTS AND DEVELOPMENTAL DISABILITIES

The agreement includes \$122,435,000 for Birth Defects and Developmental Disabilities.

Within the total for Birth Defects and Developmental ~~Disabilities~~, the agreement includes the following amounts:

Budget Activity	FY 2014 Agreement
Child Health and Development.....	\$59,450,000
Birth Defects.....	17,700,000
Fetal Death.....	810,000
Fetal Alcohol Syndrome.....	9,700,000
Folic Acid.....	2,800,000
Infant Health.....	7,750,000
Autism.....	21,500,000
Health and Development for People with Disabilities.....	49,985,000
Disability & Health.....	18,100,000

	FY 2014
Budget Activity	Agreement
Limb Loss.....	2,700,000
Tourette Syndrome.....	1,610,000
Early Hearing Detection and Intervention.....	10,250,000
Muscular Dystrophy.....	5,600,000
Attention Deficit Hyperactivity Disorder.....	1,700,000
Fragile X.....	1,625,000
Spina Bifida.....	5,500,000
Congenital Heart Failure.....	2,900,000
Public Health Approach to Blood Disorders.....	4,000,000
Hemophilia CDC Activities.....	2,000,000
Hemophilia Treatment Centers.....	5,000,000
Thalassemia.....	2,000,000

Congenital Heart Defects.—The agreement includes funding to collect and analyze data as described in Senate Report 113-71.

Duchenne Muscular Dystrophy (DMD).—The CDC is urged to conduct a joint review with the National Institutes of Health (NIH) to improve NIH’s ability to leverage research in this area.

PUBLIC HEALTH SCIENTIFIC SERVICES

The agreement includes a total of \$432,870,000 for Public Health Scientific Services, which includes \$347,179,000 in discretionary appropriations and \$85,691,000 that is made available under section 241 of the PHS Act.

Within the total for Public Health Scientific Services, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Health Statistics.....	\$140,000,000
Surveillance, Epidemiology, and Informatics.....	247,000,000
Public Health Workforce.....	45,870,000

ENVIRONMENTAL HEALTH

The agreement includes ~~\$160,665,000~~ for Environmental Health programs, which includes \$147,555,000 in discretionary appropriations, and \$13,000,000 that is made available from amounts in the PPH Fund.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Environmental Health Laboratory.....	\$48,200,000
Newborn Screening Quality Assurance Program.....	7,000,000
Newborn Screening /Severe Combined Immuno-deficiency Diseases.....	1,000,000

(160,555,000)

Environmental Health Activities.....	37,655,000
Environmental Health Activities.....	14,950,000
Safe Water.....	7,000,000
Amyotrophic Lateral Sclerosis Registry.....	6,500,000
Built Environment & Health Initiative.....	2,250,000
Climate Change.....	6,955,000
Environmental and Health Outcome Tracking Network.....	35,000,000
Asthma.....	24,700,000
Childhood Lead Poisoning.....	15,000,000

Environmental Lab.—The agreement includes \$4,200,000 to develop standardized cardiovascular disease biomarkers as described in Senate Report 113-71.

INJURY PREVENTION AND CONTROL

The agreement includes \$142,311,000 for Injury Prevention and Control activities.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Intentional Injury.....	\$87,400,000

	FY 2014
Budget Activity	Agreement
Domestic Violence and Sexual Violence.....	30,000,000
Child Maltreatment.....	6,650,000
Youth Violence Prevention.....	14,200,000
Domestic Violence Community Projects.	5,200,000
Rape Prevention.....	38,000,000
National Violent Death Reporting System.	11,200,000
Unintentional Injury.....	7,756,000
Traumatic Brain Injury.....	5,900,000
Elderly Falls.....	1,856,000
Injury Prevention Activities.....	26,500,000
Injury Control Research Centers.....	9,455,000

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

The agreement includes a total of \$292,300,000 for the National Institute for Occupational Safety and Health (NIOSH), which includes \$180,300,000 in discretionary appropriations and \$112,000,000 made available under section 241 of the PHS Act.

Within the total for NIOSH, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
National Occupational Research Agenda.....	112,000,000
Agriculture, Forestry, Fishing.....	24,000,000
Education and Research Centers.....	\$27,000,000
Healthier Workforce Centers.....	4,800,000
Mining Research.....	52,000,000
Other Occupational Safety and Health Research.....	96,500,000
Personal Protective Technology.....	16,000,000
Miners Choice.....	700,000
National Mesothelioma Registry and Tissue Bank.....	1,100,000

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. The agreement deletes without prejudice a long standing provision transferring funds to the Advisory Board on Radiation and Worker Health as it is understood that CDC has the authority to transfer funds to the Board under the authorizing statute.

GLOBAL HEALTH

The agreement includes \$383,000,000 for Global Health activities. Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Global AIDS Program.....	\$114,250,000
Global Immunization Program.	193,250,000
Polio Eradication.....	146,000,000
Measles and Other Vaccine Preventable Diseases.....	47,250,000
Global Disease Detection and Emergency Response.....	40,000,000
Parasitic Diseases/Malaria.....	19,000,000
Global Public Health Capacity..	16,500,000
National Public Health Institutes.....	7,500,000

Global Health Strategy.—The CDC’s Global Health program is expected to take the lead for a CDC, Food and Drug Administration, and NIH joint plan. The agencies are expected to jointly develop, coordinate, plan, and prioritize global health research activities with specific measurable metrics and to track the progress toward agreed upon global health goals that are based on sound scientific methods.

National Public Health Institutes (NPHIs).—The agreement includes \$7,500,000 to assist other nations in setting up and strengthening NPHIs. The agreement intends this initiative to be an organizational effort, and in no way limit capacity building work in other programs of CDC.

Polio Eradication.—The agreement includes an additional investment in the global eradication of polio. Since the worldwide investment ramped up in 1991, over \$1,700,000,000 has been appropriated to the Department for this effort.

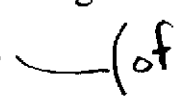
PUBLIC HEALTH PREPAREDNESS AND RESPONSE

The agreement includes \$1,323,450,000 for public health preparedness and response activities.

Within the total for Public Health Preparedness and Response, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Public Health Emergency Preparedness	
Cooperative Agreements.....	\$640,000,000
Academic Centers for Public Health	
Preparedness.....	8,000,000
All Other State and Local Capacity.....	7,750,000
CDC Preparedness and Response.....	132,700,000
BioSense.....	19,700,000
Strategic National Stockpile.....	535,000,000

Public Health Emergency Preparedness Index.—The CDC should continue to coordinate with other federal agencies on the index and provide an update in the fiscal year 2015 budget request on the index, timeline to implement, and how the tool will be used for future budget requests to identify needs for public health emergency preparedness and the strategic national stockpile.

Strategic National Stockpile (SNS).—The agreement directs CDC to initiate a comprehensive Institute of Medicine (IOM) evaluation of the SNS distribution system that compares the current design to methods used by other federally supported stockpiles (at a minimum comparing methods used by Department of Veterans Affairs and Department of Defense), and to make recommendations to improve the efficiency, effectiveness, and methods used by HHS to ensure the SNS distribution chain of custody, warm distribution, and other related issues are the most effective and efficient to support measurable SNS goals and objectives. The IOM review should also explore how CDC can undertake public-private collaborations in the purchase, warehousing, management and distribution of countermeasures to increase efficiencies and faster dispensing of medications during times of need. The CDC is encouraged to establish periodic program evaluations conducted by outside organizations like IOM to provide on-going expert third party recommendations for this critical program. The agreement urges CDC to verify that procedures are in place to ensure that adequate supplies  (of medications for children are part of its ongoing stewardship of the SNS.

CDC-WIDE ACTIVITIES

The agreement includes \$677,570,000 for CDC-wide activities, which includes \$517,570,000 in discretionary appropriations and \$160,000,000 made available through the PPH Fund.

Within this total, the agreement includes the following amounts:

	FY 2014
Budget Activity	Agreement
Preventive Health & Health Services	
Block Grant.....	\$160,000,000
Business Services Support/Working	
Capital Fund.....	380,000,000
Buildings and Facilities.....	24,000,000
Public Health Leadership and Support....	113,570,000

Budget Information.—The agreement recognizes CDC’s value to public health and preparedness and strongly supports budget processes that link programs and activities to measurable public health and preparedness goals. The agreement directs CDC to explain in the congressional budget request how sound scientific data are linked to measurable public health and preparedness goals and objectives for each program, and how those goals directly relate to the budget request. In addition, the agreement directs CDC to provide the following information in the fiscal year 2015 and future budget requests:

Program evaluations.—An identification of the timeframes and criteria used to evaluate each program;

User fee, reimbursement, and other sources of funding.—An itemization of the actual and estimated collections for each activity and the actual annual costs related to each associated user fee, reimbursement, and other funding sources used to support CDC activities;

Accounting.—A more detailed accounting of how funds are spent in each program. The budget justification should not only be an accounting of how funds will be spent in the coming fiscal year, but also how funds have been spent in the previous fiscal years, potentially under different budget structures or organizations;

Types of activities supported.—The breakdown of intramural and extramural funding for each program; and

Working Capital Fund (WCF).—The object class breakout of annual WCF resource inputs, assets, expenditures, carryover, WCF-supported full-time equivalents, WCF-supported contract full-time equivalents, and WCF-supported overhead for the prior year actual, current year, and budget year at each Center, Institute, or Office, in addition to the CDC aggregate levels. The budget justification should include the projected and actual reserve with a breakout justification to explain the projected use and identification of any reserve and residual funds for the prior year actual, current year, and budget year estimates. Further, the CDC is directed to provide a joint briefing to the House and Senate Appropriations Committees no later than July 15, 2014 on the WCF governance structure and rules in place to ensure appropriate activity and accounting.

Repairs and Improvements.—The categorization of the needed repairs for CDC facilities in areas such as security, life/safety repairs, condition index, and other repairs.

CDC Director's Discretionary Fund.—The CDC Director shall provide timely quarterly reports on all obligations made with the Director's Discretionary Fund to the House and Senate Appropriations Committees.

Community Preventive Task Force.—Within 90 days of enactment, CDC shall provide the House and Senate Appropriations Committees a comprehensive report on the funding and program activities of the Community Preventive Task Force, including 1) annual budgets and funding sources for the previous five fiscal years; 2) details on the procedures and personnel involved in budget allocation, grant selection, and evaluation methods; 3) a list of all grant recipients from the previous five fiscal years; and 4) funded activities related to dissemination of the Community Guide.

Data Reporting.—The agreement notes that significant opportunities exist to create administrative and economic efficiencies in the reporting of public health data. For that reason, the Director of CDC is directed to work with State and local health officials to submit a report to the House and Senate Appropriations Committees no later than 180 days after enactment of this act on the opportunities for consolidating the various data collection systems in CDC. The report should include the opportunities and costs, advantages and barriers, and projected timeline to such a consolidated data reporting system, along with recommendations for adoption. The report should include full consideration of a single Web-based data collection information technology platform.

Scientific Research Coordination with NIH.—The CDC programs are directed to actively coordinate with the Institutes and Centers of the NIH to identify scientific gaps to accelerate understanding of diseases and their prevention knowledge across NIH and CDC research portfolios.

Underground and Surface Coal Mining Facilities.—It is vital to ensure good stewardship of public resources, especially buildings and facilities that provide vital research for the nation. It is understood that the underground and surface coal mining research facilities are aging. The Director of CDC shall develop a report evaluating options for the future of their coal mining research facilities within 180 days of enactment. The report should consider consolidation, making better use of National Institute of Occupational Safety and Health-owned properties that are under-utilized, and other similar measures to reduce operational costs and improve productivity. Further, the report shall provide an update on the steps CDC and a timeline to ensure the research capability lost from the now closed Lake Lynn facility will be relocated to ensure the full level of mine safety research is quickly restored. *(has taken)*

NATIONAL INSTITUTES OF HEALTH

The National Institutes of Health (NIH) receives a total of \$29,926,104,000 in this agreement. Within this total, increases are generally distributed proportionately among NIH Institutes and Centers (ICs). Additional amounts have been added to the National Institute on Aging (NIA), in recognition of the Alzheimer's disease research initiative throughout NIH, and several institutes have received funding in anticipation of research in connection with the Brain Research through Application of Innovative Neurotechnologies (BRAIN) initiative.

Further, within the National Institute of General Medical Sciences (NIGMS) \$273,325,000 is allocated for the Institutional Development Awards (IDeA) program. Amounts have also been added to the National Center for Advancing Translational Sciences (NCATS) to ~~the~~ reflect movement of programs from the Common Fund to that center and to consolidate all support for the Clinical and *e*

Translational Science Awards (CTSA) program in NCATS rather than continuing to have part of the core funding provided through other ICs.

In accordance with longstanding tradition, funding is not directed to any specific disease research area. The NIH is expected to base its funding decisions only on scientific opportunities and the peer review process.

The NIH is further expected to adopt a reasonable NIH-wide policy for non-competing and competing inflation rates that is consistent with the overall funding increase. Further, NIH is expected to support as many scientifically meritorious new and competing research project grants as possible, at a reasonable award level.

All NIH ICs are expected to continue to support the Pathways to Independence program, which provides new investigators with mentored grants that later convert into independent research project grants. In addition, the House and Senate Appropriations Committees continue to support New Innovator Awards, Director's Pioneer Awards, and the Transformative R01 Program through the Common Fund. The NIH is directed to provide inflationary increases to research training stipends that are not below the federal pay policy. The Office of the Director (OD) shall ensure the programs and offices within OD receive increases proportional to the overall increase, unless otherwise specified. The NIH Director shall provide timely quarterly reports on all obligations made with the NIH Director's Discretionary Fund to the House and Senate Appropriations Committees and any other appropriate committees.

It is recognized that NIH's Intramural program is subject to fixed cost increases, such as a federal pay raise. However, NIH is expected to ensure that the proportion of resources shifted out of the extramural program to intramural, outside of the recognized fixed costs, are based on specific scientific criteria and

include advanced consultation with the extramural community. Further, NIH is directed to continue to provide notifications of adjustment to the NIH mechanism tables.

Accelerating Commercialization of Therapies to Patients.—The NIH shall provide an update in the fiscal year 2015 budget request on the models and next steps that resulted from the trans-NIH workshop with key research organizations, venture capitalists, pharmaceutical firms, Patent and Trademark Office, and Food and Drug Administration, which was held to examine ways to work together and foster private sector drug development. The update should identify how market risk and commercial viability criteria are factored into the NIH decisions to create or select projects within its drug repurposing and de-risking activity.

Administrative Burden Reduction Workgroup.—The Director of NIH should establish a workgroup that includes coordination and participation of universities, not-for-profits, and institutes receiving support from the NIH to develop a method to track and measure the administrative burden on entities participating in NIH supported activities with the goal of developing a plan to reduce such administrative burden as practicable.

Alzheimer's Disease.—The fiscal year 2014 budget request calls for a \$80,000,000 increase over the fiscal year 2012 funding level for Alzheimer's disease research at NIA. In keeping with longstanding practice, the House and Senate Appropriations Committees do not recommend a specific amount of NIH funding for this purpose or for any other individual disease. Doing so would establish a dangerous precedent that could politicize the NIH peer review system. Nevertheless, in recognition that Alzheimer's disease poses a serious threat to the Nation's long-term health and economic stability, the agreement expects that a

significant portion of the recommended increase for NIA should be directed to research on Alzheimer's. The exact amount should be determined by the scientific opportunity of additional research on this disease and the quality of grant applications that are submitted for Alzheimer's relative to those submitted for other diseases. The 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 2012. In addition, NIH is urged to take advantage of existing well-characterized, longitudinal, population-based cohort studies to provide new insights into risk factors and protective factors related to cognitive decline and dementia. The NIH is encouraged to support additional research in minority populations that are at particularly high risk for cognitive decline and dementia.

Basic Biomedical Research.—The NIH is expected to maintain funding support for basic biomedical research. Basic biomedical research is an important investment in the future health, wealth, and international competitiveness of our Nation and plays a critical role in the Nation's economy. The purpose of basic research is to discover the nature and mechanics of disease and identify potential therapeutic avenues likely to lead to the prevention and treatment of human disease. 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 NIH.

Big Data.—The NIH Director shall provide a report on Core Techniques and Technologies for Advancing Big Data within 180 days of enactment to the House and Senate Appropriations Committees and appropriate authorizing committees. The report shall describe the policies, procedures, and processes in place to safeguard all the biomedical data, tools, analysis, and other similar forms of data

that are or will be accessible by or through the Big Data initiative. Further, it should detail how NIH plans to ensure that all of the data accessible by or through the initiative are not used for any other purpose than biomedical research. Specifically, it should describe how the policies will ensure the data remains anonymized. Further, it should explain how NIH policies address the ethical, legal, and societal issues surrounding the use of such data. The Director is to provide assurances that safeguards are in-place to ensure that the Big Data Initiative or any similar initiative supported by the NIH does not allow use of biomedical information by law enforcement or any organization not using the data in a manner that benefits biomedical research.

BRAIN Initiative.—The bill provides support to the BRAIN Initiative, a multi-agency effort that also involves the National Science Foundation, the Defense Advanced Research Projects Agency and several private sector partners. This work may take decades before it results in cures or treatments, but it holds promise to unlock the secrets behind diseases such as Alzheimer's and epilepsy. The National Institute of Neurological Disorders and Stroke and the National Institute of Mental Health are expected to collaborate with the other ICs that are anticipated to participate in the project. Further, NIH shall provide a detailed report within 120 days of enactment that identifies the overall program manager, detailed timeline, annual goals and annual objectives, detailed five year budget estimates (including anticipated sources of funds), milestones, decision points to continue projects, and the business analysis used to determine annually if this is the best use of research funds given other scientific opportunities.

Buildings and Facilities.—The agreement provides up to \$7,000,000 for the planned demolition of vacant buildings 7 and 9 on the NIH campus. The NIH and HHS are expected to provide the House and Senate Appropriations Committees a

plan within 90 days of enactment of this act to address the NIH facility maintenance and repair backlog over the next five years. The plan should include the uses of the NEF and other resources that may reduce the requirement for other discretionary funds.

Clinical Center and Intramural Research (IR).—The NIH Clinical Center and Intramural Research (IR) program are national resources to support biomedical research. The NIH shall include a non-add sub-line below the IR line on all NIH and IC mechanism tables to display funding provided to operate the NIH Clinical Center (referred to as the “Clinical Center”) to improve transparency.

