Calendar No. 504

111TH CONGRESS 2d Session	}	SENATE	{	Report 111–243
HUMAN	SERV	OF LABOR, H ICES, AND EDU ENCIES APPROPI	CATIO	N, AND
		REPORT		
		OF THE		10
COMMITTEE ON APPROPRIATIONS U.S. SENATE				
		ON		
		S. 3686		
	August	2, 2010.—Ordered to be pr	rinted	

Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriation Bill, 2011 (S. 3686)

Calendar No. 504

Report

111 - 243

111TH CONGRESS 2d Session

SENATE

DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERV-ICES, AND EDUCATION, AND RELATED AGENCIES APPRO-PRIATION BILL, 2011

AUGUST 2, 2010.—Ordered to be printed

Mr. HARKIN, from the Committee on Appropriations, submitted the following

REPORT

[To accompany S. 3686]

The Committee on Appropriations reports the bill (S. 3686) making appropriations for Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2011, and for other purposes, reports favorably thereon and recommends that the bill do pass.

Amount of budget authority

Total of bill as reported to the Senate	731,887,768,000
Amount of 2010 appropriations	738,707,813,000
Amount of 2011 budget estimate	732,873,505,000
Bill as recommended to Senate compared to—	
2010 appropriations	$-6,\!820,\!045,\!000$
2011 budget estimate	-985,737,000

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SUMMARY OF BUDGET ESTIMATES AND COMMITTEE RECOMMENDATIONS

For fiscal year 2011, the Committee recommends total budget authority of \$731,887,000,000 for the Departments of Labor, Health and Human Services [HHS], and Education, and Related Agencies. Of this amount, \$169,626,000,000 is current year discretionary funding, including offsets.

The bill provides discretionary program level funding of \$13,919,000,000 for the Department of Labor, \$74,566,000,000 for the Department of HHS, \$66,415,000,000 for the Department of Education and \$14,726,000,000 for related agencies. The comparable fiscal year 2010 levels were \$13,696,000,000 for Labor, \$72,424,000,000 for HHS, \$63,717,000,000 for Education and \$13,890,000,000 for related agencies.

OVERVIEW

The Labor, HHS, and Education and related agencies appropriations bill is the product of extensive deliberations, driven by the realization that no task before Congress is more important than safeguarding and improving the health and well-being of all Americans. This bill is made up of over 300 programs, spanning three Federal departments and numerous related agencies. But the bill is more than its component parts. Virtually every element of this bill reflects the traditional ideal of democracy: that every citizen deserves the right to a basic education and job skills training; protection from illness and want; and an equal opportunity to reach one's highest potential.

The Committee wrote this year's bill in a period of great uncertainty. Although the economy is expanding again, far too many Americans still can't find a job, and the threat of a double-dip recession looms large. In the longer term, the national debt continues to rise to frightening levels. As the largest nondefense Federal appropriations bill being considered by Congress this year, this bill must respond to both sets of challenges, addressing today's hard economic realities while taking every possible opportunity to reduce waste, fraud, and abuse.

Three themes permeate the Committee's recommendation. First, this bill invests in critical programs that help people gain the skills they need to find jobs, protect workers from safety hazards, and provide a safety net for the neediest Americans. Second, the Committee recognizes that every taxpayer dollar should be used wisely; efforts to root out waste are bolstered, and duplicative and inefficient programs are eliminated. Finally, just because times are lean doesn't mean that innovation should cease. This bill launches several new initiatives that will leverage reform and transform key Federal services.

Each theme is described more fully below.

Aid to Workers

With the Nation's unemployment rate at 9.5 percent, programs that help Americans find jobs and upgrade their skills are critically needed. This bill continues and expands support for programs that provide important job training and education services to workers.

Job Training.—The Committee provides an increase of \$163,582,000 over the fiscal year 2010 level for State grants for job training and for employment services, for a total of \$3,836,607,000. These programs provide education and job training to workers who have lost their jobs as a result of plant closings or mass layoffs, low-income individuals, and disadvantaged youth, particularly those who have dropped out of school. In addition, this funding level supports services that connect job seekers to employment opportunities and help employers find a qualified and diverse workforce.

The Committee also provides \$1,712,205,000, an increase of \$4,000,000, for the Office of Job Corps. This amount will enable 125 Job Corps Centers across the country to help more than 60,000 young people learn a career, earn a high school diploma or GED, pursue higher education, and find a new job. Finally, the bill includes \$110,000,000, an increase of \$7,500,000, for the YouthBuild program to provide education, employment training and job placements to disadvantaged youth at risk of long-term unemployment.

Green Jobs.—The bill also provides a \$25,000,000 increase for the Green Jobs Innovation Fund, for a total of \$65,000,000. This fund provides workers with job training in green and renewable energy industries as well as sustainable agriculture, transportation and green construction.

State Paid Leave.—When jobs are hard to come by, many workers are unable or reluctant to take time off to care for loved ones who need their help. The Committee takes an important step in addressing this problem by providing \$10,000,000 to create a new State Paid Leave Program. This program will provide competitive grants to help States establish paid leave programs, which typically offer up to 6 weeks of benefits to workers who must take time off to care for a seriously ill child, spouse, or parent, or to bond with a newborn or recently adopted child.

Worker Rights, Safety, and Health

Employers have an obligation to provide a safe and healthy workplace for their employees; pay them the wages and benefits they earn for their efforts; respect employee voices in the workplace; and prevent discrimination on the basis of race, disability or military service. Some workers' rights are more vulnerable today because of the downturn in the economy, since employees are less likely to report abuses that may jeopardize their employment. In addition, staffing cuts to the Department of Labor and related agencies during the previous administration have limited their ability to carry out their missions.

The Committee bill takes additional steps to reverse this diminished capacity by making important investments in key agencies that enforce rules protecting the health, safety, and rights of workers, including \$574,096,000, an increase of 2.8 percent over fiscal year 2010, for the Occupational Safety and Health Administration; \$377,000,000, an increase of 5.5 percent, for the Mine Safety and Health Administration; and \$244,240,000, an increase of 7.3 percent, for the Wage and Hour Division. In general, these investments will bring the staffing levels of these agencies back to levels last seen a decade ago.

International Labor Rights.—The bill also preserves jobs here in the United States and supports the adherence to internationally recognized labor rights around the globe by making sure our international trading partners don't exploit workers, particularly children. The Committee bill provides \$117,000,000 for the Bureau of International Labor Affairs for its efforts in this area. This amount is an increase of \$24,331,000 over the fiscal year 2010 level. This significant investment comes at a critical juncture, with trade relationships increasing around the world and the global economic downturn presenting threats to worker rights and the possible exploitation of children.

Mine Safety Appeals .- The explosion at the Upper Big Branch mine in West Virginia earlier this year is a tragic reminder of the important role the Federal Government must play in ensuring the safety of our Nation's miners. A key component of this is the timely adjudication of mine safety violations at the Federal Mine Safety and Health Review Commission. The number of contested mine safety violations has more than quadrupled since 2006, while staffing at the Commission has not kept pace to promptly review these cases. As a result, the number of cases awaiting review has increased fourfold and it now takes over 400 days to issue a final decision. These delays can undermine mine safety efforts and ultimately puts miners at risk. The Committee addresses this issue by providing a total increase of \$23,397,000 for the Department of Labor and the Commission to begin working down this backlog and reduce the time it takes to review contested mine safety and health violations.

Safety Net for Neediest Americans

For many Americans, especially in a struggling economy, programs funded in this bill make the difference between going hungry and having a meal, attending college or ending their education after high school, and having a warm place to stay or sleeping on the street. The Committee targets many of the increases in this bill to those who need help the most.

Child Care.—Quality child care helps children develop the skills they need to succeed in school while allowing their parents to maintain employment. The American Recovery and Reinvestment Act included important investments in child care, allowing States to increase assistance for low-income families and support quality improvement activities. The Committee maintains the funding level provided for in the Recovery Act by providing an increase of \$1,000,000,000 over the fiscal year 2010 level, for a total of \$3,127,000,000.

Head Start.—The Committee provides \$8,223,958,000 for Head Start, an increase of \$990,278,000 over the fiscal year 2010 appropriation. This will allow Head Start programs to provide com-

prehensive early childhood development services to 978,000 low-income children, and maintain increases in families served through Recovery Act funding in fiscal years 2009 and 2010.

Senior Nutrition Services.—The Committee bill includes \$857,552,000 for local programs that provide congregate and homedelivered meals to seniors. This amount is an increase of \$38,199,000 over the fiscal year 2010 appropriation.

Homeless Services.—The Committee bill addresses the problem of homelessness in a number of ways.

With many families unable to afford housing, a growing number of children are at risk of having their education disrupted by frequent moves from shelter to shelter. The Committee notes that the most recent data reported to the Department of Education show that a total of 956,914 homeless students were reported enrolled in school districts in the 2008–2009 school year, a 20 percent increase from the 2007–2008 school year. The Committee bill increases funding for the education of homeless children and youth by \$10,000,000, for a total of \$75,427,000.

The bill also includes \$159,362,000, an increase of \$17,009,000, for substance abuse and mental health services targeting the homeless. Funds are included to support a new initiative with the Department of Housing and Urban Development that will help individuals at risk of chronic homelessness move into, and remain, in permanent supportive housing.

Finally, the economic climate has put increasing pressure on all families, which in turn, has increased the number of runaway and homeless youth. The Committee provides \$123,705,000 for runaway and homeless youth programs, an increase of \$8,000,000 over last year. This supports emergency shelter and related services, transitional living programs, and outreach activities for this vulnerable population.

Refugee Social Services.—Refugees are eligible for cash and medical assistance for their first 8 months in the United States. However, the economic downturn has made an already challenging transition more difficult as newly arrived refugees struggle to find employment and ultimately become self-sufficient within that time period. Refugee Social Services supports a variety of employment and support services to address barriers to employment for newly arrived refugees. The Committee provides an increase of \$33,000,000 for this activity, for a total of \$187,005,000.

Title I (Education for the Disadvantaged).—The Committee bill includes \$14,942,401,000 for title I grants to local education agencies for improving education for low-income students. This amount is \$450,000,000 higher than the budget request and the fiscal year 2010 funding level. These funds provide support to more than 90 percent of the 15,000 school districts across the Nation—an important contribution given the reductions to education spending by State and local governments.

Student Financial Aid.—The Committee includes \$19,453,809,000 for student financial assistance, maintaining the maximum discretionary Pell Grant Program award level at \$4,860. Combined with mandatory funding provided in the Health Care and Education Reconciliation Act of 2010, the maximum award is maintained at \$5,550 for the 2011–2012 school year. The Pell Grant program supports an estimated 8,743,000 low- and middle-income students.

Health Professions

Healthcare training provides dual benefits—improving access to necessary health services for patients and opening doors to those who seek a career change as a response to long-term unemployment. While precise estimates vary, no one disputes that healthcare workforce shortages exist nationwide and are likely to increase as baby boomers age and access to healthcare expands. These shortages are particularly striking in a time of record unemployment and a shrinking middle class.

The Committee includes an additional \$170,000,000 over the fiscal year 2010 level for a total of \$706,807,000 to expand health training programs.

The Committee recommendation invests heavily in occupations at the first rung of a career ladder, and occupations that pay a wage sufficient to support those struggling to raise families or support aging dependents. Among the programs increased:

Nurse Career Ladders.—The Committee includes \$10,000,000 within the Nurse Education, Practice and Retention program to support programs that provide a continuous career ladder from certified nurse assistants through advanced practice nursing.

Nurse Faculty Loan Forgiveness.—Over 50,000 students were turned away from nurse training programs last year, largely due to a lack of faculty. The Committee recommendation more than doubles the resources available to provide loan forgiveness to nurses who agree to teach, from \$24,947,000 in fiscal year 2010 to \$53,309,000 in fiscal year 2011.

Primary Care Training.—The Committee includes \$90,000,000, an increase of \$51,077,000, for primary care training activities. In recognition of the rapid expansion of coverage required by the Patient Protection and Affordable Care Act over the next 3 years, the Committee includes bill language allowing the Department of Health and Human Services to direct more than 15 percent of the resources to physician assistant training.

Psychology Education.—The health professions initiative includes an increase of \$5,737,000, for a total of \$8,682,000 within the Allied Health appropriation directed to the training of mental and behavioral health specialists.

Oral Health Training.—The Committee includes an increase of \$15,063,000 for training programs in oral healthcare, for a total of \$47,982,000.

Public Health Workforce.—The Committee increases by \$20,000,000 the public health workforce training programs at the Centers for Disease Control and Prevention, for a total of \$57,939,000.

Rural Physician Pipeline.—The Committee includes \$5,100,000 for a newly authorized program to create opportunities for primary care physicians to train in rural areas, in hopes they will continue to serve in these shortage areas.

FISCAL ACCOUNTABILITY

Reducing Waste, Fraud, and Abuse

For fiscal year 2011, the Committee increases funding for a variety of activities aimed at reducing fraud, waste, and abuse of taxpayer dollars. These program integrity initiatives have proven to be a wise Federal investment, resulting in billions of dollars of savings from Federal entitlement programs—unemployment insurance, Medicare and Medicaid, and Social Security.

Unemployment Insurance Program Integrity.—The Committee recommendation includes \$65,000,000, an increase of \$5,000,000 over the fiscal year 2010 level, to conduct eligibility reviews of claimants of unemployment insurance [UI]. The recommendation will support the continuation and expansion of this initiative in approximately 40 States and will save State UI Trust funds an estimated \$210,000,000—representing a return on investment of more than \$3 for every \$1 spent.

Social Security Program Integrity.—The Committee provides \$796,000,000 for Social Security Administration program integrity activities. This amount is a \$38,000,000 increase over fiscal year 2010. These funds ensure that Federal benefits are paid correctly by reviewing factors that could affect eligibility and benefit amounts. Efforts include conducting continuing disability reviews and redeterminations of Supplemental Security Income program eligibility. The Committee also includes funding for the completion of a financial asset verification initiative. Combined, these activities have a return on investment of \$9 for every \$1 spent and are expected to save over \$7,000,000,000 for the Social Security, Medicare, and Medicaid programs over 10 years.

Health Care Program Integrity.—Fraud committed against Federal healthcare programs puts Americans at increased risk and diverts critical resources from providing necessary health services to some of the Nation's most vulnerable populations. The Committee includes \$561,000,000 for Health Care Fraud and Abuse Control activities at the Center for Medicare and Medicaid Services. This amount is a \$250,000,000 increase over the fiscal year 2010 level of \$311,000,000. The historical return on investment for the life of the Medicare Integrity program has been about \$14 for every \$1 spent. For fraud and abuse activities throughout Medicare and Medicaid, the Federal Government saves or recovers \$6 for every \$1 spent.

Inspectors General.—The bill provides \$214,000,000, an increase of \$12,000,000, for the inspectors general at the three Departments and the Corporation for National and Community Service to conduct additional audits and investigations of possible waste and fraud in Government programs.

Improving Oversight of Federal Contracts.—The Committee bill includes \$16,096,280 to supplement existing acquisition workforce improvement activities at the three Departments and the Social Security Administration. These funds will help agencies acquire goods and services at reduced costs and in ways that are better aligned with the agencies' missions.

Program Eliminations.—Lean economic times require tough choices and a critical look at all programs in the bill, even those that have been funded for decades. The Committee bill eliminates 23 programs totaling \$371,467,000.

LEVERAGING REFORM

Workforce Innovation Funds.—The Committee includes a total of \$242,000,000 for five new Workforce Innovation Funds that are intended to reform the Nation's workforce investment system by improving the delivery of education and training programs to workers. To ensure coordination of Federal investments in education and training, these funds will be administered jointly by the Secretaries of Labor and Education. The funds consist of \$55,000,000 for dislocated workers, \$35,000,000 for adult job training, \$95,000,000 for adult education programs. Resources for the Innovation Funds come from funding provided for State grants for these programs.