Clinical Trials Patient Enrollment.—The NIH is encouraged to take steps to improve the efficiency and effectiveness of NIH clinical trials related to patient enrollment and retention. Specifically, NIH is directed to conduct a trans-NIH workshop with public foundations currently working in this area, the NIH Foundation, and other appropriate organizations to discuss challenges related to clinical trials enrollment and retention. Topics to be discussed include: outside coordination with NIH supported clinical trials and public foundations, funding models to locate and support clinical trial patients, and potential public-private partnerships. Further, the workshop should examine methods to increase participation, including underrepresented and uninsured populations, in clinical trials. Finally, the workshop participants should explore potential measures to track and monitor participation in NIH supported clinical trials. A summary report of the workshop and next steps should be provided to the House and Senate Appropriations Committees by September 1, 2014.

Clinical and Translational Science Awards (CTSA).—The agreement provides a specific funding level for the core CTSA program within the NCATS

statutory language. This change removes the funding flexibility provided during the establishment years of NCATS. The ICs are expected to continue to use and provide support to the CTSA infrastructure for clinical trials and other scientifically appropriate activity. In addition, NCATS should continue to collaborate with all ICs on the overall CTSA program. The 2013 Institute of Medicine (IOM) report recommends the development of a comprehensive strategic plan with measurable objectives. The NCATS is expected to move forward with implementing the IOM recommendations in consultation with the CTSA community. Any significant changes to the program should be done with transparent and ongoing consultation with the CTSA community and NIH ICs. NCATS shall provide an update in the fiscal year 2015 budget request of all planned and expected changes since the release of the IOM report through fiscal year 2015 to include a specific plan on how NCATS will communicate and coordinate with the CTSA community.

Common Fund.—Specific funding is continued within the NIH Office of the Director account to support the critical incubator research activity. The Drug Repurposing, BRIDGs, and Molecular Libraries programs are transferred fully out of the Common Fund and into NCATS.

Consolidated Communications Activities.—The NIH has an important role in communications activities. The NIH Director is expected to develop an NIH wide process to reduce duplication of effort, consolidate, improve efficiencies, improve coordination of messages and generally reduce costs in this area.

Cures Acceleration Network (CAN).—The NIH shall provide additional details in the fiscal year 2015 and future budget requests. In particular, the request should breakout all CAN supported activity with funding details, performance

measures, details on activities and partnerships, and criteria used to select projects. The request should describe the relationship of CAN activities with other NIH programs and projected termination dates.

Dental Materials Research.—The United Nations (UN) Environmental Programme, International Negotiating Committee completed deliberations in January 2013 on a global legally binding treaty on mercury. The UN agreement contains provisions for the reduction in the use of dental amalgam, as a mercury-added product, and calls for increased dental research into alternative materials. Given the global commitment to reduce all uses of mercury, the NIH Director is expected to make the development of alternative dental restorative materials a high priority.

Extramural and Intramural Research.—The NIH has announced plans to impose an additional level of scrutiny on extramural principal investigators with grants of \$1,500,000 or more. The NIH is directed to ensure that this policy, and any other new measures which are intended to improve oversight and accountability for extramural researchers, should apply equally to intramural researchers as well. The NIH shall include an update on this topic in the fiscal year 2015 budget justifications. In addition, peer reviewers for extramural research would benefit from knowing the scope of intramural activities that are related to the subjects under consideration to reduce the possibility of duplication. Therefore, NIH is directed to make such information available to extramural peer review study sections. The NIH shall include an update in the fiscal year 2015 budget request on this action.

HIV/AIDS Funding and Office of AIDS Research—The NIH continues to be the world's leader in research in responding to the critical needs of the AIDS

pandemic, both in the U.S. and around the world, and is to be commended for supporting the NIH AIDS and non-AIDS funding allocation at the current relative rate and is urged to continue that policy. In addition, with its trans-NIH budget authority and status as a unique “institute without walls”, the Office of AIDS Research is to be commended for its leadership in setting trans-NIH AIDS research priorities, including important new basic science initiatives in the area of genomics, and its ongoing support for innovative research and community outreach to address the complex issues of AIDS in racial and ethnic minority populations in the U.S.,

Improved Coordination and Dissemination of Research.—The NIH Director and IC Directors are directed to work with the other HHS operating divisions to establish a more systematic means of disseminating research results.

Institute & Center Office of Director Costs.—The NIH is expected to provide, in the fiscal year 2015 and future budget requests, a table that lists the total funding provided to the Director’s Office of each IC and the NIH Director that breaks out the cost of travel, personnel, and performance bonuses by IC. The initial table should include the last three years of actual obligations, projections for the current year, and the fiscal year 2015 estimate.

Institutional Development Award (IDeA).—The agreement continues specific support for the IDeA program in bill language. The NIH is expected to maintain the current level the Centers of Biomedical Research Excellence (COBRE), IDeA Networks of Biomedical Research Excellence, and the IDeA Clinical Trial and Translation Program programs. The NIH is expected to split the increase for IDeA between a new COBRE competition, additional awards for the IDeA Clinical Trial and Translation Program, and support for the INBRE program.

In 2012, NIH was urged to give the IDeA Director the flexibility to include all States that qualify for the Experimental Program to Stimulate Competitive Research (EPSCoR) program in the IDeA program. Given the lack of a full response, NIH is directed to review whether changes to the eligibility criteria of the EPSCoR program are warranted and to report its recommendations to the House and Senate Appropriations Committees and the relevant authorizing committees no later than 120 days after enactment. In addition, NIH and IC Directors should work with the IDeA Director to implement a plan to improve coordination and co-funding in this program. The NIH Director is encouraged increase opportunities (to) for IDeA designated states participation in the CTSA program.

Kennedy's Disease.—Continued research in this area is encouraged to better understand the causes of this disease, along with animal testing for possible avenues for treatment. The National Institute of Neurological Disorders and Stroke shall provide an update on the state of the science in the fiscal year 2015 budget justification.

NIH Third Party Collection Pilot.—The NIH is expected to implement the third party collection pilot in a manner that allows intramural clinical trial participants the opportunity to opt into this pilot.

Opioid Drug Abuse.—Opioid narcotics are frequently abused through injection, inhalation, crushing, or oral overdose to create a highly addictive euphoria. According to some reports, more than 35 million Americans have abused prescription opioids at some point in their lifetimes. In addition, the June 2011 Institute of Medicine report on relieving pain indicates that such abuse and misuse resulted in an annual estimated cost to the nation of \$72.5 billion. The National Institute of Drug Abuse (NIDA) is expected to support meritorious scientific

activities that provide companies with the basic science to develop and implement innovative strategies to reduce opioid drug abuse. Such strategies may include new chemical molecule structures, coatings, agents, or other appropriate scientifically sound processes with a goal of providing barriers to abuse while still providing the pain relief necessary for appropriate patient care. The NIDA is strongly urged to continue its support of research on pain, including the development of pain medications with reduced abuse liability. In addition, NIDA should continue to fund research to better prevent and treat prescription drug abuse. The NIDA shall provide an update in the fiscal year 2015 budget request on activities related to addressing the opioid drug abuse problem.

Oxalosis and Hyperoxaluria.—Oxalate metabolism remains incompletely understood and elucidated in humans. The National Institute of Diabetes and Digestive and Kidney Diseases is encouraged to promote the study of additional aspects of oxalate metabolism in humans, especially the newly discovered type PH3, and to fund research into novel pathways with special attention to specific abnormalities in enzymes of the hydroxyproline pathway.

Pediatric Brain Tumors.—The National Cancer Institute (NCI) is encouraged to continue its focus on obtaining high-quality biospecimens for all cancer types and the sharing of tissues for research purposes, while exploring how genetic model and xenograft models can be used for biology studies and drug testing studies. In addition, NCI shall provide an update on the advantages and disadvantages of a time-limited special emphasis panel in the fiscal year 2015 budget request.

Pediatric Cancer Informatics Program.—Efforts to establish a more personalized medicine platform to improve treatment for pediatric cancer research

patients in community hospitals may require the development of pediatric cancer informatics systems. The NIH shall provide an update in the fiscal year 2015 budget request on any such effort and how the effort could utilize cost-effective cloud or other types of technologies.

Priority Setting Review.—The House and Senate Appropriations Committees have long supported the peer-review process. The NIH Director is directed to conduct an NIH-wide priority setting review as authorized under sections 402(b)(3) and 402(b)(4) of the PHS Act. The NIH is directed to examine how the post peer review priority setting process, resource allocation process, and the portfolio evaluation data and information ensure that the priority setting process provides decision makers with answers to key questions, such as:

(a) how the proposed activity significantly advance the body of biomedical science;

(b) how the proposed activity could contribute to expanding knowledge to improve human health;

(c) the relationship and impact of the proposed activity to the program goals and objectives; and

(d) how the proposed activity could impact the overall research portfolio of the NIH and the national research institute or national center involved.

The Director of the NIH shall provide a report on the review within 180 days of enactment to the House and Senate Appropriations Committees and appropriate authorizing committees. The report should include an executive summary of the review, findings, recommendations, and planned actions with a timeline, including

actions related to developing and implementing improved NIH-wide portfolio analysis procedures, policies, and tools.

Research Centers in Minority Institutions Program (RCMI).—Minority institutions play a critical role, especially, at the graduate level in addressing the health research and training needs of the nation. The NIH is expected to continue to support this program at no less than the fiscal year 2013 level.

Scientifically Based Strategic Planning.—The National Institutes of Health Reform Act of 2006 included a provision that requires the NIH Director to ensure implementation of scientifically based strategic planning (Sec. 402(b)(5) of the PHS Act). The agreement directs the NIH Director to provide a report on the actions taken or planned to ensure that the requirement for scientifically based NIH-wide strategic planning is fully implemented. The report should describe: the years to be covered by the NIH-wide plan or proposed planning process; how the long-term goals and annual objectives are measured, tracked, and reported through NIH-wide leadership; how the plan is implemented through resource allocation as described in section 402(b)(6) PHS Act; how the prioritization process addresses rare and neglected diseases while also maintaining a focus balance between translational and basic bio-medical science; and how the plan is harmonized across the NIH ICs to ensure a balanced portfolio that is free of unnecessary duplication and takes advantage of cross-cutting bio-medical research. The Director of NIH shall provide a report on the review within 180 days of enactment to the House and Senate Appropriations Committees and appropriate authorizing committees.

STEM Programs.—The President's fiscal year 2014 budget recommends eliminating the Science Education and Partnership Awards (SEPA) program within the Office of the Director (OD) and consolidating it within the Education

Department as part of a government wide reorganization of Science, Technology, Engineering and Mathematics (STEM) education activities. The STEM proposed consolidation would also affect the Office of Science Education within OD and several other smaller STEM programs throughout NIH. The NIH is directed to continue funding these programs in fiscal year 2014 and sufficient funding is provided within OD to include the Office of Science Education. The NIH shall continue these programs based on the same policies that existed at the start of fiscal year 2013. The agreement does not support NIH's proposed new educational programs.

Usher Syndrome.—The agreement supports research activities to prevent and correct the health related issues of Usher Syndrome. An update is requested in the fiscal year 2015 congressional budget request on the planned and on-going activities related to this syndrome. The update should address the funding level and manner in which the various ICs coordinate on common goals and objectives.

Valley Fever.—The upcoming joint NIH and CDC efforts to combat this disease are supported, which includes a field state of the science meeting and workshop. Specifically, the NIH and CDC are encouraged to work together to identify and intensify research into scientific gaps and to maximize public-private partnerships toward the development of a coccidioidomycosis vaccine and more effective treatments, which may include conducting a randomized controlled trial. The NIH shall provide an update in the fiscal year 2015 budget request that outlines the joint NIH and CDC recommendations, on-going efforts, and coordinated plans to further progress toward an effective Valley Fever treatment and vaccine.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

The agreement includes bill language instructing the Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Secretary to exempt the Mental Health Block Grant and the Substance Abuse Prevention and Treatment Block Grant from being used as a source for the PHS evaluation set-aside in fiscal year 2014, as was done prior to fiscal year 2012. Furthermore, the Administrator shall not make changes to any program, project, or activity as outlined by the budget tables included in this statement without prior notification to the House and Senate Appropriations Committees.

MENTAL HEALTH

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

Budget Activity	Agreement
Seclusion & Restraint.....	1,150,000
Youth Violence Prevention.....	23,156,000
Project Aware State Grants.....	40,000,000
Mental Health First Aid.....	15,000,000
Healthy Transitions.....	20,000,000
National Traumatic Stress Network.....	46,000,000
Children and Family Programs.....	6,474,000
Consumer and Family Network Grants	4,966,000

Budget Activity	Agreement
MH System Transformation & Health Reform..	10,582,000
Project LAUNCH.....	34,640,000
Primary & Behavioral Health Care Integration..	50,000,000
National Strategy for Suicide Prevention	0
<i>Prevention Fund</i>	2,000,000
Suicide Lifeline	5,512,000
<i>Prevention Fund</i>	1,700,000
GLS - Youth Suicide Prevention - States.....	29,700,000
<i>Prevention Fund</i>	5,800,000
GLS - Youth Suicide Prevention - Campus	5,000,000
<i>Prevention Fund</i>	1,500,000
AI/AN Suicide Prevention Initiative	2,938,000
Homelessness Prevention Programs.....	30,772,000
Minority AIDS	9,247,000
Criminal and Juvenile Justice Programs.....	4,280,000
Tribal Behavioral Health Grants.....	5,000,000

Budget Activity	Agreement
Science and Service:	
GLS - Suicide Prevention Resource Center.....	5,000,000
<i>Prevention Fund</i>	<i>1,000,000</i>
Practice Improvement & Training.....	7,847,000
Consumer & Consumer Support T.A. Centers...	1,923,000
Primary/Behavioral Health Integration T.A.....	1,996,000
Minority Fellowship Program.....	8,079,000
Disaster Response.....	1,958,000
Homelessness.....	2,302,000
HIV/AIDS Education.....	773,000

The agreement provides for a new five percent set-aside for the Mental Health Block Grant. The set-aside is for evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders, as proposed in Senate Report 113-71. It is expected that in implementing this set-aside, SAMHSA will collaborate with NIMH to develop guidance to States so that funds are used for programs showing strong evidence of effectiveness. It is expected that SAMHSA and NIMH brief the House and Senate

Appropriations Committees on implementation status of this set-aside no later than 90 days after enactment of this act.

The Administrator is directed to ensure that all new grants awarded for the Primary and Behavioral Health Integration program are funded under the authorities in section 520K of the PHS Act.

The agreement provides funding for suicide prevention grants in American Indian/Alaska Native populations as proposed in Senate Report 113-71.

The Administrator is directed to focus on a broad public safety approach when implementing the Mental Health First Aid program that offers training for both school officials and the range of actors in the public sphere that interact with youth.

The Administrators of SAMHSA and HRSA are directed to brief the House and Senate Appropriations Committees throughout fiscal year 2014 on the implementation timeline for all the *Now is the Time* initiatives and progress made once such programs are established. Because the success of these programs is dependent upon interagency cooperation, the Department is strongly encouraged to include representatives from the Departments of Education and Justice in such briefings. The implementation briefing should occur within 30 days of enactment.

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	Agreement
Opioid Treatment Programs/Regulatory Activities.....	8,746,000
Screening, Brief Intervention, Referral, and Treatment	45,000,000
<i>PHS Evaluation Funds</i>	<i>2,000,000</i>
TCE - General	13,256,000
Pregnant & Postpartum Women.....	15,970,000
Strengthening Treatment Access and Retention.....	1,668,000
Recovery Community Services Program.....	2,440,000
Access to Recovery.....	0
<i>Prevention Fund</i>	<i>50,000,000</i>
Children and Families.....	29,678,000
Treatment Systems for Homeless.....	41,488,000
Minority AIDS	65,732,000
Criminal Justice Activities.....	75,000,000
Science and Service:	
Addiction Technology Transfer Centers	9,046,000
Minority Fellowship Program.....	2,545,000
Special Initiatives/Outreach	1,436,000

The Administrator is directed to ensure that funds provided for the Screening, Brief Intervention and Referral to Treatment program are used for existing evidence-based models of providing early intervention and treatment services to those at risk of developing substance abuse disorders.

SUBSTANCE ABUSE PREVENTION

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

Budget Activity	Agreement
Capacity:	
Strategic Prevention Framework/Partnerships for Success	109,754,000
Mandatory Drug Testing.....	4,906,000
Minority AIDS.....	41,307,000
Sober Truth on Preventing Underage Drinking (STOP Act)	7,000,000
<i>National Adult-Oriented Media Public Service</i>	
<i>Campaign</i>	1,000,000
<i>Community-based Coalition Enhancement Grants ...</i>	5,000,000
<i>Intergovernmental Coordinating Committee on the</i>	
<i>Prevention of Underage Drinking.....</i>	1,000,000

Science and Service:

Budget Activity	Agreement
Fetal Alcohol Spectrum Disorder.....	1,000,000
Center for the Application of Prevention Technologies....	7,511,000
Science and Service Program Coordination	4,082,000
Minority Fellowship Program.....	71,000

The agreement does not intend for SPFSIG/Partnerships for Success grantees to use funding to address trauma, as this would serve to redirect the program's purpose.

The Administrator is commended for providing funding for the STOP Act within the budget request this year; however, the Administrator is strongly encouraged to eliminate the requirement for Community Enhancement Grant program applicants to provide evidence of State collaboration in the grant application. This program was intended by law to be a community program.

As described in Senate Report 113-71, the update requested in the fiscal year 2015 budget request regarding the use of psychotropic medications should include a description of collaboration between the Centers for Medicare and Medicaid Services and ACF as part of SAMHSA's efforts to promote the most appropriate treatment approaches for children, especially those in foster care settings.

HEALTH SURVEILLANCE AND PROGRAM SUPPORT

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

Budget Activity	Agreement
Health Surveillance.....	17,000,000
<i>PHS Evaluation Funds</i>	<i>30,428,000</i>
Program Management.....	72,729,000
Behavioral Health Workforce.....	35,000,000
Public Awareness and Support.....	13,571,000
Performance and Quality Info. Systems.....	12,996,000

The agreement provides a funding increase for Minority Fellowship programs in the Centers for Mental Health Services and Substance Abuse Treatment (CSAT) rather than in this account as proposed by the administration. The increase provided in CSAT is intended for the purpose of increasing the number of addiction counselors with Master's level training.