Early Learning Challenge Fund.—The Committee includes \$300,000,000 for a new Early Learning Challenge Fund that will provide competitive grants to States to raise the bar for early child-hood programs. There is robust evidence that high-quality early learning programs help children develop the cognitive, social, and emotional skills needed to succeed in school and later in life. Yet quality varies greatly across settings, within States, and across the Nation. The Early Learning Challenge Fund will encourage States to coordinate quality improvement activities across early learning settings, including child care, Head Start and pre-kindergarten programs; expand the number of low-income children in high-quality programs; and ensure that more children enter kindergarten ready to succeed.

Prevention Fund.—The Patient Protection and Affordable Care Act included \$750,000,000 in mandatory spending for the Prevention and Public Health Fund. The Committee is responsible for allocating the resources by transferring them in this bill to various programs within the Department of Health and Human Services that are intended to improve public health and reduce healthcare costs. The Committee has focused on community-based programs that make healthy options more available and preventive services more accessible.

Chronic Disease Block Grant.—Obesity is predominant risk factor in 3 of the top 5 most prevalent chronic diseases in this country: diabetes, heart disease, and arthritis. Yet, the public health response to these diseases has historically been fragmented and the relationship between the States and the Centers for Disease Control and Prevention [CDC] has evolved into five discrete "silos" that compete for resources at both the Federal and State levels.

The Committee consolidates the funding streams and requirements of these programs and adds additional resources to create a comprehensive \$687,151,000 public health initiative to prevent and reduce obesity-related chronic disease. The initiative includes: \$308,978,000 for community-based programs, \$251,000,000 for State planning and policy change, \$75,723,000 for national research and surveillance, and \$51,450,000 for the CDC to develop new models, evaluate current activities and produce cutting edgescience. Race to the Top.—The Committee includes \$675,000,000 for the administration's signature education reform program. Race to the Top was created in the American Recovery and Reinvestment Act but this will be the first time it is funded in the Labor, Health and Human Services, and Education appropriations bill. This competitive program has achieved enormous success in spurring States to change their practices for the purposes of closing the achievement gap and making other needed improvements. Tennessee and Delaware have been awarded funds so far and 36 States applied for phase 2 grants that will be awarded over the next 2 months. Grants funded by the fiscal year 2011 bill may be awarded to local school districts as well as States.

Investing in Innovation.—The Committee bill includes \$250,000,000 to replicate education programs that have high levels of effectiveness as established under rigorous research and to develop and test promising new ideas. Like Race to the Top, Investing in Innovation was created in the Recovery Act but this will be the first time it is funded in the Labor, Health and Human Services, and Education appropriations bill.

School Improvement Grants.—The Committee bill provides \$625,000,000, an increase of 14.5 percent over the fiscal year 2010 level, for school improvement grants. The bill requires that 40 percent of school improvement grant funds be directed to low-performing high schools and their feeder middle schools, as part of an initiative to improve the academic skills and graduation rates of secondary students. The bill also doubles—to \$100,000,000—funding for the high school graduation program.

Extended Learning Time.—A growing body of evidence suggests that students benefit academically from a longer school day and a longer school year. The Committee includes bill language that will allow grants for the 21st century community learning centers program to be used to help communities establish or expand extended learning time that includes both academic instruction and enrichment opportunities, and to support a more systemic restructuring of the school year. The bill includes an increase of \$100,000,000 for the 21st century community learning centers program, for a total of \$1,266,166,000.

Cures Acceleration Network.—Too often, basic biomedical research will suggest a promising path for a cure or treatment, but funding falls short to pursue the idea to its fullest potential. The Committee bill includes \$50,000,000 to create a new Cures Acceleration Network [CAN] within the National Institutes of Health that will help speed the translation and application of discoveries that have shown signs of success at the laboratory level but have not advanced far enough to attract significant investments from the private sector. CAN will make grants to biotech companies, universities and patient advocacy groups, and will also help facilitate FDA review for the high need cures that are funded by CAN.

Medical Home Demonstration.—The Committee includes \$40,000,000 for two new authorizations that support the creation of patient-centered medical homes. Research indicates that medical homes result in improved quality, reduced errors, fewer emergency visits, and fewer hospitalizations, which all result in savings to the healthcare system. While the concept has been attempted in various medical systems since 1967, the Committee hopes this demonstration will identify the best ways of organizing and funding medical homes to maximize their benefit.

Social Innovation Fund.—The Committee recommendation provides an increase of \$10,000,000 for the Social Innovation Fund at the Corporation for National Community Service, for a total of \$60,000,000.

OTHER HIGHLIGHTS OF THE BILL

National Institutes of Health [NIH].—The bill provides \$32,007,237,000, an increase of \$1,002,036,000, to fund biomedical research at the 27 Institutes and Centers that comprise the NIH. The 3.5 percent increase provided for the NIH is equal to the rate of biomedical inflation.

Education for Individuals With Disabilities.—The Committee bill provides \$11,925,211,000 under section 611 of part B grants to States for educating students with disabilities. This amount is \$420,000,000 more than the fiscal year 2010 level and \$170,000,000 more than the budget request.

Institute of Education Sciences.—The Committee bill includes \$722,756,000 to support the Institute's activities related to education research, data collection and analysis, and assessment of student progress. This funding level is \$63,750,000 more than the amount provided in the fiscal year 2010 appropriations bill and will expand much-needed investments in research, development and evaluation to generate solutions to critical problems in education. These funds also will support evaluation of reforms taking place under the Race to the Top fund and School Improvement Grants program.

Corporation for National and Community Service.—The Committee bill recommends \$1,365,586,000 for the Corporation for National and Community Service. This level is \$215,865,000 above the fiscal year 2010 level. The recommendation is sufficient to increase the number of AmeriCorps members from 87,000 to over 97,000.

Social Security Administration.—The Committee bill includes \$12,378,863,000 for the administrative expenses of the Social Security Administration. This amount is an increase of \$932,363,000 over the fiscal year 2010 level and will allow the SSA to continue to work toward eliminating the disability hearings backlog by the end of fiscal year 2013 while keeping up with an unprecedented level of disability and retirement claims. It also includes \$796,000,000, an increase of \$38,000,000, in program integrity funding.

REPROGRAMMING AND TRANSFER AUTHORITY

The Committee includes bill language delineating permissible transfer authority in general provisions for each of the Departments of Labor, Health and Human Services, and Education, as well as specifying reprogramming authority in a general provision applying to all funds provided under this act, available for obligation from previous appropriations acts, or derived from fees collected.

TITLE I

DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

TRAINING AND EMPLOYMENT SERVICES

Appropriations, 2010	\$3,828,530,000
Budget estimate, 2011	3,925,475,000
Committee recommendation	3.877.478.000

The Committee recommends \$3,877,478,000 for this account, which provides funding primarily for activities under the Workforce Investment Act [WIA]. The fiscal year 2010 comparable amount is \$3,828,530,000 and the budget request provides \$3,925,475,000 for this purpose.

The training and employment services account is comprised of programs designed to enhance the employment and earnings of economically disadvantaged and dislocated workers, operated through a decentralized system of skill training and related services. Funds provided for fiscal year 2011 will support the program from July 1, 2011, through June 30, 2012. A portion of this account's funding, \$1,772,000,000, is available on October 1, 2011, for the 2011 program year.

Pending reauthorization of WIA, the Committee is acting on the basis of current law.

As requested by the administration, the Committee recommends designating a portion of the appropriations from the WIA formula programs to create a workforce innovation fund to make competitive awards for workforce innovation activities under the act's pilot and demonstration authority. These activities would test innovative strategies or replicate proven practices that support systemic reform of the workforce investment system and substantially improve education and employment outcomes for participants. To support alignment at the Federal level, the Committee expects the Secretary to make such awards in cooperation with the Secretary of Education. Awards would be made to either: States in partnership with local workforce investment boards; or a local workforce investment board or consortium of such boards that serve a regional labor market. Priority will be given to applicants that demonstrate significant alignment across workforce development, education, and supportive services at the State, regional, or local level and that support economic development goals and improved education and employment outcomes for participants, particularly those who are hardest to serve. Awards would also prioritize applicants that demonstrate comprehensive strategic planning and coordination at the State, regional, or local level. The Committee directs that the Department provide a briefing to the Committee not less than 30 days

prior to the release of a solicitation of grant applications for this program.

The Committee recommendation includes language in section 106 of the general provisions requiring that the Department take no action to amend, through regulatory or other administrative action, the definition established in 20 CFR 677.220 for functions and activities under title I of WIA until such time as legislation reauthorizing the act is enacted. This language is continued from last year's bill.

Grants to States

The Committee recommends \$3,133,031,000 for Training and Employment Services Grants to States, including a total of \$185,000,000 for the Workforce Innovation Fund. The fiscal year 2010 comparable amount is \$2,969,449,000 and the budget request provides \$3,178,031,000 for this purpose.

The bill continues legislative language that allows a local workforce board to transfer up to 30 percent between the adult and dislocated worker assistance State grant programs, if such transfer is approved by the Governor. This language was proposed in the budget request. The bill also continues legislative language that allows a local workforce board to contract with eligible training providers to facilitate the training of multiple individuals in high-demand occupations, as long as it does not limit customer choice. This authority is continued from the American Recovery and Reinvestment Act and is intended to support local efforts to provide workers with the skills they need to find and sustain employment.

Adult Employment and Training.—For Adult Employment and Training activities, the Committee recommends \$896,884,000. The fiscal year 2010 comparable amount is \$861,540,000 and the budget request provides \$906,884,000 for this purpose.

This program is formula-funded to States and further distributed to local workforce investment boards. Three types of services for adults will be provided through the one-stop system; core services, intensive services, and job training. Core services are available to all adults with no eligibility requirements. Intensive services are provided to unemployed individuals who are not able to find jobs through core services alone. Training services may be available to adults who have been determined unable to obtain or retain employment through intensive services. Most customers receiving a training service will use their individual training accounts to determine which programs and providers fit their needs.

Funds made available in this bill support program year 2011 activities that occur from July 1, 2011, through June 30, 2012. The bill provides that \$184,884,000 is available for obligation on July 1, 2011, and that \$712,000,000 is available on October 1, 2011. Both categories of funding are available for obligation through June 30, 2012.

The bill would make available to the Secretary of Labor not more than \$35,000,000 of the appropriated amount for workforce innovation activities that strengthen the workforce investment system to enhance program delivery and improve education and employment outcomes for program beneficiaries. The administration requested 5 percent of the funding for Adult Employment and Training activi-

ties, \$45,344,000, for this purpose. Youth Training.—For Youth Training, the Committee recommends \$995,000,000. The fiscal year 2010 comparable amount is \$924,069,000 and the budget request provides \$1,025,000,000 for this purpose.

The purpose of Youth Training is to provide eligible youth with assistance in achieving academic and employment success through improved education and skill competencies, connections to employers, mentoring, training, and supportive services. The program also supports summer employment directly linked to academic and occupational learning, incentives for recognition and achievement, and activities related to leadership development, citizenship, and community service. Funds made available for youth training support program year 2011 activities, which occur from April 1, 2011, through June 30, 2012.

The bill would make available to the Secretary of Labor not more than \$95,000,000, for a new youth innovation fund to test and evaluate activities that strengthen the workforce investment system to enhance program delivery and improve education and employment outcomes for at-risk youth, particularly out-of-school youth. The administration requested 15 percent of Youth Training funds, or \$153,750,000, for this purpose. As requested in the budget, the bill provides that the Governor may reserve not more than 10 percent of the youth formula funds allotted to the State for statewide activities. It also provides that not less than 30 percent would be used for projects providing summer employment activities for youth.

Dislocated Worker Assistance.-For Dislocated Worker Assistance, the Committee recommends \$1,241,147,000. The fiscal year 2010 comparable amount is \$1,183,840,000 and the budget request provides \$1,246,147,000 for this purpose.

This program is a State-operated effort that provides core and intensive services, training, and support to help permanently separated workers return to productive, unsubsidized employment. In addition, States must use statewide reserve funds for rapid response assistance to help workers affected by mass layoffs and plant closures. Also, States must use these funds to carry out additional statewide employment and training activities such as providing technical assistance to certain low-performing local areas, evaluating State programs, and assisting with the operation of onestop delivery systems. States may also use funds for implementing innovative incumbent and dislocated worker training programs.

The bill would make available to the Secretary of Labor not more than \$55,000,000 for workforce innovation activities that strengthen the workforce investment system to enhance program delivery and improve education and employment outcomes for program beneficiaries. The administration requested 5 percent of Dislocated Worker Assistance funds, \$62,307,000 for this purpose.

Funds made available in this bill support program year 2011 activities, which occur from July 1, 2011, through June 30, 2012. The bill provides that \$381,147,000 is available for obligation on July 1, 2011, and that \$860,000,000 is available on October 1, 2011. Both categories of funding are available for obligation through June 30, 2012.

Federally Administered Programs

Dislocated Worker Assistance National Reserve.—The Committee recommends \$229,160,000 for the Dislocated Worker National Reserve, which is available to the Secretary for activities such as responding to mass layoffs, plant and/or military base closings and natural disasters that cannot be otherwise anticipated as well as for technical assistance, training, and demonstration projects. This amount is the same as the fiscal year 2010 level and the budget request.

Funds made available in this bill support program year 2011 activities, which occur from July 1, 2011, through June 30, 2012. The bill provides that \$29,160,000 is available for obligation on July 1, 2011, and that \$200,000,000 is available on October 1, 2011. Both categories of funding are available for obligation through June 30, 2012.

The Committee bill continues language authorizing the use of funds under the dislocated workers program for projects that provide assistance to new entrants in the workforce or incumbent workers and assistance where there have been dislocations across multiple sectors or local areas of a State.

Native American Programs.—The Committee recommends \$55,000,000, the same amount as the budget request, for Native American programs. The comparable fiscal year 2010 level is \$52,758,000 for this program. This program is designed to improve the economic well-being of Native Americans (Indians, Eskimos, Aleuts, and Native Hawaiians) through the provision of training, work experience, and other employment-related services and opportunities that are intended to aid the participants in securing permanent, unsubsidized employment.

Migrant and Seasonal Farmworker Programs.—The Committee recommends \$87,378,000, the same amount as the budget request, for Migrant and Seasonal Farmworkers. The comparable fiscal year 2010 level is \$84,620,000 for this program. Authorized by the Workforce Investment Act, this program is designed to serve members of economically disadvantaged families whose principal livelihood is derived from migratory and other forms of seasonal farmwork, fishing, or logging activities. Enrollees and their families are provided with employment training and related services intended to prepare them for stable, year-round employment within and outside of the agriculture industry.

The Committee recommendation provides that \$80,868,000 be used for State service area grants. The Committee recommendation also includes bill language directing that \$6,000,000 be used for migrant and seasonal farmworker housing grants, of which not less than 70 percent shall be for permanent housing. The principal purpose of these funds is to continue the network of local farmworker housing organizations working on permanent housing solutions for migrant and seasonal farmworkers. The Committee recommendation also includes \$510,000 to be used for section 167 training, technical assistance and related activities, including funds for migrant rest center activities. Finally, the Committee wishes to advise the Department regarding WIA requirements in selecting an eligible entity to receive a State service area grant under section 167. Such an entity must have already demonstrated a capacity to administer effectively a diversified program of workforce training and related assistance for eligible migrant and seasonal farmworkers.

Women in Apprenticeship.—The Committee recommends \$1,000,000 for program year 2011 activities as authorized under the Women in Apprenticeship and Non-Traditional Occupations Act of 1992. This amount is the same as the fiscal year 2010 level and the fiscal year 2011 budget request. These funds provide for technical assistance to employers and unions to assist them in training, placing, and retraining women in nontraditional jobs and occupations.

YouthBuild.—The Committee recommends \$110,000,000 for the YouthBuild program. The fiscal year 2010 comparable amount is \$102,500,000. The budget request includes \$120,000,000 for the Youth Build program.