Eligible entities for the Mental and Behavioral Health Education and Training Grant program shall include accredited programs that train Master's level social workers, psychologists, marriage and family therapists, psychology doctoral interns, as well as behavioral health paraprofessionals. The Administrator is directed to ensure that the funding opportunities are distributed relatively equally amongst the aforementioned health professionals.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY
HEALTHCARE RESEARCH AND QUALITY

The agreement provides \$371,008,000 for the Agency for Healthcare Research and Quality (AHRQ), which includes \$364,008,000 in funds made available through section 241 of the PHS Act and \$7,000,000 made available through the PPH Fund.

Within the total for Health Costs, Quality and Outcomes, the agreement includes the following amounts:

Budget Activity	FY 2014 Agreement
Patient-Centered Health Research.....	\$0
Prevention/Care Management.....	15,904,000
<i>Prevention Fund</i>	7,000,000
Value.....	3,252,000
Health Information Technology (IT).....	29,572,000
Patient Safety Research.....	71,584,000
Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research.....	111,072,000

Within the total for the Patient Safety portfolio, the agreement provides \$5,000,000 for research grants authorized by section 933 of the PHS Act as proposed in Senate Report 113-71.

Within the total for the Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research portfolio, the agreement provides \$45,882,000 for investigator-initiated research.

Within the total for the Health IT portfolio, the agreement provides \$4,000,000 for research on the impact of health IT on patient safety, as proposed in Senate Report 113-71.

The agreement recognizes that the new AHRQ Director may be interested in refocusing the agency's research away from its traditional core areas such as improving patient safety and preventing healthcare associated infections. However, it is expected that before any such changes take place, they will be proposed in a transparent fashion in the fiscal year 2015 budget request so they can be considered during next year's appropriations process.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

PROGRAM MANAGEMENT

The agreement includes \$3,669,744,000 for the Program Management account.

Budget Request.—The agreement expects the Centers for Medicare and Medicaid Services (CMS) to provide the detailed plans for all of the agency's mandatory and discretionary resources. The CMS tables should include the prior year actual, current year request level, current year actual (based on the operating

plan) and budget request year level. Further, please include a description in the fiscal year 2015 budget request on CMS's fiscal management processes in place.

CMS Policy Guidance.—The CMS uses Medicare Administrative Contractors (MACs) as its agent in lieu of Federal employees to process reimbursement activity. It is understood that the MACs may develop and implement independent policies, which can be perceived as being inconsistent with CMS guidance. The CMS is requested to provide a detailed description in the fiscal year 2015 budget request of the mechanisms CMS has in place or plans to put in place to ensure its contracting agents consistently adhere to CMS policies.

CMS Testing Industry Solutions Initiative.—The agreement continues support for this initiative and requests an update in the fiscal year 2015 congressional budget request on the status of the initiative.

Critical Access Hospitals.—It is expected that CMS will provide a list of critical access hospitals that would be re-designated under the Administration's proposal to remove critical access hospital status from facilities located less than 10 miles from another hospital. The CMS is encouraged to work with the Office of Rural Health Policy at Health Resources and Services Administration to ensure that rural patients maintain access to necessary health services.

Fraud, Waste, and Abuse.—The agreement urges CMS to implement a process across all operations to increase its focus on preventing improper payments and paying claims right the first time. A 2010 GAO report found that CMS had no formal process in place to ensure that vulnerabilities identified by the Recovery Audit Contractor (RAC) program are addressed. The CMS is directed to include in its annual report to Congress the steps it has taken to implement a systematic process across all operations to prevent fraud, waste, and abuse in both federal and

contractor-operated program and administrative activities and an accounting of RAC-reported vulnerabilities.

Food Allergies and Disease Management.—In the United States, a patient visits an emergency department every three minutes for the treatment of a food-related allergic reaction. Proper management of food allergies could improve patient outcomes, reduce costs, and decrease the incidence of preventable death. The CMS is encouraged to consider food allergy patients in other disease management pilot programs.

Hospital Outpatient Prospective Payment System.—There continues to be concern regarding how the CMS 2014 Hospital Outpatient Prospective Payment System rule may expand packaged payment policies. Recognizing the need to increase efficiency and decrease cost, there is specific concern regarding the criteria under which a drug or biologic associated with a hospital outpatient procedure would be packaged. It is expected that within 90 days after enactment of this act, CMS will provide a briefing for Senate and House Appropriations Committees on the criteria used to form the new rule, specifically how a drug or biologic associated with a hospital outpatient procedure was packaged together.

Recovery Audit Contractors (RACs).—There is concern that the CMS RAC program has created incentives for RACs to take overly aggressive actions. Information received from the Office of Medicare Hearings and Appeals (OMHA) indicates that about 50 percent of the estimated 43,000 appeals were fully or partially overturned at its level. The fiscal year 2015 budget request should include a plan with a timeline, goals, and measurable objectives to improve the RAC process. In addition, CMS is expected to work with Congress and stakeholders to identify challenges and additional reforms. Further, CMS should establish a

systematic feedback process with the OMHA, CMS programs, and the RACs to prevent the appearance that RACs are selecting determinations to increase their fees. The CMS is urged to stay focused on improvements to all operations that prevent improper payments in lieu of chasing dollars after the fact.

Rural Policy Decisions.—There is concern that CMS does not sufficiently account for the realities of rural health care in rule making. Small and rural hospitals, where medical workforce shortages are most severe, need reasonable flexibility to appropriately staff their facilities so they can continue to provide a full range of services to their communities. It is expected that within 90 days of enactment CMS will brief the House and Senate Appropriations Committees on how they will coordinate with HRSA’s Office of Rural Health Policy to balance proper care while allowing small and rural hospitals more flexibility in CMS’ rule making process.

HEALTH CARE FRAUD AND ABUSE CONTROL ACCOUNT

The agreement includes \$293,588,000 from the Medicare Trust Fund for the Health Care Fraud and Abuse Control account.

Medicare Fraud Prevention.—The agreement urges CMS to develop a more robust set of tools to prevent fraud, such as using the latest technology to ensure only valid beneficiaries and valid providers receive benefits. The statement directs GAO to review the feasibility, cost, benefits, and barriers for CMS to implement a Medicare transactional system with “smart card” type technology. The review must examine technology related to beneficiary and provider validation and authentication at point of entry for provider care within the Medicare program and consider ease of implementation, impact on the beneficiary, provider, ease of use, cost attributes (long and short term), and other criteria relevant to decision making, sourcing, and implementation. The GAO is expected to publish a report within one

year of enactment. The CMS is expected to provide a report on its plans for implementing the GAO recommendations within 90 days after the report is published.

ADMINISTRATION FOR CHILDREN AND FAMILIES

REFUGEE AND ENTRANT ASSISTANCE

Unaccompanied Alien Children Program.—The Secretary, in coordination with the Office of Management and Budget and the Secretaries of State and Homeland Security, is directed to develop an interagency strategy to address the challenges presented by the growing number of unaccompanied alien children arriving in the United States each year. The Secretary's designee and representatives from the Office of Management and Budget and the Departments of State and Homeland Security are directed to brief the House and Senate Appropriations Committees within 60 days of enactment on the potential solutions available to better manage this multifaceted issue.

In addition, HHS should continue to support efforts that provide pro bono legal representatives and child advocates for unaccompanied alien children. In doing so, HHS should consider the needs of both released and detained children. Given that the vast majority of children are released to a family member or sponsor pending resolution of their immigration status, HHS should ensure a proper balance in services for children accordingly.

Victims of Trafficking.—The Secretary is directed to dedicate a significant amount of the increase for the Victims of Trafficking program to improve services for foreign national trafficking victims.

CHILD CARE AND DEVELOPMENT BLOCK GRANT

Technical Assistance.—The agreement allows for technical assistance to be provided under the Child Care and Development Block Grant Act directly, or through contracts, grants, cooperative agreements or interagency arrangements.

CHILDREN AND FAMILY SERVICES

Head Start.— The bill includes language that restores funding for current grantees to their fiscal year 2012 funding level and, in addition, allows for an approximately 1.3 percent cost of living adjustment. The agreement also includes up to \$25,000,000 for transition-related costs associated with the Head Start Designation Renewal System.

Within the total for Head Start, \$500,000,000 is for expanding Early Head Start (EHS), including EHS-Child Care Partnerships where appropriate. In awarding these funds HHS should prioritize organizations that seek to develop a unified birth-to-school-entry continuum through alignment with other federally, State, or locally funded early childhood care and education programs. The Department should allocate these funds to States by considering the number of young children from families whose income is below the poverty line. Further, the Secretary shall reserve no less than 3 percent for Indian Head Start programs and no less than 4.5 percent for migrant and seasonal Head Start programs.

Through EHS-Child Care Partnerships, new or existing EHS providers will partner with local center and family-based child care providers, leveraging current investments through the Child Care and Development Fund, to increase the quality of existing child care programs. The EHS providers shall enter into contractual relationships with local child care programs to provide training, technical

assistance, and funding to raise the bar on the quality of those programs to meet EHS program performance standards. The Department should establish standards to ensure that the responsibilities and expectations of the EHS provider and partnering child care providers, respectively, are clearly defined. The Department should prioritize organizations that seek to partner with local child care providers across settings, including center and home-based programs.

The Department is directed to provide the House and Senate Appropriations Committees a briefing no later than two weeks prior to the release of the Funding Opportunity Announcement regarding how the direction provided above will be fulfilled and the expected timeframe for the award process.

Adoption Opportunities.—Within the total, \$4,000,000 shall be for discretionary grants to test intensive and exhaustive child-focused adoptive parent recruitment strategies for children in foster care, in accordance with the language in Senate Report 113-71.

Child Abuse Discretionary Grants.—Within the total, \$3,000,000 is provided above the request for competitive grants to support the implementation of research-based court team models that include the court system, child welfare agency, and community organizations in order to better meet the needs of infants and toddlers in foster care.

Developmental Disabilities Programs.—The agreement reflects the Department's transfer of Developmental Disabilities programs from ACF to the Administration for Community Living (ACL) and funds these programs within ACL accordingly.

ADMINISTRATION FOR COMMUNITY LIVING
AGING AND DISABILITY SERVICES PROGRAMS
(INCLUDING TRANSFER OF FUNDS)

for) The agreement transfers the State Health Insurance Assistance Program from the Centers of Medicare and Medicaid Services to the Administration for Community Living (ACL).

The agreement transfers funding and administrative responsibility for the Paralysis Resource Center to ACL from CDC, as requested by the administration.

The agreement includes \$1,000,000 for a competitive grant or contract for the purpose of providing generally available technical assistance to local government and nonprofit transportation providers to ensure the disabled of any age have access to transportation assistance. The agreement concurs with the description of this grant or contract as specified in the Senate Report 113-71.

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

The Department is directed to include in its annual budget justification for fiscal year 2015 and each year thereafter the amount of administrative and overhead costs spent by the Department for every major budget line.

The agreement includes not less than \$1,500,000 for the Office of Adolescent Health to coordinate activities within the Department with respect to adolescent health, including program design and support, trend monitoring and analysis, research projects, the training of healthcare professionals, and demonstration projects.

The agreement includes \$2,000,000 to continue the national health education program on lupus for healthcare providers, with the goal of improving diagnosis

for those with lupus and reducing health disparities. The program is intended to engage healthcare providers, educators, and schools of health professions in working together to improve lupus diagnosis and treatment through education.

The agreement includes \$2,300,000 to continue the health initiative to prevent violence against women in the Office of Women's Health.

OFFICE OF INSPECTOR GENERAL

The agreement includes \$71,000,000 for the HHS Office of the Inspector General (OIG) account.

The agreement recognizes that the OIG is responsible for more than 300 programs that spend more than \$900 billion, ranging from health care insurance and clinical research to epidemiology, public health services and education. The agreement notes that the complexity of discretionary OIG oversight continues to expand. While the agreement does not direct any specific allocation or resources, the OIG is expected to continue and expand its work on discretionary programs along with its other areas of responsibility.

Enhanced Enforcement Tools.—The agreement requests the OIG develop specific recommendations on methods, tools, and approaches to enhance its oversight and enforcement efforts, particularly for issues related to contract or grant fraud. The OIG should contemplate how authorities similar to the civil money penalties used for Medicare program integrity activities might be beneficial or modified for other programs. If legislative action is required, the OIG is expected to submit technical assistance along with supporting information to the appropriate House and Senate Committees with the fiscal year 2015 budget request.

Health Reform Oversight.—The agreement provides increased support, in part to support the OIG oversight activities related to health reform. The OIG is

expected to provide a plan of how it will conduct these oversight activities within 60 days after enactment to the House and Senate Appropriations Committees and appropriate authorizing committees.

Top-25 Unimplemented Recommendations.—While HHS accepted about 190 OIG recommendations in fiscal year 2012, it left over 1,200 unimplemented recommendations outstanding. Within 60 days after enactment of this act, the OIG shall prepare a report to the Secretary, as well as the House and Senate Appropriations Committees and appropriate authorizing committees, with the top 25 unimplemented recommendations that, based on the professional opinion of the OIG, would best protect the integrity of departmental programs if implemented. Further, within 60 days of this OIG report, the HHS Secretary is directed to respond in writing to the House and Senate Appropriations Committees and appropriate authorizing committees with a plan and timeline to implement these recommendations.

PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

The agreement includes a new general provision requested by the Administration for extended multi-year contracting authority for Project BioShield. The Secretary is directed to note instances in which this multi-year authority is used as part of its monthly reports on the obligations and status of actions taken for BARDA and Project BioShield. These reports were requested by the Joint Explanatory Statement accompanying the FY 2009 Omnibus Appropriations (P.L. 111-8), but have not been submitted to the House and Senate Appropriations Committees in a timely fashion. The Secretary should include in these reports a rationale for contracts extending beyond five years and how they are in the best interest of the federal government.

The agreement represents Congress' commitment to ensuring that the nation is adequately prepared against chemical, biological, radiological, and nuclear

(CBRN) attacks, as well as to the use of a public-private partnership to develop medical countermeasures for the Strategic National Stockpile. The agreement provides Project BioShield with no-year funds; therefore, BARDA is expected to issue multi-year contracts providing for cancellation as appropriate. The Secretary is directed to submit the Project BioShield spend plan referenced in Senate report 113-71 no later than 90 days after enactment of this act.

Public trust requires that personal information collected from citizens must be safeguarded. The agreement recognizes that HHS has greatly expanded the amount and volume of information it collects from the public. The Secretary shall ensure that all information technology (IT) systems, data accessible through such systems, and data stored on any HHS system is fully protected, to include appropriate IT security safeguards, procedures, policies, and guidelines to ensure the security of all information collected from the public.

GENERAL PROVISIONS

PREVENTION AND PUBLIC HEALTH FUND

The agreement includes a modification to a provision requiring a publicly available website that details expenditures from the Prevention and Public Health Fund.

PREVENTION AND PUBLIC HEALTH TRANSFER TABLE

The agreement includes a new provision that directs the transfer of all available Prevention and Public Health (PPH) fund. In fiscal year 2014, the level (S) appropriated for the fund is \$1,000,000,000, the same as the fiscal year 2013 level. The provision prohibiting further transfer of funds is not intended to affect reimbursable agreements. Agencies receiving PPH Funds may execute the programs using standard execution mechanisms.

The agreement includes bill language in section 219 of this act requiring funds be transferred within 45 days of enactment to the following accounts, for the following activities, and in the following amounts:

Agency	Budget Activity	FY 2014 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
AHRQ	US Preventive Services Task Force.....	7,000,000
CDC	Hospitals Promoting Breastfeeding.....	8,000,000
CDC	Cancer Prevention & Control.....	104,000,000
CDC	Diabetes Prevention.....	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	National Early Care Collaboratives.....	4,000,000
CDC	Nutrition, Physical Activity & Obesity Base Activities.....	35,000,000

		FY 2014
Agency	Budget Activity	Agreement
CDC	Office of Smoking and Health.....	105,000,000
CDC	Preventive Health and Health Services Block Grants.....	160,000,000
CDC	Racial and Ethnic Approaches to Community Health.....	30,000,000
CDC	Section 317 Immunization Grants.....	160,300,000
CDC	Lead Poisoning Prevention.....	13,000,000
CDC	Workplace Wellness Grants.....	10,000,000
SAMHSA	Access to Recovery.....	50,000,000
SAMHSA	Suicide Prevention.....	12,000,000
	Sequestered Funds.....	72,000,000

BARDA

The agreement includes a new provision that provides BARDA with authority to enter into a multi-year contract for up to ten years.

FTE INFORMATION

The agreement includes a new provision requiring fiscal year 2015 budget justifications to include certain FTE information with respect to the Affordable Care Act.

NATIONAL HEALTH SERVICE CORPS CONTRACTS

The agreement includes a new provision allowing National Health Service Corps contracts to be cancelled up to 60 days after award.

ACA EXCHANGE FUNDING TRANSPARENCY

The agreement includes a new provision related to ACA exchange funding transparency.

SUPPORT FOR SENIORS IN TRADITIONAL MEDICARE

The agreement includes a new provision to support CMS administrative costs related to the growth in Medicare beneficiaries and implementation of the Medical Sustainable Growth Rate formula adjustment. The language prohibits the use of these funds for the Affordable Care Act.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

The agreement extends the authorization for the Temporary Assistance for Needy Families program.

PUBLIC HEALTH SERVICE ANALYSIS

The agreement includes a new provision requiring that, in the FY 2016 budget justification, the Secretary include an analysis of how section 2713 of the Public Health Service Act will impact discretionary HHS programs.

TITLE III
DEPARTMENT OF EDUCATION
EDUCATION FOR THE DISADVANTAGED

The agreement recognizes the federal trust responsibility to provide education for American Indians and Alaska Natives. It is noted that over the past decade Bureau of Indian Education schools have received approximately 0.7 percent of each year's appropriation for Elementary and Secondary Education Act (ESEA) Title I Grants to local educational agencies (LEAs). The Department is urged to continue to use its existing formula in allocating these funds and to follow this practice in any relevant future emergency funding that provides it the same authority and discretion.

The bill includes a new provision clarifying that title I funds may be used to address the transportation needs of homeless children and youth, as well as support homeless liaisons.

The bill includes new language under the School Improvement Grants (SIG) program that allows funds to be used to implement a research-proven, whole-school reform model; enables State educational agencies, with the approval of the Secretary of Education, to establish an alternative State-determined school improvement strategy that may be used by LEAs; and provides flexibility to LEAs eligible to receive services under the Rural Education Achievement program.

The bill also includes new language allowing States to make 5-year awards under the SIG program. This language will allow schools additional time to plan, effectively implement and sustain their turnaround efforts. The language is not intended to allow schools to delay any action necessary to improve outcomes for

its students. The Department shall provide effective guidance, support and oversight related to this provision.

SCHOOL IMPROVEMENT PROGRAMS

The bill modifies a set-aside for the Supporting Effective Educator Development program under the Improving Teacher Quality State Grants program, which provides competitive awards to national not-for-profit organizations for recruiting and training, or providing professional enhancement activities for teachers or school leaders, particularly for high-need schools most likely to face shortages in these areas. These funds may be used to support such activities in civic learning.

INNOVATION AND IMPROVEMENT

The bill includes \$250,000,000 for Race to the Top, which shall be available for obligation through December 31, 2014. Funds may be used for competitive awards to States to develop, enhance, or expand high-quality preschool programs and early childhood education programs for children from low- and moderate-income families, including children with disabilities. If awards are made to States to build capacity related to high-quality preschool programs, the Secretary of Education shall award two types of grants to States, one to low-capacity States with small or no State-funded preschool programs and another to high-capacity States that have a larger State-funded preschool program. Additionally, new bill language specifies that high-quality preschool programs should include comprehensive services and family engagement. As such, it is expected that funds will be used to help programs meet and sustain nationally recognized standards in those areas. Funds may also be used to help early childhood educators to attain higher credentials and

degrees. The bill does not provide authority for funding to be used for construction, renovation, modernization, or related activities.

In addition, the bill permits States to determine the amount of funding distributed in subgrants to eligible entities for implementation of high-quality preschool programs from low- and moderate-income families. A State receiving an award for this purpose shall ensure that any use of assessment conforms with the recommendations of the National Research Council's reports on early childhood. The bill also requires that the Secretary submit a report outlining the proposed competition and priorities to the House and Senate Appropriations Committees. It is expected that the Department will consult with the House and Senate Appropriations Committees, Committee on Education and Workforce, and the Committee on Health, Education, Labor, and Pensions (HELP), prior to the submission of the required report, including on the criteria to be used under a competition to define a high-quality preschool infrastructure and program. In addition, the Secretary shall continue to provide, on a timely and periodic basis, the findings from evaluations, including impact evaluations and interim progress evaluations, of activities conducted using any Race to the Top funds to the House and Senate Appropriations Committees.

Within the Fund for the Improvement of Education, the agreement includes funding for the following activities in the following amounts:

Budget Activity	Agreement
Arts in Education.....	\$25,000,000
Data Quality Initiative.....	1,276,000
Full Service Community Schools.....	10,000,000

Budget Activity	Agreement
Educational Facilities Clearinghouse.....	1,000,000
Peer Review.....	100,000
Innovative Approaches to Literacy.....	25,000,000
Javits Gifted and Talented Education	5,000,000
TOTAL.....	67,376,000

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

The bill also includes new language related to the educational facilities clearinghouse, the use of charter school funds for preschool, and the availability of performance-based awards of up to a total of six years under the Investing in Innovation program. Lastly, it modifies existing language related to charters or performance based contracts between schools and charter authorizers.

SAFE SCHOOLS AND CITIZENSHIP EDUCATION

Not later than 30 days after enactment of this act, the Department shall provide to the House and Senate Appropriations Committees an operating plan describing the use of funds available for safe and drug free national activities. The Department also is directed to consult the House and Senate Appropriations Committees on possible uses of these funds prior to the submission of the plan.

SPECIAL EDUCATION

The bill includes new language clarifying that the level of effort under Part B that a LEA must meet in the year after it fails to maintain its fiscal effort is the level that it should have met in the prior year. This language clarifies congressional intent and is consistent with the Office of Special Education Program's April 4, 2012, informal guidance letter on this issue. The bill also includes new language clarifying that funds reserved under section 611(c) of the IDEA may be used to help improve State capacity to meet data collection requirements under IDEA and improve data collection, quality and use under the act.

REHABILITATION SERVICES AND DISABILITY RESEARCH

The agreement modifies language allowing Vocational Rehabilitation State grant unmatched funds in excess of any funds requested during the reallocation process to be available for the Promoting Readiness of Minors in Supplemental Security Income program's continuation and technical assistance costs and for other innovative activities. Such funds used for these purposes will remain available for obligation through September 30, 2015.

The agreement includes \$5,796,000 for Demonstration and Training programs. Within this amount, the agreement provides \$750,000 to support a new competition for the parent information and training program.

The agreement includes increased funding for the Protection and Advocacy of Individual Rights and Client Assistance programs to help individuals with disabilities receive the services and supports they need to be able to work in competitive, integrated workplaces.

The agreement continues to support the Traumatic Brain Injury Model Systems (TBIMS) program funded by the National Institute on Disability and Rehabilitation Research so that the nation's valuable TBI research capacity is not diminished and to build upon the 18 existing competitively-awarded Centers across the country. The TBIMS program is the only source of non-proprietary longitudinal data on what happens to people with brain injury. ~~They~~ are a key source of evidence-based medicine, and will benefit both the civilian and military populations. *(The Centers)*

The agreement includes \$33,000,000 for the Assistive Technology program. This includes \$25,704,000 for State grant activities authorized under section 4 of the Rehabilitation Act of 1973; \$4,300,000 for protection and advocacy systems authorized under section 5; and \$996,000 for technical assistance activities authorized under section 6. The agreement also includes \$2,000,000 within the Assistive Technology program for competitive grants to support alternative financing programs that provide for the purchase of assistive technology devices. The goal in providing these funds is to allow greater access to affordable financing to help people with disabilities purchase the specialized technologies needed to live independently, to succeed at school and work and to otherwise live active and productive lives. Applicants should incorporate credit building activities in their programs, including financial education and information about other possible funding sources. Successful applicants must emphasize consumer choice and control and build programs that will provide financing for the full array of assistive technology devices and services and ensure that all people, regardless of type of disability or health condition, age, level of income and residence have access to the program.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

The agreement includes \$66,291,000 for the National Technical Institute for the Deaf. Funding for construction will be considered in the future as needs may warrant.

CAREER, TECHNICAL, AND ADULT EDUCATION

The Department is urged to strengthen adult education programs to increase the focus on adults with the lowest literacy and numeracy skills. The Department should work with national adult literacy organizations to identify and promote new capacity building initiatives on adult learner leadership and advisory roles in local programs and assist in evaluating program effectiveness.

The agreement provides \$13,712,000 for national leadership activities, including \$3,000,000 to support new awards for prisoner re-entry education models as described in Senate Report 113-71.

STUDENT FINANCIAL ASSISTANCE

The Department shall provide \$8,390,000 within the Federal Work-Study program for the Work Colleges program authorized under section 448 of the Higher Education Act (HEA).

The National Student Loan Data System (NSLDS) is the Department's central database for the tracking of student aid, including the enrollment status of student aid recipients. In March 2012, the Department announced changes to the NSLDS Enrollment Reporting roster files to allow for improved evaluation of the Pell Grant program. Beginning with the 2012-2013 Pell Grant Award Year, the NSLDS Enrollment Reporting roster files will include, in addition to an institution of higher education's Title IV loan recipients, a separate category for an

institution's Pell Grants-only recipients. This revision is aimed at improving the enrollment reporting process for Pell Grant recipients to the Department, which is responsible for overseeing the performance and effectiveness of the Pell Grant program.

Recognizing the importance of improving the enrollment reporting process, the Department is directed to submit a report to the House and Senate Appropriations Committees, no later than 120 days ~~of~~ ^{after} the enactment of this act, on enrollment and graduation information for Pell Grant recipients for the 2012-2013 Pell Grant Award Year. The Department is also directed to continue to provide enrollment and graduation information to the House and Senate Appropriations Committees in the future as more robust and useful information becomes available. Since Pell Grant recipient enrollment and graduation information was not included until the 2012-2013 Pell Grant Award Year, it is understood that six year graduation cohort rates will not be available for analysis until 2019.

Additionally, while understanding the limitation of the data as the Department will only be able to report on student enrollment and graduation information for the 2012-2013 Pell Grant Award Year, the report should include enrollment and graduation information for Pell Grant recipients included in the NSLDS Enrollment Reporting roster files by each institution of higher education. The report should also include a plan to minimize the burden of these recent changes on institutions of higher education, a proposal to improve the tracking of enrollment and graduation rates for students that transfer and nontraditional students, and strategies to increase enrollment rates and improve graduation rates for Pell Grant recipients.

STUDENT AID ADMINISTRATION

The Department is directed to continue to provide quarterly reports detailing its obligation plan by quarter for spending discretionary funding for student aid administrative activities broken out by servicer and activity.

The Bipartisan Budget Act of 2013 (BBA) eliminated sections of the HEA that required the Department to enter into contracts with not-for-profit (NFP) student loan servicers; the definition of eligible NFPs; and, the NFP mandatory funding source, which supported the NFP program and two of the Title IV Additional Servicers (TIVAs) contracts. The Department recently announced that as long as discretionary funding is provided, it will continue the existing NFP contracts. This agreement provides sufficient funding to continue the servicing of student loans by NFPs. The Secretary shall continue to comply with the terms of the Department's existing contracts with NFP servicers or teams of NFP servicers to service student loans through fiscal year 2014.

Congressional colloquies stated that the BBA permits NFPs to compete with TIVAs for additional accounts. This agreement directs the Secretary to develop a plan that streamlines the metrics by which NFP servicers and the TIVAs are measured to ensure consistency among and demonstrated effectiveness of all servicing contracts as authorized under the HEA, in order to inform future competitions. The Secretary is directed to submit a report detailing the plan to the House and Senate Appropriations Committees as well as to the Committee on Education and the Workforce and the Committee on HELP no later than March 31, 2014, and before any new proposed metrics (or modified metrics) are announced or implemented.

The report shall also include the following information:

- (1) How the Secretary will ensure consistent application of any proposed performance metrics to both the NFP servicers and the TIVAs given differing portfolios;
- (2) The timeline by which the proposed metrics will be implemented and the evaluation process by which all existing servicers will be measured in accordance with these new metrics in order to move forward on a competitive basis;
- (3) The anticipated challenges in moving servicers to one set of metrics and recommended solutions to those challenges; and
- (4) The impact of the plan on borrowers and the steps the Secretary will take to ensure any new metrics will be implemented with minimum disruption or negative effect to borrowers.

HIGHER EDUCATION

The agreement includes \$72,164,000 for International Education and Foreign Language Studies and encourages the Department to look for ways to support study abroad programs as authorized by section 604(b) of the HEA.

The agreement includes \$79,400,000 for the Fund for the Improvement of Postsecondary Education (FIPSE). Within the amount for FIPSE, the bill includes \$75,000,000 for the First in the World initiative, which will provide grants to institutions of higher education to help ensure that they have access to and implement innovative strategies and practices shown to be effective in improving educational outcomes and making college more affordable for students and families. The agreement includes up to \$20,000,000 to be set aside for minority-serving institutions to improve their students' persistence and completion rates

while keeping costs under control. The agreement expects the Department to prioritize applications that target innovative strategies at low-income students. The agreement directs the Department to provide a briefing and submit a report detailing information on priorities and the proposed competition to the House and Senate Appropriations Committees not later than 30 days prior to announcing the competition.

Within the remaining amounts for FIPSE, the bill includes \$1,126,000 for the Training of Realtime Writers program; \$1,500,000 for Centers for the Study of Distance Education and Technological Advancements as authorized by section 741(a)(3) of the HEA and described in Senate Report 113-71; \$500,000 for a Center for Best Practices to Support Single Parent Students as authorized by section 741(c) of the HEA; \$1,000,000 for the Secretary to enter into an agreement with the National Research Council of the National Academy of Sciences to conduct a study on the impact of Federal regulations and reporting requirements on institutions of higher education as authorized under section 1106 of the Higher Education Opportunity Act of 2008 and described in Senate Report 113-71; and, \$274,000 in continuation costs for the FIPSE database.

The agreement continues language allowing funds awarded under the Graduate Assistance in Areas of National Need program to be used to fund continuation costs for the Javits Fellowship program.

The agreement includes new language allowing the Department to increase the Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP) evaluation set-aside to up to 1.5 percent to work with the GEAR UP community and grantees to standardize data collection, including through the use of third-party data systems.

HISTORICALLY BLACK COLLEGE AND UNIVERSITY (HBCU)

CAPITAL FINANCING PROGRAM ACCOUNT

The agreement includes new language allowing funds for the HBCU Capital Financing Program to remain available through September 30, 2015.

GENERAL PROVISIONS

OFFICE OF CAREER, TECHNICAL, AND ADULT EDUCATION

The agreement includes a new general provision renaming the Office of Vocational and Adult Education as the Office of Career, Technical, and Adult Education.

EVALUATION AUTHORITY

The agreement includes a new general provision that clarifies the Department's authority to reserve up to 0.5 percent of each ESEA appropriation in the bill, except for titles I and III of the ESEA, for evaluation of ESEA programs funded in this act. The Department is directed to provide the House and Senate Appropriations Committees, Committee on Education and Workforce, and Committee on HELP an operating plan describing the proposed uses of this new evaluation authority, as well as the source appropriation for such activities. In addition, not later than 45 days prior to the submission of the required operating plan, the Department shall brief the House and Senate Appropriations Committees, the Committee on Education and Workforce, and Committee on HELP on the programs and activities being considered for inclusion in the plan. Further, the operating plan shall be submitted to the relevant committees not later than 10 days prior to the obligation of funds for this purpose. The Department is expected to

include in future congressional budget justifications a discussion of the planned use of this new authority.

IMPACT AID

The bill includes a new general provision allowing a district to carry its section 8002 eligibility to a new school district that was formed as a result of district consolidation.

FREE APPLICATION FOR FEDERAL STUDENT AID

The agreement includes a new general provision that modifies the Free Application for Federal Student Aid and requires the Department to inform foster youth of their eligibility for certain financial aid programs.

TITLE IV

RELATED AGENCIES

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

The increase provided for the Retired Senior Volunteer Program is intended to rebuild capacity that was lost due to the sequestration cuts in fiscal year 2013. The CNCS is directed to provide a description of the proposed use of funds for Pay for Success activities 30 days in advance of making any obligations under this authority.

FEDERAL MEDIATION AND CONCILIATION SERVICE

The bill includes \$400,000 for activities authorized by the Labor-Management Cooperation Act.

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	Agreement
Library Services Technology Act:	
Grants to States.....	154,848,000
Native American Library Services.....	3,861,000
National Leadership: Libraries.....	12,200,000
Laura Bush 21 st Century Librarian.....	10,000,000
Museum Services Act:	
Museums for America.....	20,200,000
Native American/Hawaiian Museum Services.....	924,000,000
National Leadership: Museums.....	7,600,000
African American History and Culture Act:	
Museum Grants for African American History & Culture.....	1,407,000
Program Administration.....	15,820,000
TOTAL.....	226,860,000

Within the amount provided for Program Administration, the bill includes \$1,820,000 for research, data collection, and evaluation activities.

RAILROAD RETIREMENT BOARD

The bill includes language giving the Railroad Retirement Board the authority to hire new attorneys in the excepted service.

SOCIAL SECURITY ADMINISTRATION

SUPPLEMENTAL SECURITY INCOME

Research and Demonstration.— The Social Security Administration (SSA) is encouraged to test the impact of providing community outreach on Social Security programs, particularly to students, individuals just entering the workforce, and new parents, on the public's understanding of Social Security programs.

LIMITATION ON ADMINISTRATIVE EXPENSES

Work Incentives Planning and Assistance (WIPA) and Protection and Advocacy for Beneficiaries of Social Security (PABSS).—The bill includes not less than \$23,000,000 for the WIPA program and \$7,000,000 for the PABSS program.

Social Security Statements.—The Commissioner is directed to develop a plan to significantly increase the number of individuals receiving Social Security Statements annually, either electronically or by mail. This should include a significant restoration of the mailing of statements to ensure that individuals are informed of their contributions and benefits under Social Security programs and have an opportunity to review their earnings records and correct any errors in a timely manner. The Commissioner or her designee is directed to brief the House

and Senate Appropriations Committees within 60 days of enactment of this act on this plan, including the intended plan for mailing statements in fiscal year 2014.

Field Office Closings.—Concerns remain that in recent years SSA has lacked comprehensive, transparent policies regarding field office closings, including data on specific populations impacted by office closures and plans to mitigate the effects of closures. The Commissioner is directed to submit a report to the House and Senate Appropriations Committees within 90 days of enactment of this act on its policies and procedures for closing and consolidating field offices, including any policies and procedures related to assessing the community impacts of closing or consolidating offices, and the metrics used to calculate short- and long-term cost savings. In addition, the Commissioner is directed to provide a readily available public notice of proposed field office closures to ensure that impacted communities are aware of proposed changes and allow an opportunity for public input on the proposed changes and possible mitigation to ensure continued access to SSA services.

Social Security Number (SSN) Printouts and Benefit Verification Letters.—The Commissioner is directed to continue to make SSN Printouts available at field offices through at least July 31, 2014 and Benefit Verification Letters available at field offices through at least September 30, 2014. The SSA should continue to encourage third parties that currently require these documents to use alternative means and existing online tools to verify the same information provided in these documents. However, concerns remain that third parties will not significantly change their behavior in a short period of time and instead individuals who are expected to provide these documents, for a variety of purposes, will be adversely impacted. The Commissioner or her designee is directed to brief the House and Senate Appropriations Committees within 30 days of enactment of this act on

planned initiatives to decrease the reliance on field offices providing these documents, including a detailed explanation of what assurances will be provided that individuals will not be adversely impacted. Further, the Commissioner shall notify the House and Senate Committees on Appropriations no later than two weeks prior to any announcement of significant changes to current policies regarding the availability of these documents at field offices.

TITLE V GENERAL PROVISIONS

REPROGRAMMING AUTHORITY

The bill modifies the general provision related to reprogramming authority.

HEAL TRANSFER

The agreement includes a new general provision that permanently transfers the Health Education Assistance Loan program from the Department of Health and Human Services to the Department of Education.

PERFORMANCE PARTNERSHIPS

The agreement includes a new general provision establishing performance partnership pilots related to discretionary funds available in this act.

PUBLIC ACCESS

The agreement includes a new general provision to promote public access to research supported by federal funding.