National Activities

Pilots, Demonstrations, and Research.—The Committee recommends \$73,559,000 for pilots, demonstration and research authorized by section 171 of the Workforce Investment Act. The comparable fiscal year 2010 level is \$93,450,000 and the budget request includes \$46,556,000 for this purpose. These funds support grants or contracts to conduct research, pilots or demonstrations that foster promising practices for national policy application or launch pilot projects on a broader scale.

The Committee bill provides that up to \$40,000,000 can be used to demonstrate and evaluate transitional job program models. Transitional job models combine a comprehensive set of support services including pre-job placement assessment, skills development, job readiness training, and case management for an individual in a subsidized transitional job that leads to placement and continued support in competitive employment. This represents the second year of funding for this initiative. The Committee is aware that these models have shown great potential in studies that evaluated employment outcomes for individuals with multiple barriers to employment.

The budget proposes bill language to authorize the transfer of up to 10 percent of the transitional jobs funds to the Departments of Health and Human Services or Justice. The Committee provides the requested transfer authority to assist with the effective implementation of transitional jobs projects, including support for leveraging resources under their control, and to enable the Department of Labor to evaluate such projects. Given that various Federal funding streams currently support transitional jobs programs around the United States, the Committee intends that the funds provided not simply replace existing resources for such programs, but leverage other resources to support program growth. The Committee requests that the Department submit a plan and timeline for the solicitation of grant applications as well as advance notice prior to its publication in the Federal Register. The Committee remains concerned about the low level of literacy and numeracy skills among adult workers, as 1 in 7 adults do not have basic literacy skills to succeed in tomorrow's industries and jobs. The Committee encourages the Department to continue to examine and publish successful strategies and best practices that can help adults with low literacy levels improve their overall skills and employment opportunities.

The Committee recognizes the importance of building stronger linkages between title I job training programs and title II adult education and literacy programs in the Workforce Investment Act of 1998 in order to create career pathways that enhance participants' long-term economic success. The Committee strongly urges the Department to expand funding to community-based programs that have successfully implemented strategies for delivering basic literacy instruction together with employment training so that they may document and disseminate best practices related to the integration of title I job training programs with title II adult literacy programs.

The Committee notes the ongoing need for training and education programs that prepare participants for employment in high demand and emerging industry sectors such as healthcare. The Health Care Training Initiative works to define career pathways across the healthcare sector. As part of this initiative, the Committee encourages the funding of replicable demonstration programs that create apprenticeships for jobs in healthcare.

The Committee recommendation includes language providing funding for the following activities in the following amounts:

	Amount
AFL-CIO Working for America Institute, Washington, DC, for employment and training programs Apprentice Training for Electrical Industry, Philadelphia, PA, for a job training program Arrowhead Economic Opportunity Agency, Virginia, MN, for an educational and transportation assistance	\$1,000,000 100,000
program for job seekers	100,000
Association of Village Council Presidents, Bethel, AK, for workforce development and training	500,000
Baltimore City Mayor's Office of Employment Development, Baltimore, MD, for a summer jobs program	150,000
Brevard Workforce Development Board, Rockledge, FL, for a job training initiative	600,000
Capps Workforce Training Center, Stoneville, MS, for workforce training	500,000
Catholic Charities, Baltimore, MD, for a job training and job placement program	250,000
Center for Education, Business and the Arts, Interlocal Agency, St. George, UT, for workforce development program in green jobs	108,000
Chesapeake Bay Trust, Annapolis, MD, for a job training program and development of a training cur-	
riculum	200,000
City of Buffalo, NY, for youth employment readiness programs	500,000
City of Jackson, MS, for workforce training	100,000
College of Southern Idaho, Twin Falls, ID, for job training in green construction	150,000
Community Transportation Association of America, Washington, DC, to continue the Joblinks program Des Moines Area Community College, Ankeny, IA, for the development of the Perry Career Technical Acad-	450,000
emy	400,000
Easter Seals of Southern Nevada, Las Vegas, NV, for a job training program for dislocated workers	200,000
Envirolution, Reno, NV, for a green jobs resources center	200,000
Expertise, Inc, Las Vegas, NV, for job readiness and employment training	100,000
Finishing Trades Institute, Kenner, Louisiana, for job training and workforce development	150,000
First African Community Development Corporation, Philadelphia, PA, for training in green and technology- related jobs	100.000
Fletcher Community College, Houma, Louisiana, for job training and workforce development	200.000
Florida Institute of Technology, Melbourne, FL, for training in cyber security	250.000
Foundation for an Independent Tomorrow, Las Vegas, NV, for job search support program	125,000
Fox Valley Technical College, Appleton, WI, to expand truck driver training program	250,000
Fund for the City of New York, NY, for an academic success and workforce development program	200,000
Goodwill Industries of Southeastern WI, Inc., Milwaukee, WI, for community job center	750,000

	Amount
Goodwill of Southern Nevada, Las Vegas, NV, for the career connections job training program	100,000
Great Basin College, Elko, NV, for job training program	200,000
Haven for Hope, San Antonio, TX, for job training and education for the homeless	200,000
Hispanic Federation, New York, NY, for a Latino Workforce Training Initiative	100,000
Holmes Community College, Goodman, MS, for workforce training	225,000 150,000
	1,000,000
Iowa Workforce Development, Des Moines, IA, for the IowaWORKS Integration Project	1,000,000
Lakeshore Technical College, Cleveland, WI, to support the training of workers for manufacturing jobs	750,000
Las Vegas-Clark County Urban League, Las Vegas, NV, to provide job development and workforce readiness skills for unemployed or underemployed individuals	145,000
Lawrence Technological University, Dearborn, MI, to train displaced workers in green jobs	150,000
Maine Centers for Women, Work, & Community/University of Maine at Augusta/University of Maine System,	100,000
Augusta, ME, for job training and workforce development	100,00
Maui Community College, Kahului, HI, for remote rural Hawaii job training	2,300,00
Maui Community College, Kahului, HI, for the Samoan/Asian Pacific Job Training program	2,000,00
Maui Economic Development Board, Kihei, HI, Rural Computer Utilization Training	300,00
Maui Economic Development Board, Kihei, HI, to recruit, train and retain women and minorities in STEM	
careers	450,00
MedTech Association, Inc., Syracuse, NY, to identify career pathways that connect to bioscience jobs	150,00
Metropolitan State College of Denver, Denver, CO, for the purchase of equipment for aviation training pro-	
gram	100,00
Milwaukee Area Technical College, Milwaukee, WI, for Solar Jobs Training Center	300,00
Mississippi Gulf Coast Community College, Perkinston, MS, for workforce training	250,00
Mississippi State University, Mississippi State, MS, for the Mississippi Integrated Workforce Performance	
System	375,00
Mississippi Technology Alliance, Ridgeland, MS, for the Mississippi ILED training program	250,00
Montana State University—Northern, Havre, MT, for Energy Training Center	200,00
Moore Community House, Biloxi, MS, for workforce training	100,00
New Hampshire Manufacturing Extension Partnership, Concord, NH, for incumbent worker retraining initia- tive	200,00
Nine Star Education & Employment Services, Anchorage, AK, for job training for prisoner reentry pro-	100.00
grams	100,00
Nine Star Education and Employment, Anchorage, AK, to expand Math for the Trades course	200,00
Dislocated Workers	150,000 400,000
North Dakota State College of Science, Fargo, ND, for biosciences workforce training and equipment Parnassa Fund, Inc., New York, NY, for EPI Emergency Employment and Job Creation Network	150,00
Partners in Careers, Vancouver, WA, for workforce development for female veterans	100,00
Peralta Community College District, Oakland, CA, for the East Bay Green Jobs Project	500,00
Philadelphia Opportunities Industrialization Center, Philadelphia, PA, for salaries and equipment	100,00
Plattsburgh-North Country Chamber of Commerce, Plattsburgh, NY, for an on the job training program	100,00
Rapides Parish Police Jury Office of Economic & Workforce Development, Alexandria, LA, to train displaced workers in demand occupations including green jobs	200,000
Regional Education & Training Center at Satsop, Elma, WA, for programs focused on rapid certifications,	,
entry-level degrees, and advanced certifications	900,00
River Valley Resources, Inc., Madison, IN, for workforce training	100,00
San Mateo County Community College District, San Mateo, CA, for curriculum development, job placement	
and job retention services at the Allied Health Career Advancement Academy	150,00
Scranton Electricians JATC, Scranton, PA, for training in green technologies	100,00
SEIU Healthcare NW Training Partnership, Federal Way, WA, for training of home care aides, including	
equipment	300,00
South Delta Planning and Development District, Greenville, MS, for workforce training	400,00
Southwest Alaska Vocational & Education Center, King Salmon, AK, for workforce development programs in	
rural Alaska	100,00
Southwest Mississippi Community College, Summit, MS, for workforce training	350,00
Spectrum Resources, Des Moines, IA, to expand the Project Phoenix job training program	200,00
St. Bernard Project, Chalmette, LA, for operational and equipment expenses State of Vermont Department of Public Safety, Waterbury, VT, for firefighting and emergency services train-	200,00
ing support	100,00
Steamfitters Local 449 and Plumbers Local 27, Pittsburgh, PA, for training program for those entering the pipe trades industry	100,00
Total Action Against Poverty, Roanoke, VA, to provide job training to help individuals obtain and retain	,
employment	250,000
Twin Cities RISE!, Minneapolis, MN, to expand job training program, and support program replication in	
	100,000

	Amount
United 4 Economic Development, Salt Lake City, UT, for workforce development and training Utah Capital Investment Corporation, Salt Lake City, UT, for workforce development, education and train-	250,000
ing	250,000
Vermont HITEC, Williston, VT, for the Vermont HITEC Job Training Initiative	500,000
Vermont Technical College, Randolph Center, VT, for development of a paramedicine program	300,000
Vermont Technical College, Randolph Center, VT, for Green Jobs Workforce Development	500,000
Veterans Leadership Program of Western Pennsylvania, Pittsburgh, PA, for a jobs program for veterans	150,000
Washington State Workforce Board, Olympia, WA, to better engage employers with regional workforce devel- opment systems	1,000,000
Women's Initiative for Self Employment, San Francisco, CA, for an economic self sufficiency program for low-income women	100,000
Workforce Development Council of Seattle-King County, Seattle, WA, to align K-12 and post-secondary edu- cation to better meet the workforce skill needs in King County	400,000
Year Up Boston, Boston, MA, to support the expansion of curriculum development and career placement services for urban youth	100,000
Youthcare, Seattle, WA, to provide youth with education and training in the telecommunications industry \dots	100,000
YWCA Middle Rio Grande, Albuquerque, NM, for a transitional living program for at-risk women veterans and their children to prepare them for entry into the workforce	150,000

Green Jobs Innovation Fund.-The Committee recommends \$65,000,000 for the Green Jobs Innovation Fund. The budget request includes \$85,000,000 for the Fund and the comparable fiscal year 2010 level is \$40,000,000. The funds requested will be used for competitive grants to help workers access green training and green career pathways. Funds could be awarded for activities including enhanced pre-apprenticeship and Registered Apprentice-ship programs, and innovative partnerships that connect community-based organizations in underserved communities with the workforce investment system. The Committee notes that other programs within the Employment and Training Administration such as Job Corps and YouthBuild are developing green jobs curricula or programs, and it encourages the close coordination of this Fund with other activities in the Department to prevent duplication and ensure the sharing of best practices. The Committee requests a report on the implementation of this program and its coordination with other green jobs initiatives within 90 days after enactment of this act.

Reintegration of Ex-offenders.—The Committee recommends \$98,000,000, the same as the fiscal year 2011 budget request, to continue funding for the Reintegration of Ex-offenders program. The comparable fiscal year 2010 level is \$108,493,000. The Responsible Reintegration of Ex-offenders program targets critical funding to help prepare and assist ex-offenders return to their communities through pre-release services, mentoring, and case management. The program also provides support, opportunities, education, and training to youth who are court-involved and on probation, in aftercare, on parole, or who would benefit from alternatives to incarceration or diversion from formal judicial proceedings. Programs are carried out directly through State and local governmental entities and community-based organizations, as well as indirectly through intermediary organizations.

Evaluation.—The Committee recommends \$11,600,000, the same as the fiscal year 2011 budget request, to provide for new and continuing rigorous evaluations of programs conducted under the Workforce Investment Act, as well as of federally funded employment-related activities under other provisions of law. The comparable fiscal year 2010 level is \$9,600,000 for this purpose.

Career Pathways Innovation Fund.—The Committee concurs in the budget request to eliminate funding for this program. The comparable fiscal year 2010 level is \$125,000,000. This program focuses on expanding career pathway programs at community colleges. The Committee is confident that significant other funding sources exist to support community colleges. Most recently, the Health Care and Education Reconciliation Act of 2010 provided \$500,000,000 for each of fiscal years 2011–2014 for the Community College and Career Training Grant program.

Workforce Data Quality Initiative.—The Committee recommends \$13,750,000, the same as the requested level, for the Workforce Data Quality Initiative. The comparable fiscal year 2010 amount for this program is \$12,500,000. Funds will be used to assist States with incorporating comprehensive workforce information into longitudinal data systems being developed in part with the support of funding provided by the Department of Education. The initiative also will help improve the quality and accessibility of performance data being produced by training providers.

OFFICE OF JOB CORPS

Appropriations, 2010	\$1,708,205,000
Budget estimate, 2011	1,707,363,000
Committee recommendation	1,712,205,000

For Job Corps, the Committee recommends \$1,712,205,000. The comparable fiscal year 2010 amount is \$1,708,205,000. The budget request includes \$1,707,363,000 for Job Corps.

The recommendation for operations of Job Corps centers is \$1,577,095,000, comprised of \$986,095,000 in fiscal year 2011 funds and \$591,000,000 in advance appropriations from last year's bill. For operations, the Committee also recommends advance funding of \$591,000,000, which will become available on October 1, 2011. The recommendation for administration is \$30,110,000.

The Committee understands that construction on the new Job Corps center in Ottumwa, Iowa, will be completed in March 2011. The Committee's recommended level for operations includes funds to ensure that competitively awarded contracts will be in place to enable the Ottumwa center to open on or before July 2011 and to serve the contracted capacity of 300 students.

The Committee also recommends \$5,000,000 in construction, renovation and acquisition funds, which are available from July 1, 2011, to June 30, 2014. In addition, \$100,000,000 in construction, rehabilitation and acquisition [CRA] funds are provided in advance funding, which will make these funds available on October 1, 2011, through June 30, 2014.

Job Corps received \$211,646,000 in CRA funds in the American Recovery and Reinvestment Act of 2009. These funds helped address a number of Job Corps facility needs. In light of this recent influx of capital funds and consistent with the budget request, the Committee directs Job Corps to use its authority to transfer up to 15 percent of CRA funds to meet the operational needs of Job Corps centers. For 3 years, Congress has highlighted the need to expand Job Corps programs in areas experiencing increased numbers of high school dropouts, unemployed youth, youth aging out of foster care, and homeless youth. In fiscal year 2010, the Committee included \$5,000,000 to begin the process of establishing a minimum of two new Job Corps centers, particularly in large metropolitan areas without a Job Corps center and areas focused on the acute socioeconomic needs of America's poorest rural youth. To date, the Department has yet to begin the expansion process. The Committee directs the Department to announce a competition for a minimum of two new Job Corps centers as stated in House Report 111–366.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

Appropriations, 2010	\$825,425,000
Budget estimate, 2011	600,425,000
Committee recommendation	600,425,000

The Committee recommends \$600,425,000, the same as the fiscal year 2011 budget request, for community service employment for older Americans. The comparable fiscal year 2010 level is \$825,425,000. The fiscal year 2010 appropriation included a onetime program expansion designed to serve additional unemployed low-income seniors affected by the economic downturn.