COMPUTER RESTRICTIONS

The bill includes a new general provision requiring computer networks supported with funds under this act to block pornography.

Insert 86-159

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	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	79,644	54,080	-25,564	FF
Advance from prior year.....	NA	(712,000)	(712,000)	---	
FY 2015.....	D	712,000	712,000	---	
Subtotal.....		791,644	766,080	-25,564	
Youth Training.....	D	846,632	820,430	-26,202	FF
Dislocated Worker Assistance, current year.....	D	185,490	141,598	-43,892	FF
Advance from prior year.....	NA	(860,000)	(860,000)	---	
FY 2015.....	D	860,000	860,000	---	
Subtotal.....		1,045,490	1,001,598	-43,892	
Subtotal, Grants to States.....		2,683,766	2,588,108	-95,658	UA
Current Year.....		(1,111,766)	(1,016,108)	(-95,658)	
FY 2015.....		(1,572,000)	(1,572,000)	---	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request		

Federally Administered Programs:						
Dislocated Worker Assistance National Reserve:						
Current year.....	D	20,859	20,859	---	FF	
Advance from prior year.....	NA	(200,000)	(200,000)	---		
FY 2015.....	D	200,000	200,000	---		
		-----	-----	-----		
Subtotal.....		220,859	220,859	---		
		-----	-----	-----		
Subtotal, Dislocated Worker Assistance.....		1,266,349	1,222,457	-43,892		
Native American Programs.....	D	47,562	46,082	-1,480	FF	UA
Migrant and Seasonal Farmworker programs.....	D	84,291	81,896	-2,395	FF	UA
Women in Apprenticeship.....	D	---	994	+994	FF	
YouthBuild activities.....	D	79,689	77,534	-2,155	FF	
Workforce Innovation Fund.....	D	150,000	47,304	-102,696		
		-----	-----	-----		
Subtotal, Federally Administered Programs (FAP).		582,401	474,669	-107,732		
Current Year.....		(382,401)	(274,669)	(-107,732)		
FY 2015.....		(200,000)	(200,000)	---		

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request		
<hr/>						
National Activities:						
Pilots, Demonstrations, and Research.....	D	25,000	---	-25,000		
Reintegration of Ex-Offenders.....	D	90,238	80,078	-10,160		
Evaluation.....	D	---	---	---		
Workforce Data Quality Initiative.....	D	6,000	6,000	---		
Subtotal.....		121,238	86,078	-35,160	FF	UA
Total, Training and Employment Services (TES)...		3,387,405	3,148,855	-238,550		
Current Year.....		(1,615,405)	(1,376,855)	(-238,550)		
FY 2015.....		(1,772,000)	(1,772,000)	---		
Office of Job Corps						
Administration.....	D	30,147	30,147	---		
Operations.....	D	1,586,776	1,578,008	-8,768	FF	
Construction, Rehabilitation and Acquisition.....	D	75,000	80,000	+5,000	FF	
Total, Office of Job Corps.....		1,691,923	1,688,155	-3,768		UA
Community Service Employment For Older Americans 1/...	D	380,000	434,371	+54,371	FF	
Federal Unemployment Benefits and Allowances.....	M	656,000	656,000	---		

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS					
Unemployment Compensation (UI):					
State Operations.....	TF	2,881,575	2,881,575	---	
Demonstration grants.....	TF	25,000	---	-25,000	
National Activities.....	TF	11,297	10,676	-621	
		-----	-----	-----	
Subtotal, Unemployment Compensation.....		2,917,872	2,892,251	-25,621	
Employment Service (ES):					
Allotments to States:					
Federal Funds.....	D	22,595	21,413	-1,182	
Trust Funds.....	TF	708,247	642,771	-65,476	
		-----	-----	-----	
Subtotal.....		730,842	664,184	-66,658	FF
ES National Activities.....	TF	20,912	19,818	-1,094	
		-----	-----	-----	
Subtotal, Employment Service.....		751,754	684,002	-67,752	
Federal Funds.....		(22,595)	(21,413)	(-1,182)	
Trust Funds.....		(729,159)	(662,589)	(-66,570)	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

Foreign Labor Certification:					
Federal Administration.....	TF	50,501	47,691	-2,810	
Grants to States.....	TF	15,099	14,282	-817	
		-----	-----	-----	
Subtotal, Foreign Labor Certification.....		65,600	61,973	-3,627	
One-Stop Career Centers/Labor Market Information.....	D	90,473	60,153	-30,320	FF
		-----	-----	-----	
Total, State UI and ES.....		3,825,699	3,698,379	-127,320	
Federal Funds.....		(113,068)	(81,566)	(-31,502)	
Trust Funds.....		(3,712,631)	(3,616,813)	(-95,818)	
State Paid Leave Fund.....	D	5,000	---	-5,000	UA
Advances to the Unemployment Trust Fund and Other Funds 2/.....	M	600,000	600,000	---	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Program Administration				
Training and Employment	D	60,325	60,074	-251
Trust Funds.....	TF	8,639	8,639	---
Employment Security.....	D	3,522	3,469	-53
Trust Funds.....	TF	39,856	39,264	-592
Apprenticeship Services.....	D	28,015	30,000	+1,985
Executive Direction.....	D	7,147	7,034	-113
Trust Funds.....	TF	2,113	2,079	-34
		-----	-----	-----
Total, Program Administration.....		149,617	150,559	+942
Federal Funds.....		(99,009)	(100,577)	(+1,568)
Trust Funds.....		(50,608)	(49,982)	(-626)
		=====	=====	=====
Total, Employment and Training Administration...		10,695,644	10,376,319	-319,325
Federal Funds.....		6,932,405	6,709,524	-222,881
Current Year.....		(5,160,405)	(4,937,524)	(-222,881)
FY 2015.....		(1,772,000)	(1,772,000)	---
Trust Funds.....		3,763,239	3,666,795	-96,444

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

EMPLOYEE BENEFITS SECURITY ADMINISTRATION (EBSA)				
Salaries and Expenses				
Enforcement and Participant Assistance	D	146,032	145,000	-1,032
Policy and Compliance Assistance.....	D	26,329	26,901	+572
Executive Leadership, Program Oversight and	D			
Administration.....	D	6,743	6,599	-144
		-----	-----	-----
Total, EBSA.....		179,104	178,500	-604
PENSION BENEFIT GUARANTY CORPORATION (PBGC)				
Pension Benefit Guaranty Corporation Fund				
Pension Insurance Activities.....	NA	(80,000)	(80,000)	---
Pension Plan Termination.....	NA	(268,230)	(268,230)	---
Operational Support.....	NA	(157,211)	(157,211)	---
		-----	-----	-----
Total, PBGC (program level).....		(505,441)	(505,441)	---

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

WAGE AND HOUR DIVISION.....	D	243,254	224,330	-18,924
OFFICE OF LABOR-MANAGEMENT STANDARDS.....	D	46,891	39,129	-7,762
OFFICE OF FEDERAL CONTRACT COMPLIANCE PROGRAMS.....	D	108,467	104,976	-3,491
OFFICE OF WORKERS' COMPENSATION PROGRAMS	D			
Salaries and Expenses.....	D	118,458	109,641	-8,817
Trust Funds.....	TF	2,142	2,142	---
		-----	-----	-----
Total, Salaries and Expenses.....		120,600	111,783	-8,817
Federal Funds.....		(118,458)	(109,641)	(-8,817)
Trust Funds.....		(2,142)	(2,142)	---
Special Benefits				
Federal Employees' Compensation Benefits.....	M	393,000	393,000	---
Longshore and Harbor Workers' Benefits.....	M	3,000	3,000	---
		-----	-----	-----
Total, Special Benefits.....		396,000	396,000	---

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Special Benefits for Disabled Coal Miners				
Benefit Payments.....	M	128,000	128,000	---
Administration.....	M	5,235	5,235	---
		-----	-----	-----
Subtotal, FY 2014 program level.....		133,235	133,235	---
Less funds advanced in prior year.....	M	-40,000	-40,000	---
		-----	-----	-----
Total, Current Year.....		93,235	93,235	---
New advances, 1st quarter, FY 2015.....	M	24,000	24,000	---
		-----	-----	-----
Total, Special Benefits for Disabled Coal Miners		117,235	117,235	---
Energy Employees Occupational Illness Compensation Fund				
Part B Administrative Expenses.....	M	55,176	55,176	---

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

	FY 2014 Request	Final Bill	Final Bill vs. Request

Black Lung Disability Trust Fund			
Benefit Payments and Interest on Advances..... M	257,478	257,478	---
Workers' Compensation Programs, Salaries and Expenses. M	32,906	33,033	+127
Departmental Management, Salaries and Expenses..... M	25,217	25,365	+148
Departmental Management, Inspector General..... M	327	327	---
	-----	-----	-----
Subtotal, Black Lung Disability.....	315,928	316,203	+275
Treasury Department Administrative Costs..... M	356	356	---
	-----	-----	-----
Total, Black Lung Disability Trust Fund.....	316,284	316,559	+275
	=====	=====	=====
Total, Workers' Compensation Programs.....	1,005,295	996,753	-8,542
Federal Funds.....	1,003,153	994,611	-8,542
Current year.....	(979,153)	(970,611)	(-8,542)
FY 2015.....	(24,000)	(24,000)	---
Trust Funds.....	2,142	2,142	---

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA)				
Salaries and Expenses				
Safety and Health Standards.....	D	22,071	20,000	-2,071
Federal Enforcement.....	D	207,785	207,785	---
Whistleblower enforcement.....	D	21,883	17,000	-4,883
State Programs.....	D	104,196	100,000	-4,196
Technical Support.....	D	24,767	24,344	-423
Compliance Assistance:				
Federal Assistance.....	D	75,294	69,433	-5,861
State Consultation Grants.....	D	57,890	57,775	-115
Training Grants.....	D	10,709	10,687	-22
Subtotal, Compliance Assistance.....	D	143,893	137,895	-5,998
Safety and Health Statistics.....	D	34,349	34,250	-99
Executive Direction and Administration.....	D	11,575	10,973	-602
		=====	=====	=====
Total, OSHA.....		570,519	552,247	-18,272

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

MINE SAFETY AND HEALTH ADMINISTRATION				
Salaries and Expenses				
Coal Enforcement.....	D	168,871	167,859	-1,012
Metal/Non-Metal Enforcement.....	D	92,870	91,697	-1,173
Standards Development.....	D	5,619	5,416	-203
Assessments.....	D	8,358	6,976	-1,382
Educational Policy and Development.....	D	29,230	36,320	+7,090
Technical Support.....	D	34,113	33,791	-322
Program Evaluation and Information Resources (PEIR)...	D	20,268	17,990	-2,278
Program Administration.....	D	21,392	15,838	-5,554
		=====	=====	=====
Total, Mine Safety and Health Administration....		380,721	375,887	-4,834
		=====	=====	=====
Total, Worker Protection Agencies.....		1,649,556	1,586,852	-62,704
Federal Funds.....		(1,647,414)	(1,584,710)	(-62,704)
Trust Funds.....		(2,142)	(2,142)	---

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

BUREAU OF LABOR STATISTICS				
Salaries and Expenses				
Employment and Unemployment Statistics.....	D	209,481	204,788	-4,693
Labor Market Information.....	TF	67,176	65,000	-2,176
Prices and Cost of Living.....	D	209,699	200,000	-9,699
Compensation and Working Conditions.....	D	82,128	78,000	-4,128
Productivity and Technology.....	D	10,313	11,424	+1,111
Executive Direction and Staff Services.....	D	34,997	33,000	-1,997
		=====	=====	=====
Total, Bureau of Labor Statistics.....		613,794	592,212	-21,582
Federal Funds.....		546,618	527,212	-19,406
Trust Funds.....		67,176	65,000	-2,176
OFFICE OF DISABILITY EMPLOYMENT POLICY D				
Salaries and Expenses.....	D	42,432	37,745	-4,687

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

DEPARTMENTAL MANAGEMENT				
Salaries and Expenses				
Executive Direction.....	D	31,812	31,482	-330
Departmental Program Evaluation.....	D	9,000	8,040	-960
Legal Services.....	D	127,684	125,136	-2,548
Trust Funds.....	TF	326	308	-18
International Labor Affairs.....	D	95,425	91,125	-4,300
Administration and Management.....	D	30,435	28,698	-1,737
Adjudication.....	D	30,352	29,113	-1,239
Women's Bureau.....	D	9,214	11,536	+2,322
Civil Rights Activities.....	D	8,268	6,430	-1,838
Chief Financial Officer.....	D	5,440	5,061	-379
		=====	=====	=====
Total, Departmental Management.....		347,956	336,929	-11,027
Federal Funds.....		(347,630)	(336,621)	(-11,009)
Trust Funds.....		(326)	(308)	(-18)

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
Veterans Employment and Training				
State Administration, Grants.....	TF	203,081	175,000	-28,081
Transition Assistance Program.....	TF	14,000	14,000	---
Federal Administration.....	TF	41,838	39,000	-2,838
National Veterans Training Institute.....	TF	3,414	3,414	---
Homeless Veterans Program.....	D	38,185	38,109	-76
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Total, Veterans Employment and Training.....		300,518	269,523	-30,995
Federal Funds.....		38,185	38,109	-76
Trust Funds.....		262,333	231,414	-30,919
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Information Technology Modernization				
Departmental support systems.....	D	4,898	4,898	---
Infrastructure technology modernization.....	D	15,689	14,880	-809
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Total, IT Modernization.....		20,587	19,778	-809
<hr/>				
Office of Inspector General				
Program Activities.....	D	79,805	74,721	-5,084
Trust Funds.....	TF	5,909	5,590	-319
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Total, Office of Inspector General.....		85,714	80,311	-5,403

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

	FY 2014 Request	Final Bill	Final Bill vs. Request
Total, Departmental Management.....	754,775	706,541	-48,234
Federal Funds.....	486,207	469,229	-16,978
Current Year.....	(486,207)	(469,229)	(-16,978)
Trust Funds.....	268,568	237,312	-31,256
Total, Workforce Investment Act Programs.....	5,079,328	4,836,016	-243,312
Current Year.....	(3,307,328)	(3,064,016)	(-243,312)
FY 2015.....	(1,772,000)	(1,772,000)	---
Total, Title I, Department of Labor.....	14,640,896	14,184,639	-456,257
Federal Funds.....	10,539,771	10,213,390	-326,381
Current Year.....	(8,743,771)	(8,417,390)	(-326,381)
FY 2015.....	(1,796,000)	(1,796,000)	---
Trust Funds.....	4,101,125	3,971,249	-129,876

Title I Footnotes:

1/ Budget request includes funds under the Department
of Health and Human Services, Administration for
Community Living.

2/ Two year availability

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	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	1,566,892	1,495,236	-71,656
Free Clinics Medical Malpractice.....	D	40	40	---
		-----	-----	-----
Subtotal, Primary Health Care.....		1,566,932	1,495,276	-71,656
Health Professions				
Training for Diversity:				
Centers of Excellence.....	D	22,909	21,711	-1,198
Health Careers Opportunity Program.....	D	---	14,189	+14,189
Faculty Loan Repayment.....	D	1,243	1,190	-53
Scholarships for Disadvantaged Students.....	D	47,452	44,970	-2,482
		-----	-----	-----
Subtotal, Training for Diversity.....		71,604	82,060	+10,456
Training in Primary Care Medicine.....	D	50,962	36,924	-14,038

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
Pediatric Loan Repayment.....	D	5,000	---	-5,000
Oral Health Training.....	D	32,392	32,008	-384
Interdisciplinary Community-Based Linkages:				
Area Health Education Centers.....	D	---	30,326	+30,326
Geriatric Programs.....	D	30,629	33,321	+2,692
Prevention and Public Health Fund 1/.....	NA	(5,300)	---	(-5,300)
Mental and Behavioral Health.....	D	2,892	7,916	+5,024
Subtotal, Interdisciplinary Community Linkages..		33,521	71,563	+38,042
Subtotal, Prevention and Public Health Fund 1/.		(5,300)	---	(-5,300)
Total, Interdisciplinary Community Linkages...		38,821	71,563	+32,742
Workforce Information and Analysis.....	D	5,000	4,663	-337
Public Health and Preventive Medicine programs.....	D	3,226	18,177	+14,951
Prevention and Public Health Fund 1/.....	NA	(4,776)	---	(-4,776)

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Nursing Programs:				
Advanced Education Nursing.....	D	83,469	61,581	-21,888
Nurse Education, Practice, and Retention.....	D	39,638	38,008	-1,630
Nursing Workforce Diversity.....	D	15,819	15,343	-476
Loan Repayment and Scholarship Program.....	D	83,135	79,986	-3,149
Comprehensive Geriatric Education.....	D	4,485	4,361	-124
Nursing Faculty Loan Program.....	D	24,553	24,562	+9
		-----	-----	-----
Subtotal, Nursing programs.....		251,099	223,841	-27,258
Children's Hospitals Graduate Medical Education.....	D	88,000	265,000	+177,000
National Practitioner Data Bank.....	D	28,016	27,456	-560
User Fees.....	D	-28,016	-27,456	+560
		-----	-----	-----
Subtotal, Health Professions.....		540,804	734,236	+193,432
Subtotal, Prevention and Public Health Fund 1/..		(10,076)	---	(-10,076)
		-----	-----	-----
Total, Health Professions.....		550,880	734,236	+183,356

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

Maternal and Child Health					
Maternal and Child Health Block Grant.....	D	638,646	634,000	-4,646	
Sickle Cell Anemia Demonstration Program.....	D	4,665	4,466	-199	UA
Traumatic Brain Injury.....	D	9,760	9,344	-416	UA
Autism and Other Developmental Disorders.....	D	47,142	47,218	+76	
Heritable Disorders.....	D	---	11,913	+11,913	
Prevention and Public Health Fund 1/.....	NA	(9,834)	---	(-9,834)	
Healthy Start.....	D	103,532	101,000	-2,532	
Universal Newborn Hearing Screening.....	D	---	17,863	+17,863	UA
Prevention and Public Health Fund 1/.....	NA	(18,660)	---	(-18,660)	
Emergency Medical Services for Children.....	D	21,116	20,213	-903	UA
		-----	-----	-----	
Subtotal, Maternal and Child Health.....		824,861	846,017	+21,156	
Subtotal, Prevention and Public Health Fund 1/..		(28,494)	---	(-28,494)	UA
		-----	-----	-----	
Total, Maternal and Child Health.....		853,355	846,017	-7,338	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
<hr/>					
Ryan White HIV/AIDS					
Ryan White HIV/AIDS:					
Emergency Assistance.....	D	666,071	655,876	-10,195	
Comprehensive Care Programs.....	D	1,370,827	1,315,005	-55,822	
AIDS Drug Assistance Program (ADAP) (NA).....	NA	(943,299)	(900,313)	(-42,986)	
Early Intervention Program.....	D	225,086	201,079	-24,007	
Children, Youth, Women, and Families.....	D	77,167	75,088	-2,079	
AIDS Dental Services.....	D	13,485	13,122	-363	
Education and Training Centers.....	D	34,542	33,611	-931	
Subtotal, Ryan White HIV/AIDS program.....		2,387,178	2,293,781	-93,397	UA
Subtotal, Evaluation Tap Funding (NA).....	NA	(25,000)	(25,000)	---	
Total, Ryan White HIV/AIDS program level.....		(2,412,178)	(2,318,781)	(-93,397)	
Health Care Systems					
Organ Transplantation.....	D	26,015	23,549	-2,466	UA
National Cord Blood Inventory.....	D	11,887	11,266	-621	
Bone Marrow Program.....	D	23,330	22,109	-1,221	
Office of Pharmacy Affairs.....	D	4,472	10,238	+5,766	
340B Drug Pricing User Fees.....	D	6,000	---	-6,000	
User Fees.....	D	-6,000	---	+6,000	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Poison Control.....	D	---	18,846	+18,846	
Prevention and Public Health Fund 1/.....	NA	(18,830)	---	(-18,830)	
National Hansen's Disease Program.....	D	16,045	15,206	-839	
Hansen's Disease Program Buildings and Facilities.....	D	127	122	-5	
Payment to Hawaii, Treatment of Hansen's.....	D	1,960	1,857	-103	
Subtotal, Health Care Systems.....		83,836	103,193	+19,357	
Subtotal, Prevention and Public Health Fund 1/..		(18,830)	---	(-18,830)	UA
Total, Health Care Systems.....		102,666	103,193	+527	
Rural Health					
Rural Outreach Grants.....	D	55,553	57,000	+1,447	UA
Rural Health Research/Policy Development.....	D	9,866	9,351	-515	
Rural Hospital Flexibility Grants.....	D	26,200	40,609	+14,409	UA
Rural and Community Access to Emergency Devices.....	D	---	3,364	+3,364	UA
State Offices of Rural Health.....	D	10,036	9,511	-525	UA
Black Lung Clinics.....	D	7,140	6,766	-374	UA
Radiation Exposure Screening and Education Program....	D	1,935	1,834	-101	UA
Telehealth.....	D	11,502	13,900	+2,398	UA
Total, Rural Health.....		122,232	142,335	+20,103	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Family Planning.....	D	327,402	286,479	-40,923	UA
Program Management.....	D	161,794	153,061	-8,733	
HEAL Liquidating Account.....	NA	(1,000)	(1,000)	---	
Health Education Assistance Loans Program Account.....	D	2,807	2,687	-120	
Vaccine Injury Compensation Program Trust Fund					
Post-FY 1988 Claims.....	M	235,000	235,000	---	
HRSA Administration.....	D	6,477	6,464	-13	
Total, Vaccine Injury Compensation Trust Fund...		241,477	241,464	-13	
=====					
Total, Health Resources & Services Administration		6,259,323	6,298,529	+39,206	
Total, Evaluation Tap Funding.....		(25,000)	(25,000)	---	
Total, Prevention and Public Health Fund 1/.....		(57,400)	---	(-57,400)	UA

Total, HRSA program level.....		(6,341,723)	(6,323,529)	(-18,194)	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
CENTERS FOR DISEASE CONTROL AND PREVENTION					
Immunization and Respiratory Diseases.....	D	668,696	571,536	-97,160	UA
Evaluation Tap Funding.....	NA	(12,864)	(12,864)	---	
Prevention and Public Health Fund 1/.....	NA	(72,460)	(160,300)	(+87,840)	
Subtotal		(754,020)	(744,700)	(-9,320)	
HIV/AIDS, Viral Hepatitis, STD, and TB Prevention.....	D	1,173,942	1,072,834	-101,108	UA
Evaluation Tap Funding.....	NA	(3,000)	---	(-3,000)	
Subtotal.....		1,176,942	1,072,834	-104,108	
Emerging and Zoonotic Infectious Diseases.....	D	380,664	287,300	-93,364	
Prevention and Public Health Fund 1/.....	NA	(51,750)	(52,000)	(+250)	
Subtotal.....		432,414	339,300	-93,114	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Chronic Disease Prevention and Health Promotion.....	D	620,189	711,650	+91,461	UA
Prevention and Public Health Fund 1/.....	NA	(415,904)	(446,000)	(+30,096)	
Subtotal.....		1,036,093	1,157,650	+121,557	
Birth Defects, Developmental Disabilities, Disabilities, and Health.....	D	67,148	122,435	+55,287	UA
Prevention and Public Health Fund 1/.....	NA	(74,796)	---	(-74,796)	
Subtotal.....	NA	141,944	122,435	-19,509	
Public Health Scientific Services.....	D	144,416	347,179	+202,763	
Evaluation Tap Funding.....	NA	(324,889)	(85,691)	(-239,198)	
Prevention and Public Health Fund 1/.....	NA	(70,000)	---	(-70,000)	
Subtotal.....		(539,305)	(432,870)	(-106,435)	
Environmental Health.....	D	126,126	147,555	+21,429	UA
Prevention and Public Health Fund 1/.....	NA	(29,000)	(13,000)	(-16,000)	
Subtotal.....		155,126	160,555	+5,429	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Injury Prevention and Control.....	D	176,585	142,311	-34,274	UA
Evaluation Tap Funding.....	NA	(5,000)	---	(-5,000)	
Prevention and Public Health Fund 1/.....	NA	---	---	---	
Subtotal.....		181,585	142,311	-39,274	
National Institute for Occupational Safety & Health 1/	D	---	180,300	+180,300	
Evaluation Tap Funding.....	NA	(271,911)	(112,000)	(-159,911)	
Subtotal.....		(271,911)	(292,300)	(+20,389)	
Energy Employees Occupational Illness Compensation Program.....	M	55,358	55,358	---	
Global Health.....	D	393,024	383,000	-10,024	
Public Health Preparedness and Response.....	D	1,334,316	1,323,450	-10,866	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

CDC-wide Activities and Program Support	D				
Prevention and Public Health Fund 1/.....	NA	(41,200)	(160,000)	(+118,800)	
Business Services.....	D	---	380,000	+380,000	
Preventive Health and Health Services Block Grant.....	D	---	---	---	UA
Buildings and facilities.....	D	14,591	24,000	+9,409	
Office of the Director.....	D	116,812	113,570	-3,242	
		-----	-----	-----	
Subtotal, CDC-Wide Activities.....		(172,603)	(677,570)	(+504,967)	
		=====	=====	=====	
Total, Centers for Disease Control.....		6,026,977	6,693,778	+666,801	
Discretionary		5,216,509	5,807,120	+590,611	
Evaluation Tap Funding (NA).....	NA	(617,664)	(210,555)	(-407,109)	
Prevention and Public Health Fund 1/.....	NA	(755,110)	(831,300)	(+76,190)	
		-----	-----	-----	
Total, Centers for Disease Control Program Level		(6,644,641)	(6,904,333)	(+259,692)	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

NATIONAL INSTITUTES OF HEALTH				
National Cancer Institute.....	D	5,125,951	4,923,238	-202,713
National Heart, Lung, and Blood Institute.....	D	3,098,508	2,988,605	-109,903
National Institute of Dental & Craniofacial Research..	D	411,515	398,650	-12,865
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK).....	D	1,811,786	1,744,274	-67,512
National Institute of Neurological Disorders & Stroke.	D	1,642,619	1,587,982	-54,637
National Institute of Allergy and Infectious Diseases.	D	4,578,813	4,358,841	-219,972
National Institute of General Medical Sciences.....	D	2,401,011	2,364,147	-36,864
National Institute of Child Health & Human Development	D	1,339,360	1,282,595	-56,765
National Eye Institute.....	D	699,216	682,077	-17,139
National Institute of Environmental Health Sciences...	D	691,348	665,439	-25,909
National Institute on Aging.....	D	1,193,370	1,171,038	-22,332
National Institute of Arthritis and Musculoskeletal and Skin Diseases.....	D	540,993	520,053	-20,940
National Institute on Deafness and Other Communication Disorders.....	D	422,936	404,049	-18,887

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
National Institute of Nursing Research.....	D	146,244	140,517	-5,727
National Institute on Alcohol Abuse and Alcoholism....	D	463,848	446,025	-17,823
National Institute on Drug Abuse.....	D	1,071,612	1,025,435	-46,177
National Institute of Mental Health.....	D	1,465,782	1,446,172	-19,610
National Human Genome Research Institute.....	D	517,319	497,813	-19,506
National Institute of Biomedical Imaging and Bioengineering.....	D	338,892	329,172	-9,720
National Center for Complementary and Alternative Medicine.....	D	129,041	124,296	-4,745
National Institute on Minority Health and Health Disparities.....	D	283,299	268,322	-14,977
John E. Fogarty International Center.....	D	72,864	67,577	-5,287
National Center for Advancing Translation Sciences....	D	665,688	633,267	-32,421
National Library of Medicine (NLM).....	D	382,252	327,723	-54,529
Evaluation Tap Funding.....	NA	(8,200)	(8,200)	---
Subtotal.....		390,452	335,923	-54,529

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Office of the Director	D	1,473,398	1,400,134	-73,264	
Common fund.....	NA	(572,948)	(533,039)	(-39,909)	
Buildings and Facilities.....	D	126,111	128,663	+2,552	
		=====	=====	=====	
Total, National Institutes of Health (NIH).....		31,093,776	29,926,104	-1,167,672	UA
Total, Evaluation Tap Funding.....		(8,200)	(8,200)	---	
		-----	-----	-----	
Total, NIH Program Level.....		(31,101,976)	(29,934,304)	(-1,167,672)	
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES					
ADMINISTRATION (SAMHSA)					
Mental Health					
Programs of Regional and National Significance.....	D	333,277	374,295	+41,018	
Prevention and Public Health Fund 1/.....	NA	(28,000)	(12,000)	(-16,000)	
		-----	-----	-----	
Subtotal.....		361,277	386,295	+25,018	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
Mental Health block grant.....	D	438,717	462,705	+23,988
Evaluation Tap Funding.....	NA	(21,039)	(21,039)	---
Subtotal.....		(459,756)	(483,744)	(+23,988)
Children's Mental Health.....	D	117,315	117,315	---
Grants to States for the Homeless (PATH).....	D	64,794	64,794	---
Protection and Advocacy.....	D	36,238	36,238	---
Subtotal, Mental Health.....		990,341	1,055,347	+65,006
Subtotal, Mental Health program level.....		(1,039,380)	(1,088,386)	(+49,006)
Substance Abuse Treatment				
Programs of Regional and National Significance.....	D	304,794	312,005	+7,211
Evaluation Tap Funding.....	NA	---	(2,000)	(+2,000)
Prevention and Public Health Fund 1/.....	NA	(30,000)	(50,000)	(+20,000)
Subtotal.....		(334,794)	(364,005)	(+29,211)

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Substance Abuse block grant.....	D	1,748,132	1,740,656	-7,476	
Evaluation Tap Funding.....	NA	(71,724)	(79,200)	(+7,476)	
Subtotal.....		(1,819,856)	(1,819,856)	---	
Subtotal, Substance Abuse Treatment.....		2,052,926	2,052,661	-265	
Subtotal, Program level.....		(2,154,650)	(2,183,861)	(+29,211)	
Substance Abuse Prevention					
Programs of Regional and National Significance.....	D	175,560	175,631	+71	
Health Surveillance and Program Support.....	D	129,124	151,296	+22,172	
Evaluation Tap Funding (NA).....	NA	(71,995)	(30,428)	(-41,567)	
Subtotal.....		201,119	181,724	-19,395	
Total, SAMHSA.....		3,347,951	3,434,935	+86,984	UA
Total, Evaluation Tap Funding.....		(164,758)	(132,667)	(-32,091)	
Total, Prevention and Public Health Fund 1/.....		58,000	62,000	+4,000	
Total, SAMHSA Program Level.....		(3,570,709)	(3,629,602)	(+58,893)	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ)				
Healthcare Research and Quality				
Research on Health Costs, Quality, and Outcomes:				
Patient Safety Research and Health (NA).....	NA	(88,186)	(101,156)	(+12,970)
Preventive/Care Management (NA).....	NA	(208,890)	(124,060)	(-84,830)
Evaluation Tap funding.....	NA	(20,704)	(15,904)	(-4,800)
(Prevention and Public Health Fund) 1/.....	NA	---	(7,000)	(+7,000)
Value Research (NA).....	NA	(3,252)	(3,252)	---
Crosscutting (NA).....	NA	(88,931)	(111,072)	(+22,141)
		-----	-----	-----
Subtotal, Health Costs, Quality, and Outcomes...		(301,073)	(238,384)	(-62,689)
Subtotal, Evaluation Tap Funding.....		(201,073)	(231,384)	(+30,311)
Subtotal, Prevention and Public Health Fund 1/..		---	(7,000)	(+7,000)
Medical Expenditures Panel Surveys:				
Evaluation Tap Funding (NA).....	NA	(63,811)	(63,811)	---

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Program Support:				
Evaluation Tap Funding (NA).....	NA	(68,813)	(68,813)	---

Total, AHRQ Program Level.....		(333,697)	(371,008)	(+37,311)
Prevention and Public Health Fund 1/.....		---	(7,000)	(+7,000)
=====				
Total, Public Health Service (PHS) appropriation		45,972,917	45,522,046	-450,871
Total, Public Health Service Program Level.....		(48,093,746)	(47,163,776)	(-929,970)

CENTERS FOR MEDICARE AND MEDICAID SERVICES

Grants to States for Medicaid

Medicaid Current Law Benefits.....	M	263,462,118	263,462,118	---
State and Local Administration.....	M	16,453,115	16,453,115	---
Vaccines for Children.....	M	4,293,383	4,293,383	---

Subtotal, Medicaid Program Level.....		284,208,616	284,208,616	---
Less funds advanced in prior year.....	M	-106,335,631	-106,335,631	---

Total, Grants to States for Medicaid.....		177,872,985	177,872,985	---
New advance, 1st quarter, FY 2015.....	M	103,472,323	103,472,323	---

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(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
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Payments to Health Care Trust Funds				
Supplemental Medical Insurance.....	M	194,565,000	194,565,000	---
Federal Uninsured Payment.....	M	136,000	204,000	+68,000
Program Management.....	M	1,260,000	1,319,000	+59,000
General Revenue for Part D Benefit.....	M	58,596,000	58,596,000	---
General Revenue for Part D Administration.....	M	373,000	373,000	---
HCFAC Reimbursement.....	M	255,000	128,000	-127,000
		-----	-----	-----
Total, Payments to Trust Funds, Program Level...		255,185,000	255,185,000	---
Program Management				
Research, Demonstration, Evaluation.....	TF	---	20,054	+20,054
Program Operations.....	TF	4,011,200	2,519,823	-1,491,377
State Survey and Certification.....	TF	412,353	375,330	-37,023
High Risk Insurance Pools.....	TF	22,004	22,004	---
Federal Administration.....	TF	771,800	732,533	-39,267
		-----	-----	-----
Total, Program management.....		5,217,357	3,669,744	-1,547,613

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Health Care Fraud and Abuse Control Account				
Part D Drug Benefit/Medicare Advantage (MIP).....	TF	214,117	207,636	-6,481
HHS Office of Inspector General.....	TF	29,790	28,122	-1,668
Medicaid/CHIP.....	TF	37,303	29,708	-7,595
Department of Justice.....	TF	29,790	28,122	-1,668
		-----	-----	-----
Total, Health Care Fraud and Abuse Control.....		311,000	293,588	-17,412
		=====	=====	=====
Total, Centers for Medicare and Medicaid Services		542,058,665	540,493,640	-1,565,025
Federal funds.....		536,530,308	536,530,308	---
Current year.....		(433,057,985)	(433,057,985)	---
New advance, FY 2015.....		(103,472,323)	(103,472,323)	---
Trust Funds.....		5,528,357	3,963,332	-1,565,025

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	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	---
Repatriation.....	M	1,000	1,000	---
Subtotal.....		34,000	34,000	---
Child Support Enforcement:				
State and Local Administration.....	M	3,480,340	3,480,340	---
Federal Incentive Payments.....	M	540,905	540,905	---
Access and Visitation.....	M	10,000	10,000	---
Subtotal, Child Support Enforcement.....		4,031,245	4,031,245	---
Total, Family Support Payments Program Level....		4,065,245	4,065,245	---
Less funds advanced in previous years.....	M	-1,100,000	-1,100,000	---
Total, Family Support Payments, current year....		2,965,245	2,965,245	---
New advance, 1st quarter, FY 2015.....	M	1,250,000	1,250,000	---