This program, authorized by title V of the Older Americans Act, provides part-time employment in community service activities for unemployed, low-income persons aged 55 and over. It is a forwardfunded program, so the fiscal year 2011 appropriation will support the program from July 1, 2011, through June 30, 2012.

The program provides a direct, efficient, and quick means to assist economically disadvantaged older workers because it has a proven effective network in every State and in practically every county. Administrative costs for the program are low and the vast majority of the money goes directly to low-income seniors as wages and fringe benefits.

The program provides a wide range of vital community services that would not otherwise be available, particularly in low-income areas and minority neighborhoods. Senior enrollees provide necessary and valuable services at Head Start centers, schools, hospitals, libraries, elderly nutrition sites, senior centers, and elsewhere in the community.

A large proportion of senior enrollees use their work experience and training to obtain employment in the private sector. This not only increases our Nation's tax base but also enables more low-income seniors to participate in the program.

Bill language is continued from last year to enable the Department to recapture and obligate unneeded program funds at the end of a program year for support of technical assistance, incentive grants or other purposes, as authorized by the Older Americans Act. The budget did not propose continuing this language.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

Appropriations, 2010	\$1,818,400,000
Budget estimate, 2011	1,938,200,000
Committee recommendation	1,938,200,000

The Committee recommends \$1,938,200,000, the same as the fiscal year 2001 budget request, in mandatory funds for Federal unemployment benefits and allowances. The fiscal year 2010 comparable amount is \$1,818,400,000. Trade adjustment benefit payments are expected to increase from \$1,067,000,000 in fiscal year 2010 to \$1,595,000,000 in fiscal year 2011, while trade training expenditures in fiscal year 2011 are estimated to be \$278,200,000 for the expected certification of 321,000 trade-affected workers.

The Trade and Globalization Adjustment Assistance Act of 2009 [TGAAA] reauthorized the Trade Adjustment Assistance [TAA] programs. The reauthorization expanded TAA coverage to more workers and employers, including those in the service sector. It also made benefits available to workers whose jobs have been lost to any country, not just those countries involved in a trade agreement with the United States. The expansions authorized under TGAAA sunset after December 31, 2010.

The TAA program assists trade-impacted workers with services including: training, income support, employment, case management, and assistance with health insurance coverage. In addition, the program, through Reemployment Trade Adjustment Assistance, includes a wage insurance option for certain workers at least 50 years old.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

Appropriations, 2010	\$4,113,681,000
Budget estimate, 2011	4,435,327,000
Committee recommendation	4,440,327,000

The Committee recommends \$4,440,327,000 for this account. The recommendation includes \$4,348,924,000 authorized to be drawn from the Employment Security Administration account of the unemployment trust fund, \$91,403,000 to be provided from the general fund of the Treasury.

The funds in this account are used to provide administrative grants and assistance to State agencies that administer Federal and State unemployment compensation laws and operate the public employment service.

The Committee bill continues language that enables States to use funds appropriated under this account to assist other States if they are impacted by a major disaster declared by the President; at the request of one or more States, authorizes the Secretary to reallot funds for States to carry out activities that benefit the administration of unemployment compensation laws of a requesting State; and permits the Secretary to use funds to make payments on behalf of States for the use of the National Directory of New Hires.

The Committee recommends a total of \$3,581,389,000 for unemployment insurance activities.

For unemployment insurance [UI] State operations, the Committee recommends \$3,570,079,000. These funds are available for obligation by States through December 31, 2011. However, funds used for automation acquisitions, for re-employment and eligibility assessments discussed below and funds awarded to States under the misclassification initiative are available for obligation by States through September 30, 2013.

The recommendation includes \$65,000,000 to conduct in-person reemployment and eligibility assessments [REAs] and unemployment insurance improper payment reviews, as proposed in the budget request. The recommendation will support continuation and expansion of the REA initiative in approximately 40 States. This important program integrity initiative will save State UI trust fund accounts an estimated \$210,000,000 representing a return on investment of more than 3 to 1. The Committee intends for a portion of the funds to be used for additional technology-based overpayment prevention, detection, and collection activities.

In addition, the Committee recommendation provides for a contingency reserve amount should the unemployment workload exceed an average weekly insured claims volume of 6,051,000, as proposed in the budget request. This contingency amount would fund the administrative costs of the unemployment insurance workload over the level of 6,051,000 insured unemployed persons per week at a rate of \$28,600,000 per 100,000 insured unemployed persons, with a pro rata amount granted for amounts of less than 100,000 insured unemployed persons.

For UI national activities, the Committee recommends \$11,310,000. These funds are directed to activities that benefit the State/Federal unemployment insurance program including helping States adopt common technology-based solutions to improve efficiency and performance and supporting training and contracting for actuarial support for State trust fund management.

For the Employment Service allotments to States, the Committee recommends \$703,576,000, which includes \$22,683,000 in general funds together with an authorization to spend \$680,893,000 from the Employment Security Administration account of the unemployment trust fund. This amount is the same as the fiscal year 2011 budget request and the fiscal year 2010 comparable funding level.

The Committee also recommends \$20,994,000 for Employment Service national activities. This is the same level as the budget request and the comparable amount for fiscal year 2010. The administration of the work opportunity tax credit accounts for \$18,520,000 of the recommended amount while the balance is for technical assistance, training, and the Federal share of State Workforce Agencies Retirement System payments. The fiscal year 2010 Committee report encouraged the Department to focus a technical assistance program on services to individuals with disabilities available through State Employment Services and the One-Stop Career Center Network. The Committee anticipates a report on the Department's response to that request.

For carrying out the Department's responsibilities related to foreign labor certification activities, the Committee recommends \$65,648,000, the same amount proposed in the budget request. The fiscal year 2010 comparable amount is \$68,436,000. In addition, 5 percent of revenue from H–1B fees is available to the Department for costs associated with processing H–1B alien labor certification applications.

For One-Stop Career Centers and Labor Market Information, the Committee recommends \$68,720,000. The budget request includes

\$63,720,000, the same as the fiscal year 2010 comparable amount for these activities. The Committee recommendation includes \$17,000,000 for the Employment and Training Administration [ETA], in collaboration with the Office of Disability Employment Policy [ODEP], to implement a plan for improving effective and meaningful participation of persons with disabilities in the workforce. The Committee expects that these funds, in combination with funding available to ODEP, will improve the accessibility and accountability of the public workforce development system for individuals with disabilities. The Committee further expects these funds to continue promising practices implemented by disability program navigators. These practices include the effective deployment of staff in selected States to: improve coordination among employment, training, and asset development programs carried out at the State and local level such as the Ticket to Work program; and build effective community partnerships that leverage public and private resources to improve services and employment outcomes for individuals with disabilities. The Committee requests that ETA and ODEP develop appropriate objectives and performance measures by which this initiative will be evaluated. The Committee eagerly awaits the issuance of the solicitation for grant applications for fiscal year 2010 funds consistent with language in the fiscal year 2010 Committee report that described this initiative.

STATE PAID LEAVE FUND

Appropriations, 2010	
Budget estimate, 2011	\$50,000,000
Committee recommendation	10,000,000

The Committee recommends \$10,000,000 for the State Paid Leave Fund, which is a new activity. The budget request includes \$50,000,000 for the Fund. The Fund will provide competitive grants to help States establish paid leave programs. Currently, California, New Jersey, and Washington have passed legislation to offer such programs, which are called family leave insurance. Typically, the programs offer up to 6 weeks of benefits to workers who must take time off to care for a seriously ill child, spouse, or parent, or to bond with a newborn or recently adopted child. The programs are typically employee funded through small payroll premiums.

Grants will support State start-up activities relating to the implementation of paid leave programs, such as program infrastructure in States that have passed but not implemented paid leave programs. The Committee is interested in the capacity of this new initiative to encourage passage of paid leave programs in additional States. Accordingly, these funds will have a 2-year period of availability to allow sufficient time for States to consider and pass legislation authorizing paid leave programs. The Committee directs the Department to provide a briefing not less than 30 days prior to the release of a solicitation of grant applications and provide regular updates on the status of this initiative and State efforts to pass paid leave legislation.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

Appropriations, 2010	\$120,000,000
Budget estimate, 2011	200,000,000
Committee recommendation	200,000,000

The Committee recommends \$200,000,000 in mandatory funds, the same as the fiscal year 2011 budget request, for this account. The fiscal year 2010 funding level is \$120,000,000 for this purpose. The appropriation is available to provide advances to several accounts for purposes authorized under various Federal and State unemployment compensation laws and the Black Lung Disability Trust Fund, whenever balances in such accounts prove insufficient.

The Committee bill includes language proposed in the budget request to allow the Department additional flexibility to access funds as needed for covered programs.

PROGRAM ADMINISTRATION

Appropriations, 2010	\$147,656,000
Budget estimate, 2011	162,042,000
Committee recommendation	162,042,000

The Committee recommends \$104,904,000 in general funds for this account, as well as authority to expend \$57,138,000 from the Employment Security Administration account of the unemployment trust fund, for a total of \$162,042,000. The fiscal year 2010 comparable amount is \$147,656,000, and the budget request provides \$162,042,000 for this purpose.

General funds in this account pay for the Federal staff needed to administer employment and training programs under the Workforce Investment Act, the Older Americans Act, the Trade Act of 1974, the Women in Apprenticeship and Non-Traditional Occupations Act of 1992, and the National Apprenticeship Act. Trust funds provide for the Federal administration of employment security functions under title III of the Social Security Act.

The Committee recommendation includes funds requested to continue essential oversight, monitoring, and closeout activities related to the American Recovery and Reinvestment Act of 2009.

EMPLOYEE BENEFITS SECURITY ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 2010	\$154,861,000
Budget estimate, 2011	161,995,000
Committee recommendation	161,995,000

The Committee recommends \$161,995,000 for the Employee Benefits Security Administration [EBSA]. This amount is the same as the budget request. The comparable fiscal year 2010 amount is \$154,861,000.

The EBSA plays a critical role in improving health benefits and retirement security for American workers and their families. The EBSA is responsible for the enforcement of title I of the Employee Retirement Income Security Act of 1974 [ERISA] in both civil and criminal areas. EBSA is also responsible for enforcement of sections 8477 and 8478 of the Federal Employees' Retirement Security Act of 1986. EBSA provides funding for the enforcement and compliance, policy, regulation, and public services, and program oversight activities.

The Committee expects this appropriation to help the EBSA better protect pension and health benefits for workers, retirees, and their families. These funds will provide for increased enforcement capacity, continued investments in EBSA education and compliance assistance programs, and enhanced research and evaluation activities.

PENSION BENEFIT GUARANTY CORPORATION

The Pension Benefit Guaranty Corporation's estimated obligations for fiscal year 2011 include single employer benefit payments of \$6,677,000,000, multi-employer financial assistance of \$102,000,000 and administrative expenses of \$466,301,000. Administrative expenses are comprised of three activities: (1) Pension insurance activities, \$71,896,000; (2) pension plan termination expenses, \$249,408,000; and (3) operational support, \$144,997,000. These expenditures are financed by permanent authority.

The Pension Benefit Guaranty Corporation [PBGC] is a wholly owned Government corporation established by ERISA. The law places it within the Department of Labor and makes the Secretary of Labor the chair of its board of directors. The corporation receives its income primarily from insurance premiums collected from covered pension plans, assets of terminated pension plans, collection of employer liabilities imposed by the act, and investment earnings. The primary purpose of the corporation is to guarantee the payment of pension plan benefits to participants if covered defined benefit plans fail or go out of existence.

The President's budget proposes to continue from last year's bill a contingency fund for the PBGC that provides additional administrative resources when the number of participants in terminated plans exceeds 100,000. When the trigger is reached, an additional \$9,200,000 becomes available for every 20,000 participants in terminated plans. A trigger also is included for additional investment management fees for plan terminations or asset growth. These additional funds would be available for obligation through September 30, 2012. The Committee bill continues this provision to ensure that the PBGC can take immediate, uninterrupted action to protect participants' pension benefits. The Committee expects to be notified immediately of the availability of any funds provided by these provisions.

The President's budget also continues language included in last year's bill that allows PBGC additional obligation authority for unforeseen and extraordinary pre-termination expenses, after approval by the Office of Management and Budget and notification of the Committees on Appropriations of the House of Representatives and Senate.

The single-employer program protects about 33,600,000 participants in approximately 28,000 defined benefit pension plans. The multi-employer insurance program protects about 10 million participants in more than 1,500 plans.

WAGE AND HOUR DIVISION

SALARIES AND EXPENSES

Appropriations, 2010	\$227,606,000
Budget estimate, 2011	244,240,000
Committee recommendation	244,240,000

The Committee recommends \$244,240,000, the same amount as the budget request, for the Wage and Hour Division. The comparable fiscal year 2010 amount is \$227,606,000.

The Wage and Hour Division was formerly part of the Employment Standards Administration, which was disbanded last year. The Wage and Hour Division is responsible for administering and enforcing laws that provide minimum standards for wages and working conditions in the United States. The Fair Labor Standards Act, employment rights under the Family and Medical Leave Act, and the Migrant and Seasonal Agricultural Worker Protection Act are several of the important laws the Wage and Hour Division is charged with administering and/or enforcing.

The Committee recommendation provides sufficient funding to support the continued rebuilding of the Wage and Hour Division's capacity to conduct inspections and investigations of industries with high concentrations of low-wage and other vulnerable workers, and industries with high levels of wage and hour violations, including overtime violations. The Committee is particularly interested in the continued focus of the Wage and Hour Division on increased employer compliance with the special minimum wage program authorized under section 14(c) of the Fair Labor Standards Act.

The Committee recommendation also supports the administration's misclassification initiative. The budget request includes \$12,000,000 for the Wage and Hour Division to participate in a joint Department of Labor-Department of the Treasury initiative to detect and deter the inappropriate misclassification of employees as independent contractors. When employees are inappropriately misclassified, it deprives them of important benefits, such as overtime and unemployment insurance, and reduces revenues that ought to be paid into the Treasury and Unemployment Insurance programs. The Committee expects to be updated on actions taken to implement this important initiative.

OFFICE OF LABOR-MANAGEMENT STANDARDS

SALARIES AND EXPENSES

Appropriations, 2010	\$41,367,000
Budget estimate, 2011	45,181,000
Committee recommendation	45.181.000

The Committee recommends \$45,181,000, the same amount as the budget request, for the Office of Labor-Management Standards. The comparable fiscal year 2010 amount is \$41,367,000. The Office of Labor-Management Standards was formerly part of the Employment Standards Administration, which was disbanded last year.

The Office of Labor-Management Standards administers the Labor-Management Reporting and Disclosure Act of 1959 and related laws. These laws establish safeguards for union democracy and financial integrity. They also require public disclosure by unions, union officers, employers and others. In addition, the office also administers employee protections under federally sponsored transportation programs.

OFFICE OF FEDERAL CONTRACT COMPLIANCE PROGRAMS

SALARIES AND EXPENSES

Appropriations, 2010	\$105,386,000
Budget estimate, 2011	113,433,000
Committee recommendation	112,433,000

The Committee recommends \$112,433,000 for the Office of Federal Contract Compliance Programs. The comparable fiscal year 2010 amount is \$105,386,000 and the budget request includes \$113,433,000 for this office. The Office of Federal Contract Compliance Programs was formerly part of the Employment Standards Administration, which was disbanded last year.

The Office of Federal Contract Compliance Programs protects workers and potential employees of Federal contractors from employment discrimination as prohibited under Executive Order 11246, section 503 of the Rehabilitation Act of 1973 and the Vietnam Era Veterans' Readjustment Assistance Act of 1974.

OFFICE OF WORKERS' COMPENSATION PROGRAMS

SALARIES AND EXPENSES

Appropriations, 2010	\$118,295,000
Budget estimate, 2011	127,346,000
Committee recommendation	126,346,000

The Committee recommends \$126,346,000 for the Office of Workers' Compensation Programs. The budget request is \$127,346,000. The comparable fiscal year 2010 amount is \$118,295,000. The bill provides authority to expend \$2,181,000 from the special fund established by the Longshore and Harbor Workers' compensation Act. The Office of Workers' Compensation Programs was formerly

The Office of Workers' Compensation Programs was formerly part of the Employment Standards Administration, which was disbanded last year. The Office administers four distinct compensation programs which include the Federal Employees' Compensation Act, the Longshore and Harbor Workers' Compensation Act, the Black Lung Benefits programs and the Energy Employees Occupational Illness Compensation Program. In addition, the Office houses the Division of Information Technology Management and Services, which provides services to offices that were previously part of the Employment Standards Administration.

DIVISION OF ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION

SALARIES AND EXPENSES

Appropriations, 2010	\$51,900,000
Budget estimate, 2011	53,778,000
Committee recommendation	53,778,000

The Committee recommends \$53,778,000 for the Division of Energy Employees Occupational Illness Compensation. This amount is

the same as the budget request. The comparable fiscal year 2010 amount is \$51,900,000. This is a mandatory appropriation.

The Division administers the Energy Employees Occupational Illness Compensation Program Act [EEIOCPA], which provides benefits to eligible employees and former employees of the Department of Energy, its contractors and subcontractors or to certain survivors of such individuals. The mission also includes delivering benefits to certain beneficiaries of the Radiation Exposure Compensation Act. The Division is part of the Office of Workers' Compensation Programs, which was part of the Employment Standards Administration until it was reorganized last year.

In 2011, the volume of incoming claims under part B of the EEOICPA is estimated at about 6,400 claims from Department of Energy [DOE] employees or survivors, and private companies under contract with DOE, who suffer from a radiation-related cancer, beryllium-related disease, or chronic silicosis as a result of their work in producing or testing nuclear weapons.

Under part E, approximately 6,800 new claims will be received during fiscal year 2011. Under this authority, the Department provides benefits to eligible DOE contractor employees or their survivors who were found to have work-related occupational illnesses due to exposure to a toxic substance at a DOE facility.

SPECIAL BENEFITS

Appropriations, 2010	\$187,000,000
Budget estimate, 2011	183,000,000
Committee recommendation	183,000,000

The Committee recommends \$183,000,000, the same as the budget request, for this account. The comparable fiscal year 2010 amount is \$187,000,000. This mandatory appropriation primarily provides benefits under the Federal Employees' Compensation Act [FECA]. This benefit program is administered by the Office of Workers' Compensation Programs, which was formerly part of the Employment Standards Administration, which was disbanded last year.

The Committee recommends continuation of appropriation language to provide authority to require disclosure of Social Security account numbers by individuals filing claims under the Federal Employees' Compensation Act or the Longshore and Harbor Workers' Compensation Act and its extensions.

The Committee recommends continuation of appropriation language that provides authority to use the FECA fund to reimburse a new employer for a portion of the salary of a newly re-employed injured Federal worker. The FECA funds will be used to reimburse new employers during the first 3 years of employment, not to exceed 75 percent of salary in the worker's first year and declining thereafter.

The Committee recommendation also continues language allowing carryover of unobligated balances from fiscal year 2010 to be used in the following year.

The Committee again includes appropriation language that retains the drawdown date of August 15. The drawdown authority enables the agency to meet any immediate shortage of funds without requesting supplemental appropriations. The August 15 drawdown date allows flexibility for continuation of benefit payments without interruption.

The Committee recommends continuation of appropriation language to provide authority to deposit into the special benefits account of the employees' compensation fund those funds that the Postal Service, the Tennessee Valley Authority, and other entities are required to pay to cover their fair share of the costs of administering the claims filed by their employees under FECA. Finally, the Committee continues to allow use of fair share collections to fund capital investment projects and specific initiatives to strengthen compensation fund control and oversight.

SPECIAL BENEFITS FOR DISABLED COAL MINERS

Appropriations, 2010	225,180,000
Budget estimate, 2011	203,220,000
Committee recommendation	203,220,000

The Committee recommends a mandatory appropriation of \$158,220,000 in fiscal year 2011 for special benefits for disabled coal miners. This is in addition to the \$45,000,000 appropriated last year as an advance for the first quarter of fiscal year 2011. These mandatory funds are used to provide monthly benefits to coal miners disabled by black lung disease and their widows and certain other dependents, as well as to pay related administrative costs.

This account pays for the benefits and administrative costs of part B of the Black Lung Benefits Act. The program is administered by the Division of Coal Mine Workers' Compensation, which is part of the Office of Workers' Compensation Programs. The Office was part of the Employment Standards Administration until it was reorganized last year.

Part B benefits are based on black lung claims filed on or before December 31, 1973. In fiscal year 2011, an estimated 24,000 beneficiaries will receive benefits. By law, increases in black lung benefit payments are tied directly to Federal pay increases. The yearto-year decrease in this account reflects a declining beneficiary population.

The Committee recommends an advance appropriation of \$41,000,000 for the first quarter of fiscal year 2012. This amount is the same as the budget request. These funds will ensure uninterrupted benefit payments to coal miners, their widows, and dependents.

BLACK LUNG DISABILITY TRUST FUND

Appropriations, 2010	\$662,874,000
Budget estimate, 2011	709,523,000
Committee recommendation	709,523,000

The Committee recommends \$709,523,000 for this mandatory appropriations account. This amount is the same as the budget request. The comparable fiscal year 2010 amount is \$662,874,000.

This benefit program is administered by the Division of Coal Mine Workers' Compensation, which is part of the Office of Workers' Compensation Programs. The Division was part of the Employment Standards Administration until it was reorganized last year. The appropriation language continues to provide indefinite authority for the Black Lung Disability Trust Fund to provide for benefit payments. The recommendation assumes that \$228,389,000 for benefit payments will be paid in fiscal year 2011. In addition, the appropriation bill provides for transfers from the trust fund for administrative expenses for the following Department of Labor agencies: up to \$33,075,000 for the part C costs of the Division of Coal Mine Workers' Compensation Programs, up to \$25,394,000 for Departmental Management, Salaries and Expenses, and up to \$327,000 for Departmental Management, Inspector General. The bill also allows a transfer of up to \$356,000 for the Department of the Treasury.

The trust fund pays all black lung compensation/medical and survivor benefit expenses when no responsible mine operation can be assigned liability for such benefits or when coal mine employment ceased prior to 1970, as well as all administrative costs that are incurred in administering the benefits program and operating the trust fund.

It is estimated that 25,250 individuals will receive black lung benefits financed through the end of the fiscal year 2011.

The basic financing for the trust fund comes from a coal excise tax for underground and surface-mined coal. Additional funds come from reimbursement from the Advances to the Unemployment Trust Fund and Other Funds as well as payments from mine operators for benefit payments made by the trust fund before the mine operator is found liable. The advances to the fund assure availability of necessary funds when liabilities may exceed other income. The Emergency Economic Stabilization Act of 2008 authorized the restructuring of the Black Lung Disability debt and extended the current tax structure until the end of 2018.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 2010	\$558,620,000
Budget estimate, 2011	573,096,000
Committee recommendation	574.096.000

The Committee recommends \$574,096,000 for this account. The comparable fiscal year 2010 amount is \$558,620,000. The budget request includes \$573,096,000. This agency is responsible for enforcing the Occupational Safety and Health Act of 1970 in the Nation's workplaces.

In addition, the Committee has included language to allow the Occupational Safety and Health Administration [OSHA] to retain up to \$200,000 per fiscal year of training institute course tuition fees to be used for occupational safety and health training and education grants in the private sector.

The Committee retains language carried in last year's bill effectively exempting farms employing 10 or fewer people from the provisions of the act with the exception of those farms having a temporary labor camp. The Committee also retains language exempting small firms in industry classifications having a lost workday injury rate less than the national average from general schedule safety inspections. These provisions have been in the bill for many years.

The Committee recommendation supports the important mission carried out by OSHA. The Committee notes that 14 workers suffered a fatal occupational injury each day during calendar year 2008. While an improvement over 2007, this rate is still too high. This appropriation will help OSHA meet its goal of securing safe and healthy workplaces, particularly for the most dangerous workplaces. The Committee intends these funds to help rebuild OSHA's enforcement capacity, accelerate safety and health standards development, and maintain robust compliance assistance programs.

The Committee recommends \$105,893,000 for grants to States under section 203(g) of the Occupational Safety and Health Act. These funds are provided to States that have taken responsibility for administering their own occupational safety and health programs for the private sector and/or the public sector. State plans must be at least as effective as the Federal program and are monitored by OSHA. The Committee continues language that allows OSHA to provide grants of up to 50 percent for the costs of State plans approved by the agency. The Committee believes that, given the continuing fiscal pressures facing State budgets, OSHA should continue its practice of allowing States an extra year to match fiscal year 2011 resources offered for support of their State plans.

The Committee continues to be concerned that a significant proportion of work-related injuries and illnesses appear not to be captured on the OSHA Log of Work-related Injuries and Illnesses or in the annual Bureau of Labor Statistics [BLS] Survey of Occupational Injuries and Illnesses. The Committee understands that several recent studies have found that the BLS survey may miss between 25 percent and 70 percent of all nonfatal injuries and illnesses, when compared to State workers' compensation information. While there is some explanation for why these data systems won't match completely, the Committee believes the apparent level of underreporting raises serious questions, particularly when firms may have economic incentives to underreport and workers may fear retaliation for reporting injuries.

Given that complete and accurate reporting of injuries and illnesses is part of the foundation of the OSHA program, the Committee continues to believe that OSHA needs to take steps to better understand the completeness of employer-provided data. Specifically, the Committee directs OSHA to continue oversight and enforcement of its recordkeeping standard to ensure complete and accurate recording and reporting by employers. Within the Committee recommendation, funds are available to continue a recordkeeping enforcement initiative on injury and illness recording. The Committee intends for this effort to enable OSHA to review the completeness and accuracy of individual employers' injury and illness records and determine whether there are employer policies or practices in place that cause incomplete reporting of injuries and illnesses by employees. The Committee expects OSHA to keep it updated of its actions in this area.

The Committee strongly supports the Department's goal of giving workers a voice in the workplace and OSHA's critical role in that effort, which involves the enforcement of 17 whistleblower protection statutes. The Committee notes that OSHA used a portion of the fiscal year 2010 appropriation to provide an increase of 25 fulltime equivalent [FTE] staff for its work in this area. The Committee requests that future congressional budget justifications identify funding and FTE levels for whistleblower activities and the specific performance goals and measures addressing program quality and timeliness issues.

The Committee also believes that OSHA's worker safety and health training and education programs, including the grant program that supports such training, are a critical part of a comprehensive approach to worker protection. The Committee recommendation includes \$11,000,000 for the OSHA Susan Harwood Training Grant Program.

MINE SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 2010	\$357,293,000
Budget estimate, 2011	360,780,000
Committee recommendation	377,000,000

The Committee recommendation includes \$377,000,000 for the Mine Safety and Health Administration [MSHA]. The comparable fiscal year 2010 amount is \$357,293,000. The budget request includes \$360,780,000 for MSHA.

This agency insures the safety and health of the Nation's miners by conducting inspections and special investigations of mine operations, promulgating mandatory safety and health standards, cooperating with the States in developing effective State programs, and improving training in conjunction with States and the mining industry.

The explosion at Upper Big Branch earlier this year was a tragic reminder of the important role that MSHA must play in preventing injury and death in our Nation's mines. The Committee believes that MSHA must utilize effectively its authority and resources to prevent another disaster through vigorous enforcement of mine safety law and regulations. The Committee has added \$16,520,000 above the budget request to support MSHA's efforts. This appropriation should be used to address several key areas, as described below.

The Committee recommendation provides funding to support the costs of the Upper Big Branch investigation and internal review. The families of the deceased and injured miners, the Department of Labor, MSHA, Congress, and the public must have a complete understanding of what went wrong and why, as well as the steps planned to address any issues identified. However, the Committee believes that the yet-to-be-completed investigation is not a reason to delay a single action that would strengthen MSHA's ability to improve the health and safety of our Nation's miners and help mine operators carryout their responsibilities to provide for a safe workplace.

Miners know the conditions of their mine and equipment, and potential safety and health threats, but the Committee believes MSHA should take additional actions to ensure that miners are trained properly in and aware of their rights to identify and report safety hazards in their workplaces. The Committee has provided additional funds for MSHA to support training on miner rights in the workplace, focused particularly on identifying and reporting safety and health hazards. Miners and their families also must be protected from discrimination for reporting safety and health hazards in the workplace and the Committee urges MSHA to take action to ensure their rights are protected. The Committee also has provided additional funds to enhance MSHA's hazard conditions complaint system.

While every effort must be made to avoid a mine accident, the Committee recommendation includes additional funds to strengthen MSHA's emergency response capability in case one does occur. Funds also are provided for the Office of Assessments to effectively identify mines that meet a pattern of violation status and support necessary rulemaking activities. Sufficient funds are available to support adequate staff for meeting MSHA's mission, including its inspection requirements, technical support, and review of mining plans.

The Committee requests that MSHA prepare an operating plan for this appropriation that describes how funds will be utilized in carrying out its mission. This report shall be provided to the Committees on Appropriations of the Senate and House of Representatives not later than 30 days after enactment of this act.

The Committee bill continues language authorizing MSHA to use up to \$2,000,000 for mine rescue and recovery activities. It also retains the provision allowing the Secretary of Labor to use any funds available to the Department to provide for the costs of mine rescue and survival operations in the event of a major disaster.

In addition, bill language is included to allow the National Mine Health and Safety Academy to collect not more than \$750,000 for room, board, tuition, and the sale of training materials to be available for mine safety and health education and training activities. Bill language also allows MSHA to retain up to \$1,000,000 from fees collected for the approval and certification of equipment, materials, and explosives for use in mines, and may utilize such sums for such activities.

The Committee also recommends \$1,500,000 to the United Mine Workers of America to continue an award for classroom and simulated rescue training for mine rescue teams at its Beckley, West Virginia, and Washington, Pennsylvania, career centers.

BUREAU OF LABOR STATISTICS

SALARIES AND EXPENSES

Appropriations, 2010	\$611,447,000
Budget estimate, 2011	645,351,000
Committee recommendation	634,851,000

The Committee recommends \$634,851,000 for this account. The comparable fiscal year 2010 amount is \$611,447,000. The budget request includes \$645,351,000. The recommendation includes \$67,438,000 from the Employment Security Administration account of the unemployment trust fund, and \$567,413,000 in Federal funds. Language pertaining to the Current Employment Survey is retained from prior-year bills.

The Bureau of Labor Statistics [BLS] is the principal fact-finding agency in the Federal Government in the broad field of labor economics.

The Committee continues to be concerned about the significant discrepancies found in comparisons of BLS injury and illness survey data, which are based on employer-reported injury logs provided to the Occupational Safety and Health Administration [OSHA], and State worker compensation information. The research identified that the BLS data were only capturing as few as onethird of injuries under certain State worker compensation systems. While there is some explanation for why data from State worker compensation systems won't match perfectly with the BLS survey data, the research conducted to date raises serious questions about the completeness of the national workplace injury surveillance system.

Therefore, the Committee recommendation includes resources to continue BLS efforts to: strengthen the current BLS examination of the differences between workers' compensation information and BLS survey data; better understand employer injury and illnesses recording practices; and conduct a pilot study of using multiple data sources to capture injury and illness data. The Committee expects to be kept apprised of BLS work in this area.

The Committee recommendation also includes \$1,500,000 to continue the Mass Layoff Statistics Program.

The Committee notes that the fiscal year 2011 request for BLS includes a number of proposals to reduce the cost of its programs, including restructuring the current employment survey program and developing an alternative source of data for locality pay surveys. These actions will allow BLS to continue its production of high-quality data at lower costs.

The Committee bill does not contain language included in the fiscal year 2010 bill that requires the BLS to continue the women worker series within the current employment statistics program. The administration's fiscal year 2011 budget request proposes deleting the language. The Committee understands BLS will continue this data collection as it currently exists; therefore, this bill language is unnecessary.