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
<hr/>					
Low Income Home Energy Assistance (LIHEAP)					
Formula Grants.....	D	2,820,000	3,424,549	+604,549	
Contingency Fund.....	D	150,000	---	-150,000	
Energy burden reduction grants.....	D	50,000	---	-50,000	
		<hr/>	<hr/>	<hr/>	
Total, LIHEAP, Program Level.....		3,020,000	3,424,549	+404,549	
Refugee and Entrant Assistance					
Transitional and Medical Services.....	D	391,477	391,477	---	UA
Victims of Trafficking.....	D	19,775	13,755	-6,020	
Social Services.....	D	153,407	149,927	-3,480	UA
Preventive Health.....	D	4,730	4,600	-130	UA
Targeted Assistance.....	D	48,401	47,601	-800	UA
Unaccompanied Minors.....	D	494,597	868,000	+373,403	
Victims of Torture.....	D	11,045	10,735	-310	UA
		<hr/>	<hr/>	<hr/>	
Total, Refugee and Entrant Assistance.....		1,123,432	1,486,095	+362,663	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Child Care and Development Block Grant.....	D	2,478,313	2,360,000	-118,313	UA
Social Services Block Grant (Title XX).....	M	1,700,000	1,700,000	---	
Children and Families Services Programs					
Programs for Children, Youth and Families:					
Head Start, current funded.....	D	9,621,070	8,598,095	-1,022,975	
Consolidated Runaway, Homeless Youth Program.....	D	100,355	97,000	-3,355	
Prevention Grants to Reduce Abuse of Runaway Youth	D	17,901	17,141	-760	
Child Abuse State Grants.....	D	26,432	25,310	-1,122	UA
Child Abuse Discretionary Activities.....	D	25,744	28,744	+3,000	
Community Based Child Abuse Prevention.....	D	41,527	39,764	-1,763	
Abandoned Infants Assistance.....	D	11,553	11,063	-490	UA
Child Welfare Services.....	D	280,650	268,735	-11,915	
Child Welfare Training/	D				
Innovative Approaches to Foster Care.....	D	26,092	24,984	-1,108	
Adoption Opportunities.....	D	39,179	40,622	+1,443	UA
Adoption Incentive.....	D	39,346	37,943	-1,403	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Social Services and Income Maintenance Research.....	D	44,000	---	-44,000	
Evaluation Tap Funding.....	NA	(5,762)	(5,762)	---	
Subtotal, Program Level.....		(49,762)	(5,762)	(-44,000)	
Native American Programs.....	D	48,583	46,520	-2,063	UA
Community Services:					
Community Services Block Grant Act programs:					
Grants to States for Community Services.....	D	350,000	674,000	+324,000	UA
Economic Development.....	D	---	29,883	+29,883	UA
Rural Community Facilities.....	D	---	5,971	+5,971	UA
Subtotal.....		350,000	709,854	+359,854	
Individual Development Account Initiative.....	D	19,469	19,026	-443	UA
Subtotal, Community Services.....		369,469	728,880	+359,411	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Domestic Violence Hotline.....	D	4,500	4,500	---	UA
Family Violence/Battered Women's Shelters.....	D	135,000	133,521	-1,479	UA
Independent Living Training Vouchers.....	D	45,174	43,257	-1,917	
Faith-Based Center.....	D	1,370	1,299	-71	
Disaster Human Services Case Management.....	D	1,992	1,864	-128	
Program Direction.....	D	203,245	197,701	-5,544	
<hr/>					
Total, Children and Families Services Programs..		11,083,182	10,346,943	-736,239	
Current Year.....		(11,083,182)	(10,346,943)	(-736,239)	
Evaluation Tap Funding.....		(5,762)	(5,762)	---	
Total, Program Level.....		(11,088,944)	(10,352,705)	(-736,239)	
<hr/>					
Promoting Safe and Stable Families.....	M	345,000	345,000	---	
Discretionary Funds.....	D	63,065	59,765	-3,300	
<hr/>					
Total, Promoting Safe and Stable Families.....		408,065	404,765	-3,300	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Payments for Foster Care and Permanency				
Foster Care.....	M	4,279,000	4,279,000	---
Adoption Assistance.....	M	2,463,000	2,463,000	---
Kinship Guardianship.....	M	124,000	124,000	---
Independent Living.....	M	140,000	140,000	---

Total, Payments to States.....		7,006,000	7,006,000	---
Less Advances from Prior Year.....	M	-2,200,000	-2,200,000	---

Total, payments, current year.....		4,806,000	4,806,000	---
New Advance, 1st quarter, FY 2015.....	M	2,200,000	2,200,000	---
=====				
Total, ACF.....		31,034,237	30,943,597	-90,640
Current year.....		(27,584,237)	(27,493,597)	(-90,640)
FY 2015.....		(3,450,000)	(3,450,000)	---
Evaluation Tap Funding.....		(5,762)	(5,762)	---

Total, ACF Program Level.....		31,039,999	30,949,359	-90,640

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

ADMINISTRATION FOR COMMUNITY LIVING				
Aging Services Programs				
Grants to States:				
Home and Community-based Supportive Services.....	D	366,916	347,724	-19,192
Preventive Health.....	D	20,944	19,848	-1,096
Protection of Vulnerable Older Americans-Title VII	D	21,797	20,658	-1,139
Subtotal.....		409,657	388,230	-21,427
Family Caregivers.....	D	153,621	145,586	-8,035
Native American Caregivers Support.....	D	6,364	6,031	-333
Subtotal, Caregivers.....		159,985	151,617	-8,368
Nutrition:				
Congregate Meals.....	D	439,070	438,191	-879
Home Delivered Meals.....	D	216,830	216,397	-433
Nutrition Services Incentive Program.....	D	160,389	160,069	-320
Subtotal.....		816,289	814,657	-1,632
Subtotal, Grants to States.....		1,385,931	1,354,504	-31,427

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Grants for Native Americans.....	D	27,601	26,158	-1,443	
Aging Network Support Activities.....	D	7,873	7,461	-412	
Alzheimer's Disease Demonstrations.....	D	9,537	3,800	-5,737	UA
Prevention and Public Health Fund 1/.....	NA	(10,500)	(14,700)	(+4,200)	
Lifespan Respite Care.....	D	2,490	2,360	-130	
Chronic Disease Self-Management Program.....	D	---	---	---	
Prevention and Public Health Fund 1/.....	NA	(10,000)	(8,000)	(-2,000)	
Elder Falls.....	D	---	---	---	
Prevention and Public Health Fund 1/.....	NA	---	(5,000)	(+5,000)	
Adult Protective Services Demonstration.....	D	8,000	---	-8,000	
Senior Medicare Patrol Program.....	D	9,402	8,910	-492	
Elder Rights Support Activities.....	D	4,088	3,874	-214	
Aging and Disability Resources.....	D	---	6,119	+6,119	
State Health Insurance Program.....	TF	52,115	52,115	---	
National Clearinghouse for Long-Term Care Information.....	D	3,000	---	-3,000	
Paralysis Resource Center.....	D	6,700	6,700	---	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

Developmental Disabilities Programs 2/:					
State Councils.....	D	74,774	70,876	-3,898	
Protection and Advocacy.....	D	40,865	38,734	-2,131	
Voting Access for Individuals with Disabilities...	D	5,235	4,963	-272	
Developmental Disabilities Projects of National	D				
Significance.....	D	8,317	8,880	+563	
University Centers for Excellence in Developmental	D				
Disabilities.....	D	38,792	36,769	-2,023	
Prevention and Public Health Fund 1/.....	NA	(4,200)	---	(-4,200)	

Subtotal, Developmental Disabilities Programs...		167,983	160,222	-7,761	UA
Program Administration.....	D	30,035	30,035	---	
=====					
Total, Administration for Community Living (ACL)		1,714,755	1,662,258	-52,497	
Federal funds.....		1,662,640	1,610,143	-52,497	
Trust Funds.....		(52,115)	(52,115)	---	
Prevention and Public Health Fund 1/.....		(24,700)	(27,700)	(+3,000)	

Total, ACL program level.....		1,739,455	1,689,958	-49,497	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

OFFICE OF THE SECRETARY					
General Departmental Management					
General Departmental Management, Federal Funds.....	D	234,067	208,112	-25,955	UA
Teen Pregnancy Prevention and Abstinence Education	D				
Community Grants.....	D	---	101,000	+101,000	
Prevention and Public Health Fund 1/.....	NA	(104,790)	---	(-104,790)	
Evaluation Tap Funding.....	NA	(4,232)	(8,455)	(+4,223)	
		-----	-----	-----	
Subtotal, Grants.....		(109,022)	(109,455)	(+433)	
Abstinence Education.....	D	---	5,000	+5,000	
Minority Health.....	D	40,560	56,670	+16,110	
Office of Women's Health.....	D	26,808	34,050	+7,242	
Minority HIV/AIDS.....	D	---	52,224	+52,224	
Evaluation Tap Funding.....	NA	(53,891)	---	(-53,891)	
Embryo Adoption Awareness Campaign.....	D	---	1,000	+1,000	
Planning and Evaluation, Evaluation Tap Funding	NA	(61,718)	(60,756)	(-962)	
		-----	-----	-----	
Total, General Departmental Management.....		301,435	458,056	+156,621	
Federal Funds.....		(301,435)	(458,056)	(+156,621)	
Prevention and Public Health Fund 1/.....		(104,790)	---	(-104,790)	
Evaluation Tap Funding (NA).....		(119,841)	(69,211)	(-50,630)	
		-----	-----	-----	
Total, General Departmental Management Program..		526,066	527,267	+1,201	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
Office of Medicare Hearings and Appeals.....	TF	82,381	82,381	---
Office of the National Coordinator for Health Information Technology.....	D	20,576	15,556	-5,020
Evaluation Tap Funding.....	D	(56,307)	(44,811)	(-11,496)
Total, Program Level.....		(76,883)	(60,367)	(-16,516)
Office of Inspector General				
Inspector General Federal Funds.....	D	68,879	71,000	+2,121
HIPAA/HCFAC funding (NA).....	NA	(278,030)	(186,269)	(-91,761)
HCFAC funding (NA).....	NA	(29,790)	(28,122)	(-1,668)
HCFAC collections (NA).....	NA	(12,000)	(11,388)	(-612)
Total, Inspector General Program Level.....		(388,699)	(296,779)	(-91,920)

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Office for Civil Rights				
Federal Funds.....	D	42,205	38,798	-3,407
Retirement Pay and Medical Benefits for Commissioned Officers				
Retirement Payments.....	M	415,331	415,331	---
Survivors Benefits.....	M	28,239	28,239	---
Dependents' Medical Care.....	M	106,802	106,802	---
		-----	-----	-----
Total, Medical Benefits for Commissioned Officers		550,372	550,372	---
Public Health and Social Services Emergency Fund (PHSSEF)				
Assistant Secretary for Preparedness and Response D				
Operations.....	D	33,213	31,305	-1,908
Preparedness and Emergency Operations.....	D	24,789	28,079	+3,290
National Disaster Medical System.....	D	52,502	50,054	-2,448

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
Hospital Preparedness Cooperative Agreement Grants:	D			
Formula Grants.....	D	239,555	254,555	+15,000
Other Costs.....	D	15,000	---	-15,000
Emergency Systems for Advanced Registration of	D			
Volunteer Health Professionals (ESAR-VHP).....	D	505	505	---
Biomedical Advanced Research and Development	D			
Authority (BARDA).....	D	415,130	415,000	-130
Medical Countermeasure Dispensing.....	D	5,000	5,000	---
Policy and Planning.....	D	15,253	14,877	-376
Project BioShield.....	D	250,000	255,000	+5,000
Subtotal, Preparedness and Response.....	D	1,050,947	1,054,375	+3,428
Assistant Secretary for Administration	D			
Assistant Secretary for Administration, Cybersecurity	D	41,125	41,125	---
Office of Security and Strategic Information.....	D	7,470	6,118	-1,352
Public Health and Science	D			
Medical Reserve Corps.....	D	8,979	10,672	+1,693

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Office of the Secretary	D			
HHS Lease Replacements.....	D	41,000	16,131	-24,869
Pandemic Influenza Preparedness.....	D	140,009	115,009	-25,000
		-----	-----	-----
Subtotal, Non-pandemic flu/BARDA/BioShield/Parklawn	D	1,289,530	1,243,430	-46,100
		=====	=====	=====
Total, PHSSEF.....		1,289,530	1,243,430	-46,100
		=====	=====	=====
Total, Office of the Secretary.....		2,355,378	2,459,593	+104,215
Federal Funds.....		2,272,997	2,377,212	+104,215
Trust Funds.....		82,381	82,381	---
Evaluation Tap Funding (NA).....		(176,148)	(114,022)	(-62,126)
		-----	-----	-----
Total, Office of the Secretary Program Level....		2,636,316	2,573,615	-62,701
		=====	=====	=====
Total, Title II, Health and Human Services.....		623,135,952	621,081,134	-2,054,818
Federal Funds.....		617,473,099	616,983,306	-489,793
Current year.....		(510,550,776)	(510,060,983)	(-489,793)
FY 2015.....		(106,922,323)	(106,922,323)	---
Trust Funds.....		5,662,853	4,097,828	-1,565,025
Prevention and Public Health Fund 1/.....		(1,000,000)	(928,000)	(-72,000)

Title II Footnotes:

1/ Sec. 4002 of Public Law 111-148

2/ FY 2013 funds provided under Administration for
Children and Families.

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

FY 2014
Request

Final Bill

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	(3,313,597)	(3,313,597)	---	
Forward funded.....	D	2,830,575	3,539,641	+709,066	FF
Current funded.....	D	3,984	3,984	---	

Subtotal, Basic grants current year approp..		2,834,559	3,543,625	+709,066	
Subtotal, Basic grants total funds available		(6,148,156)	(6,857,222)	(+709,066)	

Basic Grants FY 2015 Advance.....	D	3,743,345	2,915,776	-827,569	
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Subtotal, Basic grants, program level.....		6,577,904	6,459,401	-118,503	
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Concentration Grants:

Advance from prior year.....	NA	(1,293,919)	(1,293,919)	---	
FY 2015 Advance.....	D	1,362,301	1,362,301	---	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

Targeted Grants:					
Advance from prior year.....	NA	(3,116,831)	(3,116,831)	---	
FY 2015 Advance.....	D	3,288,126	3,281,550	-6,576	
		-----	-----	-----	
Subtotal.....		3,288,126	3,281,550	-6,576	
Education Finance Incentive Grants:					
Advance from prior year.....	NA	(3,116,831)	(3,116,831)	---	
FY 2015 Advance.....	D	3,288,126	3,281,550	-6,576	
		-----	-----	-----	
Subtotal.....		3,288,126	3,281,550	-6,576	
		=====	=====	=====	
Subtotal, Grants to LEAs, program level.....		14,516,457	14,384,802	-131,655	
School Improvement Grants.....	D	658,552	505,756	-152,796	FF
Striving Readers.....	D	---	158,000	+158,000	FF

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

State Agency Programs:					
Migrant.....	D	393,236	374,751	-18,485	FF
Neglected and Delinquent/High Risk Youth.....	D	50,231	47,614	-2,617	FF
Subtotal, State Agency programs.....		443,467	422,365	-21,102	
Evaluation.....	D	---	880	+880	
High School Graduation Initiative.....	D	---	46,267	+46,267	
Migrant Education:					
High School Equivalency Program.....	D	36,526	34,623	-1,903	UA
Total, Education for the disadvantaged.....		15,655,002	15,552,693	-102,309	
Current Year.....		(3,973,104)	(4,711,516)	(+738,412)	
FY 2015.....		(11,681,898)	(10,841,177)	(-840,721)	
Subtotal, Forward Funded.....		(3,932,594)	(4,625,762)	(+693,168)	
PRESCHOOL DEVELOPMENT GRANTS.....	D	750,000	---	-750,000	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
<hr/>					
IMPACT AID					
Basic Support Payments.....	D	1,153,540	1,151,233	-2,307	
Payments for Children with Disabilities.....	D	48,413	48,316	-97	
Facilities Maintenance (Sec. 8008).....	D	4,845	4,835	-10	
Construction (Sec. 8007).....	D	17,441	17,406	-35	
Payments for Federal Property (Sec. 8002).....	D	---	66,813	+66,813	
		<hr/>		<hr/>	
Total, Impact aid.....		1,224,239	1,288,603	+64,364	
SCHOOL IMPROVEMENT PROGRAMS					
Effective Teaching and Learning: Literacy.....	D	186,892	---	-186,892	
Effective Teaching and Learning: STEM.....	D	414,716	---	-414,716	
Effective Teaching and Learning for Well-Rounded Educ.	D	75,000	---	-75,000	
College Pathways.....	D	102,200	---	-102,200	
State Grants for Improving Teacher Quality.....	D	---	668,389	+668,389	FF
Current funded.....	D	2,466,567	---	-2,466,567	FF
Advance from prior year.....	NA	(1,681,441)	(1,681,441)	---	
FY 2015.....	D	---	1,681,441	+1,681,441	
		<hr/>		<hr/>	
Subtotal, State Grants for Improving Teacher Quality, program level.....		2,466,567	2,349,830	-116,737	
Mathematics and Science Partnerships.....	D	---	149,717	+149,717	FF

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	
Supplemental Education Grants.....	D	17,819	16,699	-920	
21st Century Community Learning Centers.....	D	1,251,673	1,149,370	-102,303	FF
State Assessments/Enhanced Assessment Instruments.....	D	389,214	378,000	-11,214	FF
Consolidated Runaway and Homeless Youth programs.....	D	65,173	65,042	-131	FF
Training and Advisory Services (Civil Rights).....	D	6,962	6,598	-364	
Education for Native Hawaiians.....	D	34,181	32,397	-1,784	
Alaska Native Education Equity.....	D	33,185	31,453	-1,732	
Rural Education.....	D	179,193	169,840	-9,353	FF
Comprehensive Centers.....	D	51,113	48,445	-2,668	
=====					
Total, School Improvement Programs.....		5,273,688	4,397,391	-876,297	
Current Year.....		(5,273,688)	(2,715,950)	(-2,557,738)	
FY 2015.....		---	(1,681,441)	(+1,681,441)	
Subtotal, Forward Funded.....		(1,885,253)	(2,580,358)	(+695,105)	
INDIAN EDUCATION					
Grants to Local Educational Agencies.....	D	105,921	100,381	-5,540	
Federal Programs:					
Special Programs for Indian Children.....	D	18,986	17,993	-993	
National Activities.....	D	5,872	5,565	-307	

Subtotal, Federal Programs.....		24,858	23,558	-1,300	
=====					
Total, Indian Education.....		130,779	123,939	-6,840	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

INNOVATION AND IMPROVEMENT				
Race to the Top.....	D	1,000,000	250,000	-750,000
Investing in Innovation Fund.....	D	215,000	141,602	-73,398
High School redesign.....	D	300,000	---	-300,000
Teacher and Leader Innovation Fund.....	D	400,000	---	-400,000
Expanding Educational Options.....	D	294,836	---	-294,836
Transition to Teaching.....	D	---	13,762	+13,762
School Leadership.....	D	97,994	25,763	-72,231
Charter Schools Grants.....	D	---	248,172	+248,172
Magnet Schools Assistance.....	D	99,611	91,647	-7,964
Fund for the Improvement of Education (FIE).....	D	46,276	67,376	+21,100
Teacher Incentive Fund.....	D	---	288,771	+288,771
Ready-to-Learn television.....	D	---	25,741	+25,741
Advanced Placement.....	D	---	28,483	+28,483
		=====	=====	=====
Total, Innovation and Improvement.....		2,453,717	1,181,317	-1,272,400