OFFICE OF DISABILITY EMPLOYMENT POLICY

Appropriations, 2010	\$39,031,000
Budget estimate, 2011	39,138,000
Committee recommendation	44,138,000

The Committee recommends \$44,138,000 for this account in fiscal year 2011. The comparable fiscal year 2010 level is \$39,031,000. The budget request is \$39,138,000. The Committee intends that at least 80 percent of these funds shall be used to design and implement research and technical assistance grants and contracts to develop policy that reduces barriers to employment for youth and adults with disabilities.

Congress created the Office of Disability Employment Policy [ODEP] in the Department of Labor's fiscal year 2001 appropriation. The mission of ODEP is to provide leadership, develop policy and initiatives, and award grants furthering the objective of eliminating physical and programmatic barriers to the training and employment of people with disabilities. The Committee strongly supports each of the components of ODEP's mission and, in particular, urges the Secretary to ensure that ODEP is properly supported in carrying out its leadership role with respect to Government-wide policies related to the training and employment of individuals with disabilities.

The Committee recommendation includes \$17,000,000 for the ODEP, in collaboration with the Employment and Training Administration [ETA], to continue to implement their joint plan for improving effective and meaningful participation of persons with disabilities in the workforce. The Committee expects that these funds, in combination with funding available to ETA, will improve the accessibility and accountability of the public workforce development system for individuals with disabilities. The Committee further expects these funds to continue promising practices implemented by disability program navigators, including effective deployment of staff in selected States to: improve coordination and collaboration among employment and training and asset development programs carried out at a State and local level, including the Ticket to Work program; and build effective community partnerships that leverage public and private resources to better serve individuals with disabilities and improve employment outcomes.

DEPARTMENTAL MANAGEMENT

SALARIES AND EXPENSES

Appropriations, 2010	\$356,006,000
Budget estimate, 2011	428,624,000
Committee recommendation	432,624,000

The Committee recommendation includes \$432,624,000 for the Departmental Management account. The comparable fiscal year 2010 amount is \$356,006,000 and the budget request includes \$428,624,000 for this purpose. An amount of \$327,000 is available by transfer from the Black Lung Disability Trust Fund.

The primary goal of the Department of Labor is to protect and promote the interests of American workers. The departmental management appropriation finances staff responsible for formulating and overseeing the implementation of departmental policy and management activities in support of that goal. In addition, this appropriation includes a variety of operating programs and activities that are not involved in departmental management functions, but for which other appropriations for salaries and expenses are not suitable.

The Committee recommendation includes an increase above the budget request of \$16,000,000 within the legal services activity to continue support of the Department's efforts to reduce the backlog of cases before the Federal Mine Safety and Health Review Commission [FMSHRC]. The Committee remains concerned that the backlog of cases at the FMSHRC has increased by greater than 400 percent over historical levels. The Committee understands that this backlog is largely due to the fact that the rate of contested citations has grown from 7 percent before the enactment of the MINER Act of 2006 to more than 25 percent last year. The Committee is continuing its efforts to address this issue by increasing funding for the FMSHRC, as described later in the report, to reduce the backlog by engaging additional judges and support staff, and continue the transition to an electronic case management system.

The Committee intends these funds to support necessary expenses of the Department of Labor related to an increased capacity of the Commission to process caseloads pending before it. The Committee expects the Department to make every effort to support the timely processing of contested citations, particularly for operators that have the highest proportion of significant and substantial citations or other evidence of unacceptable health and safety records.

Up to \$7,200,000 of these additional funds for legal services may be transferred to the Mine Safety and Health Administration for related costs and other activities designed to improve the safety and health of miners. The Committees on Appropriations of the Senate and House of Representative shall be notified not later than 10 days prior to the transfer of such funds. The Committees further expect the Department and Federal Mine Safety and Health Review Commission to continue to implement activities that will reduce incentives for mine operators to challenge cases and improve the efficiency by which challenges are heard. The Committee requests that the Department and FMSHRC submit such a plan not later than 30 days after enactment of this act, and provide quarterly progress reports thereafter on the status of activities identified in the plan, including an explanation for any activity that is not completed within the timeframe identified in the operating plan.

The Committee recommendation includes \$117,000,000 for the Bureau of International Labor Affairs [ILAB]. The comparable fiscal year 2010 appropriation is \$92,669,000 and the budget request includes \$115,000,000. These funds are available to help improve working conditions and labor standards for workers around the world and carry out ILAB's statutory mandates and international responsibilities. These funds may be used to support microfinance programs and other livelihood activities that contribute to a more comprehensive approach to addressing the root causes of labor exploitation, including child and forced labor. Of the funds provided for ILAB, \$40,000,000 is designated for the United States' contribution to the International Labor Organization's International Program on the Elimination of Child Labor.

The budget request proposes making the appropriation for ILAB available for obligation through December 31, 2011. The Committee bill allows \$66,500,000 to be available for obligation for an extra quarter, as was provided in the fiscal year 2010 appropriations act. The Committee will continue to monitor ILAB's use of the extended obligation authority provided for the current fiscal year in making a final decision about this budget proposal.

The Committee strongly supports ILAB's initiatives designed to ensure compliance with internationally recognized worker rights. The Committee believes that is important for ILAB to support projects that enhance the capacity of governments at all levels to enforce core labor standards; build support with industry to ensure compliance with core labor standards throughout the entire supply chain; and become self-financed monitoring programs. In line with this goal, the Committee supports extending monitoring efforts throughout the entire supply chain to ensure that the worst forms of child labor are not used to produce goods in target sectors. The Committee requests that ILAB consult with the Committee on the planned and proposed uses of all technical assistance activities and other programs planned to be undertaken with funds available to ILAB.

The Committee believes that the oversight committee created in 2006 to report publicly on the progress of the implementation of the Harkin-Engel protocol, a public private partnership to eliminate the worst forms of child labor and adult forced labor in the cocoa sector of West Africa, has been beneficial to all stakeholders. The Committee intends for ILAB to continue to support the implementation of the Harkin-Engel Protocol by providing assistance to countries that helps them strengthen partnerships; collect data; develop, expand, and evaluate effective programs in order to substantially reduce the worst forms of child labor in the cocoa sector.

The Committee continues to support ILAB's worker rights technical assistance projects and programs, for which the budget proposes additional resources. These projects will support the implementation of model programs designed to address worker rights in countries with which the United States has trade preference programs or free trade agreements.

The Committee notes that ILAB is statutorily required to compile and report to the Congress annually on the extent to which each foreign country that has trade and investment agreements with the United States enforces internationally recognized worker rights. This report is required under multiple U.S. laws and promotes core labor standards as embodied in the ILO Declaration on Fundamental Principles and Rights at Work as adopted and reaffirmed in 1998. The Committee once again directs the Secretary to include in the 2010 report all former GSP recipients that have achieved a Free Trade Agreement with the United States over the preceding year.

The Committee recommendation includes \$4,536,900 for the departmental management working capital fund, as proposed in the budget request. These funds are available, pursuant to section 108 of the title I general provisions of this act. With 15-day advance notification of the Committees on Appropriations of the Senate and House of Representatives, the Secretary may transfer amounts made available to the fund to supplement existing acquisition workforce improvement activities, including training existing staff and hiring additional staff. The Committee expects these funds to help DOL agencies acquire goods and services at reduced costs and better aligned with achievement of agencies' missions.

VETERANS EMPLOYMENT AND TRAINING

Appropriations, 2010	\$256, 127, 000
Budget estimate, 2011	262,494,000
Committee recommendation	262,494,000

The Committee recommends \$262,494,000 for this account, including \$50,971,00 in general revenue funding and \$211,523,000 to be expended from the Employment Security Administration account of the unemployment trust fund. This account includes resources for the Veterans' Employment and Training Services [VETS] that enable it to maximize employment opportunities for veterans and transitioning service members, including protecting their employment rights. VETS carries out its mission through a combination of grants to States, competitive grants, and Federal enforcement and oversight.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2010	\$84,014,000
Budget estimate, 2011	85,082,000
Committee recommendation	85,082,000

The Committee recommends \$85,082,000, the same amount as the budget request, for the Office of the Inspector General [OIG]. The bill includes \$79,090,000 in general funds and authority to transfer \$5,992,000 from the Employment Security Administration account of the unemployment trust fund. In addition, an amount of \$327,000 is available by transfer from the black lung disability trust fund. The comparable fiscal year 2010 amount is \$84,014,000.

The OIG was created by law to protect the integrity of departmental programs as well as the welfare of beneficiaries served by those programs. Through a comprehensive program of audits, investigations, inspections, and program evaluations, the OIG attempts to reduce the incidence of fraud, waste, abuse, and mismanagement, and to promote economy, efficiency, and effectiveness.

GENERAL PROVISIONS

General provision bill language is included to:

Provide for general transfer authority (sec. 101).

Prohibit funding for the procurement of goods and services utilizing forced or indentured child labor in industries and host countries already identified by the Labor Department in accordance with Executive Order 13126 (sec. 102).

Require that funds available under section 414(c) of the American Competitiveness and Workforce Improvement Act of 1998 may only be used for training in occupations and industries for which employers are using H–1B visas to hire foreign workers (sec. 103).

Require the Secretary to award competitively funds available for section 414(c) of the American Competitiveness and Workforce Improvement Act of 1998 (sec. 104).

Limit compensation from Federal funds to a rate not greater than Executive Level II for any recipient or subrecipient of funds under the heading, "Employment and Training Administration" and limit the use of Job Corps funding for compensation of an individual that is not a Federal employee at a rate not to exceed Executive Level I (sec. 105).

Prohibit the Secretary from taking any action to alter the procedure for redesignating local areas under subtitle B of title I of the Workforce Investment Act (sec. 106).

Provides the Employment and Training Administration with authority to transfer funds provided for technical assistance services to grantees to program administration when it is determined that those services will be more efficiently performed by Federal staff (sec. 107).

Provides \$4,536,900 to the Departmental Management, Working Capital Fund in support of an acquisition workforce initiative and allows funds to be transferred to any other account in the Department of Labor, subject to 15-day prior notification of the Committees on Appropriations of the Senate and House of Representatives (sec. 108).

Rescinds \$3,900,000 in funds available for the Investment in Reinvention Fund (sec. 109).

TITLE II

DEPARTMENT OF HEALTH AND HUMAN SERVICES

HEALTH RESOURCES AND SERVICES ADMINISTRATION

HEALTH RESOURCES AND SERVICES

 Appropriations, 2010
 \$7,507,994,000

 Budget estimate, 2011
 7,626,658,000

 Committee recommendation
 7,515,663,000

The Committee provides a program level of \$7,515,663,000 for Health Resources and Services. The Committee recommendation includes \$7,490,663,000 in budget authority and an additional \$25,000,000 via transfers available under section 241 of the Public Health Service Act. The fiscal year 2010 comparable program level was \$7,507,994,000. The budget request for fiscal year 2011 was \$7,626,658,000.

HRSA activities support programs to provide healthcare services for mothers and infants; the underserved, elderly and homeless; migrant farm workers; and disadvantaged minorities. This appropriation supports cooperative programs in community health, AIDS care, healthcare provider training, and healthcare delivery systems and facilities.

BUREAU OF PRIMARY HEALTH CARE

COMMUNITY HEALTH CENTERS

The Committee provides \$2,185,146,000 in this bill for the community health centers program. Combined with the \$1,000,000,000 appropriated for fiscal year 2011 in Public Law 111–152, the fiscal year 2011 program level totals \$3,185,146,000. The fiscal year 2010 comparable program level was \$2,185,146,000. The budget request for fiscal year 2011 in this bill was \$2,479,993,000. This group of programs includes community health centers, migrant health centers, healthcare for the homeless, and public housing health service grants. The Committee continues to support strongly the ongoing effort to increase the number of people who have access to medical services at health centers.

Within the amount provided, the Committee has provided \$100,000,000 under the Federal Tort Claims Act [FTCA] for the Health Centers program. The Committee has included bill language making this funding available until expended and allowing costs associated with the health centers tort liability relief program to be paid from the fund. The Committee intends that the fund be used to pay judgments and settlements, occasional witness fees and expenses, and the administrative costs of the program, which include the cost of evaluating claims, defending claims, and conducting settlement activities. The Committee supports the proposal in the President's budget to continue providing funds to health centers to care for the 3 million patients added through the American Recovery and Reinvestment Act [ARRA]. Within the fiscal year 2011 program level, the Committee directs HRSA to continue the Increased Demand for Services funding and continue to support the new access points established through ARRA.

The Committee strongly supports the expansion of primary care services in school settings. Within the funds available for new access points and expanded medical capacity, the Committee directs HRSA to give priority to applications that include school-based care. The Committee further encourages HRSA to provide technical assistance to community health centers on how they can form partnerships with school districts and local health departments that currently operate school-based health centers within the service area of the community health center.

In addition, the Committee supports continued efforts to expand the Health Centers program into those areas of the country with high need and inadequate access to services to meet such need. The Committee notes that the Government Accountability Office [GAO], in an August 2008 report, found that 60 percent of the Medically Underserved Areas [MUAs] in the Midwest Census Region States are without a federally supported health center site. These States had the highest percentage of MUAs without a health center site in the United States, according to the GAO report. The Committee urges HRSA to make funding available to increase capacity at existing centers, and for service expansion awards to expand access to behavioral health services, oral health services, and pharmacy services provided by community health centers. The Committee expects HRSA to implement any new expansion initiative using the existing, and statutorily required, proportionality for urban and rural communities, as well as migrant, homeless, and public housing health centers.

Child Maltreatment Prevention.—The Committee continues to believe that parent training is a promising strategy for preventing child maltreatment that should be tested in primary care settings such as community health centers. The Committee urges HRSA to ensure that community health centers are actively engaged in the new home visitation initiative funded in the Patient Protection and Affordable Care Act.

Substance Abuse Coordination.—The Committee is aware of the initiative in the President's budget to expand behavioral and mental health services in community health centers. Insofar as those services include substance abuse treatment, the Committee encourages HRSA to issue guidance to community health centers on collaboration with State substance abuse agencies to ensure the promotion of State standards of care, coordination of referrals, and further services.

NATIVE HAWAIIAN HEALTH CARE

The Committee again includes the legal citation in the bill for the Native Hawaiian Health Care Program. The Committee has included sufficient funding so that healthcare activities funded under the Native Hawaiian Health Care Program can be supported under the broader community health centers line. The Committee expects that not less than last year's level be provided for these activities in fiscal year 2011.

The Committee encourages HRSA to support efforts to expose our Nation's youth to potential careers in the health professions; for example, in nursing, pharmacy, and public health. It is especially important that youth in rural America and from a range of ethnic groups, including Native Hawaiians, have access to early career counseling and "hands on" experiences.

The Committee encourages HRSA to work collaboratively with appropriate federally qualified community health centers to develop screening, prevention and treatment initiatives addressing the extraordinarily high incidence of kidney disease among Filipino citizens.

STATE HEALTH ACCESS GRANTS

The Committee does not provide funding for State Health Access Grants. The fiscal year 2010 comparable level was \$74,480,000 and the budget request for fiscal year 2011 was \$75,000,000.

This program gives grants to States to develop new models for expanding access to healthcare coverage. The Committee notes that the Patient Protection and Affordable Care Act imposes new requirements on States relating to all activities currently funded by this program. Therefore, there is no longer a need for this program.

FREE CLINICS MEDICAL MALPRACTICE COVERAGE

The Committee provides \$40,000 in funding for payments of claims under the Federal Tort Claims Act to be made available for free clinic health professionals as authorized by, section 224(o) of the Public Health Service Act. The fiscal year 2010 comparable level and the budget request for fiscal year 2011 both included \$40,000 for this program. This appropriation continues to extend Federal Tort Claims Act coverage to medical volunteers in free clinics in order to expand access to healthcare services to low-income individuals in medically underserved areas.

NATIONAL HANSEN'S DISEASE PROGRAM

The Committee includes \$16,109,000 for the National Hansen's Disease Program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$16,075,000. The program consists of inpatient, outpatient, long-term care, training, and research in Baton Rouge, Louisiana; a residential facility at Carville, Louisiana; and 11 outpatient clinic sites in the continental United States and Puerto Rico.

NATIONAL HANSEN'S DISEASE PROGRAM BUILDINGS AND FACILITIES

The Committee provides \$129,000 for the repair and maintenance of buildings at the Gillis W. Long Hansen's Disease Center. The fiscal year 2010 comparable level was \$128,000 and the budget request for fiscal year 2011 was \$129,000 for this program.

PAYMENT TO HAWAII FOR HANSEN'S DISEASE TREATMENT

The Committee provides \$1,976,000 for Hansen's Disease services. The fiscal year 2010 comparable level was \$1,976,000, the same as the budget request for fiscal year 2011. Payments are made to the State of Hawaii for the medical care and treatment of persons with Hansen's Disease in hospital and clinic facilities at Kalaupapa, Molokai, and Honolulu. Expenses above the level of appropriated funds are borne by the State of Hawaii.

BUREAU OF HEALTH PROFESSIONS

National Health Service Corps

The Committee provides \$141,420,000 in this bill for National Health Service Corps [NHSC] activities. Together with \$290,000,000 appropriated in fiscal year 2011 in the Patient Protection and Affordable Care Act, the recommendation for the fiscal year 2011 program level is \$431,420,000. The fiscal year 2010 comparable level was \$141,420,000. The budget request for fiscal year 2011 in this bill was \$168,589,000.

This program provides full-cost scholarships or sizable loan repayment to students in exchange for an agreement to serve as a primary care provider in a high-priority federally designated health professional shortage area. These funds should support multi-year, rather than single-year, commitments. Salary costs of most new assignees are paid by the employing entity.

The Committee continues to recognize that the NHSC is an essential tool for recruitment and retention of primary care health professionals in Health Professional Shortage Areas nationwide. The Committee applauds efforts by HRSA to enhance access to the NHSC by reducing application documentation requirements, allowing for pre-qualification of applicants, instituting rolling deadlines, and planning a part-time service demonstration. The Committee encourages HRSA to continue with these and other improvements, as well as collaboration with the Health Centers program in order to maximize the investment in the NHSC.

The Committee is aware that psychologists are among the occupations eligible to participate in the NHSC if they agree to practice in underserved areas, and the Committee encourages HRSA to ensure that mental health professionals are aware of this opportunity.

The Committee is aware that specialty care is increasingly rare in communities that have been declared a public health emergency and may be critically needed to respond to injuries or illnesses sustained in the emergency. The Committee notes that HRSA has the authority to consider requests by local entities for alternative provider types with special considerations. Therefore, the Committee encourages HRSA to provide technical assistance to communities experiencing public health emergencies to ensure that they can utilize all available options to respond to needs resulting from the disaster.

HEALTH PROFESSIONS

The Committee provides \$648,868,000 for HRSA health professions programs. The fiscal year 2010 comparable level was

\$496,835,000. The budget request for fiscal year 2011 was \$503,903,000.

The Committee urges HRSA to maximize the capacity of health professions education programs to be inter-professional in nature in order that healthcare professionals educated through these programs graduate competent to provide patient-centered, team-based care.

In addition, the Committee is aware of research findings that suggest a neurological basis for women's experience of greater pain sensitivity which may account for the greater degree to which women seek help for chronic pain. Therefore, the Committee encourages HRSA to undertake a health professional education effort regarding these conditions. Such an effort should include the development of continuing medical education courses and other curricula to reduce gender-based barriers to effective care.

Training for Diversity

Centers of Excellence

The Committee provides \$24,602,000 for the Centers of Excellence program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$24,550,000.

This program was established to fund institutions that train a significant portion of the Nation's minority health professionals. Funds are used for the recruitment and retention of students, faculty training, and the development of plans to achieve institutional improvements. The institutions that are designated as centers of excellence are private institutions whose mission is to train disadvantaged minority students for service in underserved areas. Located in poor communities and usually with little State funding, they serve the healthcare needs of their patients, often without payment.

Health Careers Opportunity Program

The Committee provides \$22,133,000 for the Health Careers Opportunity Program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$22,086,000.

This program provides funds to medical and other health professions schools for recruitment of disadvantaged students and preprofessional school preparations.

Faculty Loan Repayment

The Committee provides \$6,266,000 for the Faculty Loan Repayment program. The budget request for fiscal year 2011 and the fiscal year 2010 comparable level were \$1,266,000.

This program provides for the repayment of education loans for individuals from disadvantaged backgrounds who are health professions students or graduates, and who have agreed to serve for at least 2 years as a faculty member of a health professions school.

Scholarships for Disadvantaged Students

The Committee provides \$49,342,000 for the Scholarships for Disadvantaged Students program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$49,236,000.

This program provides grants to health professions schools for student scholarships to individuals who are from disadvantaged backgrounds and are enrolled as full-time students in such schools.

Primary Care Training and Enhancement

The Committee provides \$90,000,000 for Primary Care Training and Enhancement programs. The fiscal year 2010 comparable level was \$38,923,000. The budget request for fiscal year 2011 included \$39,275,000 for this program.

This program supports the expansion of training in internal medicine, family medicine, pediatrics, and physician assistance. Funds may be used for developing training programs or providing direct financial assistance to students and residents. The Committee has included bill language specifying that no less than 15 percent of funds must be used to train physician assistants. The Committee urges HRSA to prioritize training physician assistants due to the ability of programs to rapidly expand to graduate high numbers of clinicians to fill the growing need for primary care. The Committee notes the findings of the recent "Annals in Inter-

The Committee notes the findings of the recent "Annals in Internal Medicine" study ranking medical schools based on the communities where their graduates worked and whether those doctors practiced primary care. The Committee urges HRSA to prioritize applications from schools with a proven record of educating primary care physicians who go on to serve in shortage areas.

Training in Oral Health Care

The Committee recommends \$47,982,000 for Training in Oral Health Care programs. The fiscal year 2010 comparable level was \$32,919,000 and the budget request for fiscal year 2011 was \$32,982,000.

These programs support a variety of training opportunities in the field of oral health, authorized under sections 748 and 340G of the Public Health Service [PHS] Act. Funds may be used to expand training in general dentistry, pediatric dentistry, public health dentistry, dental hygiene, and other oral health programs. Funds may be used to plan and operate training programs, as well as to provide financial assistance to students and residents.

Within the funds provided, the Committee intends no less than \$2,000,000 be used for public health dental residencies. The Committee further intends that no less than \$15,000,000 be allocated for grants to training programs authorized under section 748 of the PHS Act and that State Health Workforce grants be funded at no less than \$22,500,000.

The Committee supports efforts by States to develop licensure requirements and by universities to develop curricula for advanced dental hygiene practitioners.

The Committee strongly supports the continued development of the faculty loan repayment program and expects HRSA to allocate no less than last year's level to this newly authorized activity. The Committee encourages HRSA to prioritize applications from schools with a proven track record of graduating dentists who go on to practice in underserved areas. The Committee is supportive of programs that link oral healthcare with primary care training. In addition, the Committee is supportive of dental public health specialty training, including the completion of the Master of Public Health or an equivalent degree and the 1-year residency program.

Rural Physician Training

The Committee includes \$5,100,000 for the Rural Physician Training Grants program. This is a new program authorized by the Patient Protection and Affordable Care Act. The budget request for fiscal year 2011 did not propose funding.

This program will provide funds to health professions schools to establish, improve, or expand a rural-focused training program. Funds may be used to design curricula on issues prevalent in rural care, provide clinical practice experience in rural settings, and recruit students most likely to practice in rural communities.

Interdisciplinary, Community-based Linkages

Area Health Education Centers

The Committee provides \$33,345,000 for the Area Health Education Centers [AHEC] program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$33,274,000.

This program links university health science centers with community health service delivery systems to provide training sites for students, faculty, and practitioners. The program supports three types of projects: core grants to plan and implement programs; special initiative funding for schools that have previously received AHEC grants; and model programs to extend AHEC programs with 50 percent Federal funding.

Allied Health and Other Disciplines

The Committee provides \$10,617,000 for the Allied Health and Other Disciplines programs. The fiscal year 2010 comparable level was \$4,880,000. The budget request for fiscal year 2011 was \$4,890,000.

The Committee recommendation is sufficient to continue Chiropractic Demonstration programs at the same levels as in fiscal year 2010.

The Committee has included bill language providing \$8,672,000 for mental and behavioral health training grants authorized in section 756 of the Public Health Service Act. The Committee urges HRSA to allocate no less than last year's level for graduate psychology education.

These programs seek to improve the diversity of allied health practitioners and their distribution to areas of need. The programs also improve access to comprehensive and culturally competent healthcare services for underserved populations.

The graduate psychology education program trains psychology graduate students while they provide supervised behavioral and mental health services to underserved populations. The Committee is concerned that current economic conditions are significantly increasing the numbers of people seeking mental health services as they struggle with unemployment, job and income loss, and the many associated problems that result. The Committee supports efforts by HRSA that would help integrate health service psychology trainees at Federally Qualified Health Centers to provide behavioral and mental health services to underserved populations. In addition, the Committee encourages HRSA to focus on supporting programs with demonstrated, scientifically based potential to improve the outcome of mental and behavioral healthcare services. These programs should include academic institutions with a demonstrated commitment for improving health outcomes, as documented by science-based accreditation processes.

Geriatric Education

The Committee provides \$33,747,000 for Geriatric Education programs, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$33,675,000.

Geriatric programs include: Geriatric Education Centers, the Geriatric Academic Career awards program, and the Geriatric Training program for Physicians, Dentists, and Behavioral and Mental Health Professionals.

Health Professions Workforce Information and Analysis

The Committee is recommending \$13,781,000 for health professions workforce information and analysis. The budget request for fiscal year 2011 was \$8,781,000. The fiscal year 2010 comparable level was \$2,826,000. The program provides grants and contracts to eligible entities to provide for the collection and analysis of targeted information, research on high-priority workforce questions, the development of analytic and research infrastructure, and the conduct of program evaluation and assessment.

The allied health professions, like nurses and primary care physicians, face serious workforce shortages due to student recruitment, shortages of faculty and clinical sites. The Committee encourages HRSA to include allied health professions in any comprehensive workforce study of the health professions.

The Committee is aware that hospice and palliative medicine [HPM] improves quality, controls cost, and enhances patient/family satisfaction for the rapidly expanding population of patients with serious or life-threatening illness. Therefore, the Committee encourages HRSA to study workforce trends, training capacity and need for HPM physicians, physician assistants and nurse practitioners in our Nation's academic medical centers, hospice organizations and palliative care programs.

Public Health and Preventive Medicine Training Programs

The Committee provides \$19,668,000 for these programs. The fiscal year 2010 comparable level was \$9,647,000. The budget request for fiscal year 2011 included \$9,668,000 for these programs. The Committee intends that the increase over the fiscal year 2010 appropriated level be used to expand fellowships and training in the area of preventive medicine.

This funding supports awards to schools of medicine, osteopathic medicine, and public health to provide for residency training programs in preventive medicine and public health; and for financial assistance to trainees enrolled in such programs.

Nursing Workforce Development Programs

The Committee provides \$292,285,000 for the Nursing Workforce Development programs. The fiscal year 2010 comparable level was \$243,553,000. The budget request for fiscal year 2011 was \$243,872,000.

The Committee recognizes that efforts to alleviate the Nation's shortage of Registered Nurses [RNs] must focus on addressing the nurse faculty shortage. According to the latest survey from the American Association of Colleges of Nursing, more than 50,000 qualified applicants were turned away from baccalaureate and graduate nursing programs in 2009 due primarily to a shortage of nurse faculty, including nearly 7,000 applicants to master's and doctoral programs. Supporting programs that prepare more nurse educators is the key to stabilizing the nursing workforce and reversing the RN shortage.

The Committee recommends funding for the following activities in the following amounts:

[In thousands of dollars]

Budget activity	Fiscal year 2010 comparable	Fiscal year 2011 request	Committee recommendation
Advanced Education Nursing	64,301	64,438	74,438
Nurse education, practice and retention	39,811	39,896	50,000
Nursing workforce diversity	16,073	16,107	16,107
Loan repayment and scholarship program	93,864	93,864	93,864
Comprehensive geriatric education	4,557	4,567	4,567
Nursing faculty loan program	24,947	25,000	53,309

Within the allocation for advanced education nursing, the Committee encourages HRSA to allocate funding for nurse anesthetist education at no less than last year's level.

The increase provided for nurse education, practice, and quality is intended to make grants for career ladder programs, authorized in the Patient Protection and Affordable Care Act.

In all programs, the Committee encourages HRSA to prioritize grant applications from institutions with a proven track record for graduates practicing in underserved areas.

The Committee also encourages HRSA to support schools of nursing in the development and implementation of both traditional and telehealth outreach programs in rural underserved communities.

Children's Hospitals Graduate Medical Education Program

The Committee provides \$317,500,000 for the Children's Hospitals Graduate Medical Education [GME] program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$316,824,000.

The program provides support for health professions training in children's teaching hospitals that have a separate Medicare provider number ("free-standing" children's hospitals). Children's hospitals are defined under Medicare as those whose inpatients are predominantly under the age of 18. The funds in this program are intended to make the level of Federal Graduate Medical Education support more consistent with that of other teaching hospitals, including children's hospitals that share provider numbers with other teaching hospitals. Payments are determined by formula, based on a national per-resident amount. Payments support training of resident physicians as defined by Medicare in both ambulatory and inpatient settings.

Patient Navigator

The Committee recommendation includes \$5,000,000 for the Patient Navigator Outreach and Chronic Disease Outreach program, the same as the budget request for fiscal year 2011. The comparable funding level for fiscal year 2010 was \$4,965,000.

The program provides demonstration grants to public or nonprofit health centers to help patients overcome barriers in the healthcare system to prompt screening, referral, diagnosis, and treatment services.

National Practitioner Data Bank

The Committee provides \$21,000,000 for the national practitioner data bank. This amount is the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$19,750,000. The Committee and the budget request assume that full funding will be provided entirely through the collection of user fees and will cover the full cost of operating the data bank. Bill language is included to ensure that user fees are collected to cover all costs of processing requests and providing such information to data bank users.

Healthcare Integrity and Protection Data Bank

The Committee provides \$4,000,000 for the healthcare integrity and protection data bank. This amount is the same as the administration request for fiscal year 2011. The fiscal year 2010 comparable level was \$3,758,000. The Committee assumes that full funding will be provided entirely through the collection of user fees and will cover the full cost of operating the data bank. Bill language is included to ensure that user fees are collected to cover all costs of processing requests and providing such information to data bank users. The data bank is intended to collect, maintain, and report on certain actions taken against healthcare providers, suppliers, and practitioners.

MATERNAL AND CHILD HEALTH BUREAU

The Committee is pleased to learn of the successful launch by the National Healthy Mothers-Healthy Babies Coalition of the Text4Babies program, a program that sends text messages to expectant woman and new mothers to help keep the mothers and their babies healthy. Within the first 5 months of the program, more than 25,000 women in more than 45 States have registered for the free service, which is supported largely by private contributions for this public-private partnership.

MATERNAL AND CHILD HEALTH BLOCK GRANT

The Committee provides \$673,187,000 for the maternal and child health [MCH] block grant, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$660,710,000.

The Maternal and Child Health Block Grant program provides a flexible source of funding that allows States to target their most urgent maternal and child health needs through development of community-based networks of preventive and primary care that coordinate and integrate public and private sector resources and programs for pregnant women, mothers, infants, children, and adolescents. The program supports a broad range of activities including providing prenatal care, well child services and immunizations; reducing infant mortality; preventing injury and violence; expanding access to oral healthcare; addressing racial and ethnic disparities; and providing comprehensive care for children, adolescents, and families through clinics, home visits and school-based health programs.