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

SAFE SCHOOLS AND CITIZENSHIP EDUCATION				
Successful, Safe and Healthy Students.....	D	280,000	---	-280,000
Promise Neighborhoods.....	D	300,000	56,754	-243,246
National Programs.....	D	---	90,000	+90,000
Elementary and Secondary School Counseling.....	D	---	49,561	+49,561
Carol M. White Physical Education Program.....	D	---	74,577	+74,577
		=====	=====	=====
Total, Safe Schools and Citizenship Education...		580,000	270,892	-309,108
ENGLISH LANGUAGE ACQUISITION				
Current funded.....	D	47,589	47,021	-568
Forward funded.....	D	684,555	676,379	-8,176 FF
		-----	-----	-----
Total, English Language Acquisition.....		732,144	723,400	-8,744

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

SPECIAL EDUCATION					
State Grants:					
Grants to States Part B current year.....	D	1,453,752	2,189,465	+735,713	FF
Part B advance from prior year.....	NA	(9,283,383)	(9,283,383)	---	
Grants to States Part B (FY 2015).....	D	10,124,103	9,283,383	-840,720	
		-----	-----	-----	
Subtotal, program level.....		11,577,855	11,472,848	-105,007	
Preschool Grants.....	D	372,646	353,238	-19,408	FF
Grants for Infants and Families.....	D	462,710	438,498	-24,212	FF
		-----	-----	-----	
Subtotal, program level.....		12,413,211	12,264,584	-148,627	
IDEA National Activities (current funded):					
State Personnel Development.....	D	45,011	41,630	-3,381	
Technical Assistance and Dissemination.....	D	54,781	51,928	-2,853	
Personnel Preparation.....	D	85,799	83,700	-2,099	
Parent Information Centers.....	D	28,917	27,411	-1,506	
Technology and Media Services.....	D	29,588	28,047	-1,541	
		-----	-----	-----	
Subtotal, IDEA special programs.....		244,096	232,716	-11,380	
		=====	=====	=====	
Total, Special education.....		12,657,307	12,497,300	-160,007	
Current Year.....		(2,533,204)	(3,213,917)	(+680,713)	
FY 2015.....		(10,124,103)	(9,283,383)	(-840,720)	
Subtotal, Forward Funded.....		(2,289,108)	(2,981,201)	(+692,093)	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

REHABILITATION SERVICES AND DISABILITY RESEARCH				
Vocational Rehabilitation State Grants.....	M	3,302,053	3,302,053	---
Client Assistance State grants.....	D	12,240	12,000	-240
Training.....	D	30,188	33,657	+3,469
Demonstration and Training programs.....	D	5,750	5,796	+46
Migrant and Seasonal Farmworkers.....	D	---	1,196	+1,196
Protection and Advocacy of Individual Rights (PAIR)...	D	18,031	17,650	-381
Supported Employment State grants.....	D	---	27,548	+27,548
Independent Living:				
State Grants.....	D	23,359	22,878	-481
Centers.....	D	79,953	78,305	-1,648
Services for Older Blind Individuals.....	D	34,018	33,317	-701
		-----	-----	-----
Subtotal.....		137,330	134,500	-2,830

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Helen Keller National Center for Deaf/Blind Youth and Adults.....	D	9,145	9,127	-18
National Inst. Disability and Rehab. Research (NIDRR).....	D	110,000	103,970	-6,030
Assistive Technology.....	D	30,840	33,000	+2,160
		-----	-----	-----
Subtotal, Discretionary programs.....		353,524	378,444	+24,920
		=====	=====	=====
Total, Rehabilitation services.....		3,655,577	3,680,497	+24,920
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES				
American Printing House for the Blind.....	D	24,505	24,456	-49
National Technical Institute for the Deaf (NTID):				
Operations.....	D	63,422	66,291	+2,869
Construction.....	D	2,000	---	-2,000
		-----	-----	-----
Total, NTID.....		65,422	66,291	+869

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Gallaudet University:				
Operations.....	D	117,541	119,000	+1,459
		=====	=====	=====
Total, Special Institutions for Persons with Disabilities.....		207,468	209,747	+2,279
CAREER, TECHNICAL, AND ADULT EDUCATION				
Career Education:				
Basic State Grants/Secondary & Technical Education				
State Grants, current funded.....	D	332,030	326,598	-5,432 FF
Advance from prior year.....	NA	(791,000)	(791,000)	---
FY 2015.....	D	791,000	791,000	---
		-----	-----	-----
Subtotal, Basic State Grants, program level.		1,123,030	1,117,598	-5,432
National Programs.....	D	17,829	7,421	-10,408 FF
		-----	-----	-----
Subtotal, Career Education.....		1,140,859	1,125,019	-15,840

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

Adult Education:					
State Grants/Adult Basic and Literacy Education:	D				
State Grants, current funded.....	D	594,993	563,955	-31,038	FF
National Leadership Activities.....	D	14,302	13,712	-590	FF
Subtotal, Adult education.....		609,295	577,667	-31,628	
		=====	=====	=====	
Total, Career, Technical, and Adult Education...		1,750,154	1,702,686	-47,468	
Current Year.....		(959,154)	(911,686)	(-47,468)	
FY 2015.....		(791,000)	(791,000)	---	
Subtotal, Forward Funded.....		(959,154)	(911,686)	(-47,468)	
STUDENT FINANCIAL ASSISTANCE					
Pell Grants -- maximum grant (NA).....	NA	(4,860)	(4,860)	---	
Pell Grants.....	D	22,824,000	22,778,352	-45,648	
Federal Supplemental Educational Opportunity Grants...	D	734,599	733,130	-1,469	
Federal Work Study.....	D	1,126,682	974,728	-151,954	
		=====	=====	=====	
Total, Student Financial Assistance (SFA).....		24,685,281	24,486,210	-199,071	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

STUDENT AID ADMINISTRATION				
Salaries and Expenses	D	733,224	663,251	-69,973
Servicing Activities.....	D	316,867	502,749	+185,882
		=====	=====	=====
Total, Student Aid Administration.....		1,050,091	1,166,000	+115,909
HIGHER EDUCATION				
Aid for Institutional Development:				
Strengthening Institutions.....	D	80,623	79,139	-1,484
Hispanic Serving Institutions.....	D	100,432	98,583	-1,849
Promoting Post-Baccalaureate Opportunities for	D			
Hispanic Americans.....	D	9,011	8,845	-166
Strengthening Historically Black Colleges (HBCUs).	D	227,980	223,783	-4,197
Strengthening Historically Black Graduate	D			
Institutions.....	D	58,958	57,872	-1,086
Strengthening Predominantly Black Institutions....	D	9,262	9,092	-170
Asian American Pacific Islander.....	D	3,119	3,062	-57
Strengthening Alaska Native and	D			
Native Hawaiian-Serving Institutions.....	D	12,859	12,622	-237
Strengthening Native American-Serving Nontribal	D			
Institutions.....	D	3,119	3,062	-57
Strengthening Tribal Colleges.....	D	25,713	25,239	-474
		-----	-----	-----
Subtotal, Aid for Institutional development.....		531,076	521,299	-9,777

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

International Education and Foreign Language:					
Domestic Programs.....	D	73,487	65,103	-8,384	
Overseas Programs.....	D	7,451	7,061	-390	
		-----	-----	-----	
Subtotal, International Education & Foreign Lang		80,938	72,164	-8,774	
Fund for the Improvement of Postsec. Ed. (FIPSE).....	D	260,000	79,400	-180,600	
Postsecondary Program for Students with Intellectual	D				
Disabilities.....	D	---	10,384	+10,384	
Minority Science and Engineering Improvement.....	D	9,466	8,971	-495	
Tribally Controlled Postsec Voc/Tech Institutions.....	D	8,131	7,705	-426	
Federal TRIO Programs.....	D	839,932	838,252	-1,680	
GEAR UP.....	D	302,244	301,639	-605	
Graduate Assistance in Areas of National Need.....	D	30,909	29,293	-1,616	
Teacher Quality Partnerships.....	D	---	40,592	+40,592	
Child Care Access Means Parents in School.....	D	15,970	15,134	-836	
GPRA Data/HEA Program Evaluation.....	D	67,607	575	-67,032	UA
		=====	=====	=====	
Total, Higher Education.....		2,146,273	1,925,408	-220,865	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

HOWARD UNIVERSITY					
Academic Program.....	D	201,637	191,091	-10,546	
Endowment Program.....	D	3,593	3,405	-188	UA
Howard University Hospital.....	D	28,834	27,325	-1,509	
		=====	=====	=====	
Total, Howard University.....		234,064	221,821	-12,243	
COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS.....	D	459	435	-24	
HISTORICALLY BLACK COLLEGE AND UNIVERSITY (HBCU)	D				
CAPITAL FINANCING PROGRAM	D				
HBCU Federal Administration.....	D	352	334	-18	
HBCU Loan Subsidies.....	D	20,150	19,096	-1,054	
		=====	=====	=====	
Total, HBCU Capital Financing Program.....		20,502	19,430	-1,072	

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

INSTITUTE OF EDUCATION SCIENCES (IES)				
Research, Development and Dissemination.....	D	202,273	179,860	-22,413
Statistics.....	D	122,748	103,060	-19,688
Regional Educational Laboratories.....	D	57,426	54,423	-3,003
Research in Special Education.....	D	59,905	54,000	-5,905
Special Education Studies and Evaluations.....	D	11,415	10,818	-597
Statewide Data Systems.....	D	85,000	34,539	-50,461
Assessment:				
National Assessment.....	D	124,616	132,000	+7,384
National Assessment Governing Board.....	D	7,690	8,235	+545
		-----	-----	-----
Subtotal, Assessment.....		132,306	140,235	+7,929
		=====	=====	=====
Total, IES.....		671,073	576,935	-94,138

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

DEPARTMENTAL MANAGEMENT				
Program Administration:				
Salaries and Expenses.....	D	461,450	421,917	-39,533
Building Modernization.....	D	2,000	1,000	-1,000
		-----	-----	-----
Total, Program administration.....		463,450	422,917	-40,533
Office for Civil Rights.....	D	107,500	98,356	-9,144
Office of the Inspector General.....	D	62,347	57,791	-4,556
		=====	=====	=====
Total, Departmental management.....		633,297	579,064	-54,233
		=====	=====	=====
Total, Title III, Department of Education.....		74,511,115	70,603,768	-3,907,347
Current Year.....		(51,914,114)	(48,006,767)	(-3,907,347)
FY 2015.....		(22,597,001)	(22,597,001)	---

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

TITLE IV - RELATED AGENCIES				
COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED.....	D	5,396	5,257	-139
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE				
Operating Expenses				
Domestic Volunteer Service Programs:				
Volunteers in Service to America (VISTA).....	D	94,820	92,364	-2,456
National Senior Volunteer Corps:				
Foster Grandparents Program.....	D	110,565	107,702	-2,863
Senior Companion Program.....	D	46,722	45,512	-1,210
Retired Senior Volunteer Program.....	D	50,204	48,903	-1,301
Subtotal, Senior Volunteers.....		207,491	202,117	-5,374
Subtotal, Domestic Volunteer Service.....		302,311	294,481	-7,830

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

National and Community Service Programs:				
AmeriCorps State and National Grants.....	D	345,800	335,430	-10,370
Innovation, Assistance, and Other Activities.....	D	61,830	76,900	+15,070
Evaluation.....	D	5,000	5,000	---
National Civilian Community Corps.....	D	29,882	30,000	+118
State Commissions Support Grants.....	D	14,841	15,038	+197
Training and Technical Assistance.....	D	600	---	-600
		-----	-----	-----
Subtotal, National and Community Service.....		457,953	462,368	+4,415
		-----	-----	-----
Total, Operating expenses.....		760,264	756,849	-3,415
		-----	-----	-----
National Service Trust.....	D	207,293	207,368	+75
Salaries and Expenses.....	D	87,109	80,737	-6,372
Office of Inspector General.....	D	6,466	5,000	-1,466
		=====	=====	=====
Total, Corp. for National and Community Service.		1,061,132	1,049,954	-11,178

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request	

CORPORATION FOR PUBLIC BROADCASTING:					
FY 2016 (current) with FY 2015 comparable.....	D	445,000	445,000	---	
FY 2015 advance with FY 2014 comparable (NA).....	NA	(445,000)	(445,000)	---	
FY 2014 advance with FY 2013 comparable (NA).....	NA	(445,000)	(445,000)	---	
FEDERAL MEDIATION AND CONCILIATION SERVICE.....	D	47,620	45,149	-2,471	
FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION.....	D	16,423	16,423	---	
INSTITUTE OF MUSEUM AND LIBRARY SERVICES.....	D	225,813	226,860	+1,047	UA
MEDICARE PAYMENT ADVISORY COMMISSION.....	TF	12,087	11,519	-568	
MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION.....		9,500	7,500	-2,000	
NATIONAL COUNCIL ON DISABILITY.....	D	3,345	3,186	-159	UA
NATIONAL HEALTH CARE WORKFORCE COMMISSION.....	D	3,000	---	-3,000	
NATIONAL LABOR RELATIONS BOARD.....	D	284,991	274,224	-10,767	
NATIONAL MEDIATION BOARD.....	D	13,347	13,116	-231	
OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION.....	D	12,635	11,411	-1,224	

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
RAILROAD RETIREMENT BOARD				
Dual Benefits Payments Account.....	D	39,000	39,000	---
Less Income Tax Receipts on Dual Benefits.....	D	-3,000	-3,000	---
Subtotal, Dual Benefits.....		36,000	36,000	---
Federal Payment to the RR Retirement Accounts.....	M	150	150	---
Limitation on Administration.....	TF	111,739	110,300	-1,439
Limitation on the Office of Inspector General.....	TF	8,877	8,272	-605
SOCIAL SECURITY ADMINISTRATION				
Payments to Social Security Trust Funds.....	M	16,400	16,400	---
Supplemental Security Income Program				
Federal Benefit Payments.....	M	55,579,000	55,579,000	---
Beneficiary Services.....	M	3,000	3,000	---
Research and Demonstration.....	M	54,000	47,000	-7,000
Administration.....	D	4,401,000	4,920,064	+519,064
Subtotal, SSI program level.....		60,037,000	60,549,064	+512,064
Less funds advanced in prior year.....	M	-19,300,000	-19,300,000	---
Subtotal, regular SSI current year.....		40,737,000	41,249,064	+512,064
New advance, 1st quarter, FY 2015.....	M	19,700,000	19,700,000	---
Total, SSI program.....		60,437,000	60,949,064	+512,064

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DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request
Limitation on Administrative Expenses				
OASI/DI Trust Funds.....	TF	5,091,671	4,225,519	-866,152
HI/SMI Trust Funds.....	TF	1,960,838	1,807,407	-153,431
Social Security Advisory Board.....	TF	2,300	2,300	---
SSI.....	D	3,568,037	4,292,814	+724,777
Subtotal, regular LAE.....		10,622,846	10,328,040	-294,806
User Fees:				
SSI User Fee activities.....	D	173,000	171,000	-2,000
SSPA User Fee Activities.....	D	1,000	1,000	---
Subtotal, User fees.....		174,000	172,000	-2,000
Subtotal, Limitation on administrative expenses.		10,796,846	10,500,040	-296,806
Program Integrity:				
OASDI Trust Funds.....	TF	27,037	569,750	+542,713
SSI.....	TF	245,963	627,250	+381,287
Subtotal, Program integrity funding.....		273,000	1,197,000	+924,000
Total, Limitation on Administrative Expenses....		11,069,846	11,697,040	+627,194

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

		FY 2014 Request	Final Bill	Final Bill vs. Request

Office of Inspector General				
Federal Funds.....	D	30,000	28,829	-1,171
Trust Funds.....	TF	75,733	73,249	-2,484
Total, Office of Inspector General.....		105,733	102,078	-3,655
Adjustment: Trust fund transfers from general revenues	TF	-4,401,000	-4,920,064	-519,064
Total, Social Security Administration.....		67,227,979	67,844,518	+616,539
Federal funds.....		60,657,400	61,166,293	+508,893
Current year.....		(40,957,400)	(41,466,293)	(+508,893)
New advances, 1st quarter, FY 2015.....		(19,700,000)	(19,700,000)	---
Trust funds.....		6,570,579	6,678,225	+107,646
Total, Title IV, Related Agencies.....		69,525,034	70,108,839	+583,805
Federal Funds.....		62,821,752	63,300,523	+478,771
Current Year.....		(42,676,752)	(43,155,523)	(+478,771)
FY 2015 Advance.....		(19,700,000)	(19,700,000)	---
FY 2016 Advance.....		(445,000)	(445,000)	---
Trust Funds.....		6,703,282	6,808,316	+105,034

DIVISION H - DEPARTMENTS OF LABOR-HEALTH AND HUMAN SERVICES-EDUCATION-AND RELATED AGENCIES APPROPRIATIONS ACT 2014
(Amounts in Thousands)

	FY 2014 Request	Final Bill	Final Bill vs. Request

RECAP			
Mandatory, total in bill.....	612,132,581	612,125,856	-6,725
Less advances for subsequent years.....	-126,646,323	-126,646,323	---
Plus advances provided in prior years.....	128,975,631	128,975,631	---
	-----	-----	-----
Total, mandatory, current year.....	614,461,889	614,455,164	-6,725
Discretionary, total in bill.....	169,680,416	163,852,524	-5,827,892
Less advances for subsequent years.....	-24,814,001	-24,814,001	---
Plus advances provided in prior years.....	24,814,001	24,814,001	---
	-----	-----	-----
Subtotal, discretionary, current year.....	169,680,416	163,852,524	-5,827,892
Discretionary Scorekeeping adjustments:			
MSHA spending of receipts (CHIMP).....	2,000	2,000	---
SSI/SSPA User Fee Collection.....	-174,000	-172,000	+2,000
Average Weekly Insured Unemployment (AWIU) Conting	10,000	10,000	---
Medicare Eligible Accruals (permanent, indefinite)...	26,476	26,476	---
Performance bonus payments (rescission).....	-3,779,000	---	+3,779,000
Childrens Health Insurance Program (rescission)...	---	-6,317,000	-6,317,000
Independent Payment Advisory Board (rescission)...	---	-10,000	-10,000
Traditional Medicare program.....	---	305,000	+305,000
Adjustment to balance with CBO scoring.....	47,000	---	-47,000
	-----	-----	-----
Total, discretionary.....	165,812,892	157,697,000	-8,115,892
	=====	=====	=====
Grand Total, current year.....	780,274,781	772,152,164	-8,122,617
	=====	=====	=====