The Committee has included bill language identifying \$93,999,263 for the Special Projects of Regional and National Significance [SPRANS] set-aside. Within that total, the Committee recommendation includes sufficient funding to continue the setasides for oral health, epilepsy, sickle cell, doula programs, and fetal alcohol syndrome at no less than last year's level.

Epilepsy.—The Committee has provided funding to continue outreach, technical assistance, and State demonstration programs that develop and implement systems of care to improve access to comprehensive, coordinated healthcare and related services for children and youth with epilepsy living in medically underserved areas.

Oral Health.—The Committee has provided funding to continue and expand early childhood oral health interventions and prevention programs encompassing the medical/dental interface, topical fluorides, school and community-based sealant programs, and systems building with WIC, Head Start, and others.

Vision Screening.—The Committee is pleased that the Maternal and Child Health Bureau has created the National Universal Vision Screening for Young Children Coordinating Center. The center's mission is to develop the public health infrastructure to promote and ensure a continuum of eye care for young children within the healthcare delivery system. The Committee supports the mission and goals of this new center and looks forward to hearing about its progress.

SICKLE CELL ANEMIA PROGRAM

The Committee provides \$4,750,000 for the sickle cell anemia demonstration program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$4,740,000. This program provides grants and contracts to help coordinate service delivery for individuals with sickle cell disease, including genetic counseling and testing; training of health professionals; and identifying and establishing other efforts related to the expansion and coordination of education, treatment, and continuity of care programs for individuals with sickle cell disease.

TRAUMATIC BRAIN INJURY PROGRAM

The Committee provides \$9,939,000 for the traumatic brain injury program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$9,918,000. The program supports implementation and planning grants to States for coordination and improvement of services to individuals and families with traumatic brain injuries as well as protection and advocacy. Such services can include: pre-hospital care, emergency department care, hospital care, rehabilitation, transitional services, education, employment, and long-term support. The Committee includes no less than last year's funding level for protection and advocacy services, as authorized under section 1305 of Public Law 106–310.

AUTISM AND OTHER DEVELOPMENTAL DISORDERS

The Committee provides \$55,000,000 for the autism and other developmental disorders initiative, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$47,898,000. The program supports surveillance, early detection, education, and intervention activities on autism and other developmental disorders, as authorized in the Combating Autism Act of 2006.

Bill language is included to ensure that fiscal year 2011 grants may be awarded for multi-year activities, as the authorization bill intended.

Within the funding provided for autism and other related developmental disorders, an increase of no less than \$2,000,000 is provided to continue and expand research on evidence-based practices for interventions for individuals with autism and other developmental disabilities, for development of guidelines for those interventions, and for information dissemination. In addition, an increase of no less than \$2,000,000 is provided to continue and expand the Leadership Education in Neuro-developmental and Related Disabilities program.

NEWBORN SCREENING FOR HERITABLE DISORDERS

The Committee provides \$10,013,000 for the newborn heritable disorders screening program, as described in section 1109 of the Newborn Screening Saves Lives Act of 2008. The fiscal year 2010 comparable level was \$9,992,000 and the fiscal year 2011 budget request was \$10,013,000.

This program provides funding to improve the ability of States to provide newborn and child screening for heritable disorders. Newborn screening provides early identification and followup for treatment of infants affected by certain genetic, metabolic, hormonal, and/or functional conditions.

CONGENITAL DISABILITIES PROGRAM

The Committee has not provided funding for the congenital disabilities program. The budget request for fiscal year 2011 included \$500,000 for these activities. The fiscal year 2010 comparable level was \$499,000. The Committee is pleased with the materials created in this program and encourages HRSA to distribute the materials through the Maternal Child Health Bureau's programs. The purpose of the program is to provide information and support services to families receiving a positive test diagnosis for down syndrome, spina bifida, dwarfism, or other prenatally and postnatally diagnosed conditions. Grants may be made to States, territories, localities, and nongovernmental organizations with expertise in prenatally and postnatally diagnosed conditions.

HEALTHY START

The Committee provides \$103,200,000 for the Healthy Start infant mortality initiative. The fiscal year 2010 comparable level was \$104,776,000 and the budget request for fiscal year 2011 was \$110,186,000.

The Committee intends these funds to fully provide for continuations of previously awarded grants. The Committee is aware that the Patient Protection and Affordable Care Act [PPACA] includes \$250,000,000 in fiscal year 2011 for home visitation programs to improve maternal and child birth outcomes, and that Healthy Start grantees are eligible to apply for this funding. In awarding the PPACA funds, the Committee encourages HRSA to give full and fair consideration to grantees currently and formerly funded in Healthy Start and in the home visitation initiative under the Administration for Children and Families.

The primary purpose of Healthy Start is to reduce infant mortality by 50 percent and generally improve maternal and infant health in at-risk communities. Grants are awarded largely to State and local health departments, and nonprofit organizations to conduct an infant mortality review, develop a package of innovative health and social services for pregnant women and for infants, and evaluate these efforts.

UNIVERSAL NEWBORN HEARING SCREENING AND EARLY INTERVENTION

The Committee provides \$19,000,000 for universal newborn hearing screening and early intervention activities, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$18,960,000.

The Committee expects HRSA to coordinate projects funded with this appropriation with projects related to early hearing detection and intervention by the National Center on Birth Defects and Developmental Disabilities, the National Institute on Deafness and Other Communication Disorders, the National Institute on Disability and Rehabilitation Research, and the Office of Special Education and Rehabilitative Services.

This program awards grants to 53 States and territories that support statewide systems of newborn hearing screening, audiologic diagnostic testing before 3 months of age and enrollment in early intervention programs before the age of 6 months.

EMERGENCY MEDICAL SERVICES FOR CHILDREN

The Committee provides \$22,500,000 for emergency medical services for children [EMSC]. The fiscal year 2010 comparable level was \$21,454,000 and the budget request for fiscal year 2011 was \$21,500,000. The program supports demonstration grants for the delivery of emergency care to acutely ill and seriously injured children.

The EMSC program makes funding available to every State EMS office to improve emergency care for children, and to pay for critical research and dissemination of best practices. The Committee commends the program's efforts to improve the evidence base for pediatric emergency care in the pre-hospital and emergency department settings and to drive the rapid translation of new science into professional practice.

HIV/AIDS BUREAU

ACQUIRED IMMUNE DEFICIENCY SYNDROME

RYAN WHITE AIDS PROGRAMS

The Committee provides \$2,340,345,000 for Ryan White AIDS programs. The recommendation includes \$25,000,000 in transfers available under section 241 of the Public Health Service Act. The fiscal year 2010 comparable level was \$2,312,179,000 and the budget request for fiscal year 2011 was \$2,330,401,000.

These programs provide a wide range of community-based services, including primary and home healthcare, case management, substance abuse treatment, mental health services, and nutritional services.

The Committee is aware that many of the benefits currently provided through Ryan White Care Act programs will become available to people living with HIV/AIDS over the next few years through State high-risk pools, health exchanges and other newly authorized programs. The Committee expects HRSA to offer a plan for how to transition Ryan White benefits into a larger system of care so that Ryan White resources may be targeted to the areas of most need. The plan should include a year-by-year list of actions needed by the administration, the Congress and the States in order to ensure the smoothest possible transition for beneficiaries. The Committee expects the plan no later than 8 months after enactment of this act.

EMERGENCY ASSISTANCE

The Committee provides \$679,074,000 for emergency assistance grants to eligible metropolitan areas disproportionately affected by the HIV/AIDS epidemic. This amount is the same as the fiscal year 2010 comparable level and the budget request for fiscal year 2011.

Grants are provided to metropolitan areas meeting certain criteria. Two-thirds of the funds are awarded by formula and the remainder is awarded through supplemental competitive grants.

The Committee notes that the fiscal year 2010 comparable level included a provision directing funds to particular metropolitan areas facing dramatic cuts as a result of the changes to the Ryan White formula. The Committee has not continued this provision in fiscal year 2011.

COMPREHENSIVE CARE PROGRAMS

The Committee provides \$1,303,791,000 for HIV healthcare and support services. The fiscal year 2010 comparable level was

\$1,278,791,000 and the budget request for fiscal year 2011 was \$1,283,791,000. Funds are awarded to States to support HIV service delivery consortia, the provision of home and community-based care services for individuals with HIV disease, continuation of health insurance coverage for low-income persons with HIV disease, and support for State AIDS drug assistance programs.

The Committee includes bill language providing \$885,000,000 for AIDS medications in the AIDS Drug Assistance Program [ADAP]. The fiscal year 2010 comparable level was \$860,000,000 and the budget request for fiscal year 2011 was \$855,000,000.

The Committee is very concerned by the vulnerability of State funding for ADAP, the continuing increases in drug prices, and the ongoing unemployment that has caused spikes in enrollment. Sufficient funding is included to continue the emergency allocations from fiscal year 2010 and extend additional life-saving support in fiscal year 2011.

The Committee strongly supports the use of ADAP funds to pay coverage premiums as a means of getting ADAP beneficiaries additional services while simultaneously reducing the cost and expanding the number of individuals that can benefit. The Committee urges HRSA to work with States, the Centers for Medicare and Medicaid Services, and the Office of Personnel Management to maximize this resource mechanism. The Committee directs HRSA to report in the fiscal year 2012 budget submission on the number of individuals and the amount of funds being used from ADAP and each portion of the Ryan White Care Act to support premiums.

In addition, the Committee requests that HRSA include in the fiscal year 2012 submission the average cost to ADAP of each drug included in the ADAP formulary and the cost of that prescription drug to ADAP over the previous 3 fiscal years.

EARLY INTERVENTION SERVICES

The Committee provides \$206,383,000 for early intervention grants, the same as the fiscal year 2010 comparable level. The budget request for fiscal year 2011 was \$211,877,000.

Funds are awarded competitively to primary healthcare providers to enhance healthcare services available to people at risk of HIV and AIDS. Funds are used for comprehensive primary care, including counseling, testing, diagnostic, and therapeutic services.

CHILDREN, YOUTH, WOMEN, AND FAMILIES

The Committee provides \$77,787,000 for grants for coordinated services and access to research for women, infants, children, and youth. This amount is the same as the budget request for 2011. The fiscal year 2010 comparable level was \$77,621,000.

Funds are awarded to community health centers, family planning agencies, comprehensive hemophilia diagnostic and treatment centers, Federally qualified health centers under section 1905(1)(2)(B) of the Social Security Act, county and municipal health departments and other nonprofit community-based programs that provide comprehensive primary healthcare services to populations with or at risk for HIV disease.

AIDS DENTAL SERVICES

The Committee provides \$13,565,000 for AIDS Dental Services, the same as the fiscal year 2010 comparable level. The budget request for fiscal year 2011 was \$15,429,000.

This program provides grants to dental schools, dental hygiene schools, and postdoctoral dental education programs to assist with the cost of providing unreimbursed oral healthcare to patients with HIV disease.

AIDS EDUCATION AND TRAINING CENTERS

The Committee provides \$34,745,000 for the AIDS education and training centers [AETCs], the same as the fiscal year 2010 comparable level. The budget request for fiscal year 2011 included \$37,443,000.

AETCs train healthcare practitioners, faculty, and students who care for AIDS patients outside of the traditional health professions education venues, and support curriculum development on diagnosis and treatment of HIV infection for health professions schools and training organizations.

HEALTH CARE SYSTEMS BUREAU

Organ Donation and Transplantation

The Committee provides \$27,991,000 for organ donation and transplantation activities. The fiscal year 2010 comparable level was \$25,991,000 and the budget request for fiscal year 2011 was \$26,049,000.

Funds support a scientific registry of organ transplant recipients and the National Organ Procurement and Transplantation Network to match donors and potential recipients of organs. A portion of the appropriated funds may be used to educate public and health professionals about organ donations and transplants, and to support agency staff providing clearinghouse and technical assistance functions.

The Committee is aware of the large and growing national organ transplantation waiting list. Although an average of 80 patients received transplants each day last year, a daily average of 18 patients died due to the unavailability of organs. Healthcare professionals, particularly physicians, nurses, and physician assistants, if given enhanced knowledge and training, can positively impact organ donation. Therefore, the Committee has included \$500,000 for the development of curriculum and continuing education programs for targeted health professionals. The remainder of the increase is intended to support additional projects to increase organ donation.

National Cord Blood Inventory

The Committee has provided \$13,883,000 for the National Cord Blood Inventory, which is the successor of the National Cord Blood Stem Cell Bank program. The fiscal year 2010 comparable level was \$11,957,000 and the budget request for fiscal year 2011 was \$13,883,000. The purpose of this program is to provide funds to cord blood banks to build an inventory of the highest-quality cord blood units for transplantation.

C.W. Bill Young Cell Transplantation Program

The Committee provides \$26,544,000 for the C.W. Bill Young Cell Transplantation Program, which is the successor of the National Bone Marrow Donor Registry. The fiscal year 2010 comparable level was \$23,467,000 and the budget request for fiscal year 2011 was \$26,544,000.

Office of Pharmacy Affairs

The Committee provides \$5,220,000 for the Office of Pharmacy Affairs, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level for this program was \$2,220,000. The Office of Pharmacy Affairs promotes access to clinical and costeffective pharmacy services among safety-net clinics and hospitals that participate in the 340B Drug Pricing program. Section 340B of the Public Health Service Act requires drug manufacturers to provide discounts or rebates to a specified set of HHS-assisted programs and hospitals that meet the criteria in the Social Security Act for serving a disproportionate share of low-income patients. These funds will be used to help resolve deficiencies that could not be addressed within resources available for the normal operations of the office. Specifically, these deficiencies include noncompliance with the 340B pricing requirements and errors and omissions in the office's covered entity database.

The Committee strongly supports a definition of patient that protects the 340B drug program's integrity while ensuring the Nation's healthcare safety net is not weakened. The Committee expects HRSA to provide guidance to 340B-covered entities based upon current law.

The Committee also requests that HRSA and CMS convene a working group to ensure that all phases of the 340B drug discount program are administered without redundancy or contradiction by the two agencies of jurisdiction.

Poison Control Centers

The Committee provides \$29,314,000 for Poison Control Center activities, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$29,250,000. The Poison Control Centers program currently supports a mix of grantees: Most grantees serve entire States; a few grantees serve multi-State regions; and, in a handful of cases, more than one grantee serves a single State.

HRSA estimates that \$7 is saved in medical spending for every dollar spent on Poison Control Centers because treatment guidance for the majority of poison exposures (over 70 percent) can be provided over the phone, thereby reducing emergency department visits, ambulance use, and hospital admissions. For that reason, the Committee is strongly supportive of ensuring that all citizens have access to poison control hotlines.

Declines in State budgets have reduced the staffing of poison control centers, causing many centers to curtail marketing their services. Given that first-time parents are one of the main consumers of poison control services, marketing efforts are essential to reach this ever-changing group. The Committee notes that current technology allows for very efficient routing of calls. The Committee requests HRSA to submit a report 3 months after enactment of this act on the advantages and disadvantages of the current system compared to a regional system or a national system. The report should include cost projections for each approach.

Medical Home Demonstration Programs

The Committee recommends \$40,000,000 for medical home demonstration programs. These programs have not been funded previously, and the fiscal year 2011 budget request did not include funds for this purpose.

Programs eligible for funding include the Community Health Teams authorized in section 3502 of the Patient Protection and Affordable Care Act and the Community-Based Collaborative Care Network authorized in section 340H of the Public Health Service Act. Under these authorizations, funds may be used for the creation and support of interdisciplinary patient care teams, assistance to low-income individuals to access care, case management, benefit enrollment, and other assistance.

The Committee requests an operating plan no later than 90 days after enactment of this act detailing the number and size of awards to be made under each authorization.

RURAL HEALTH PROGRAMS

Rural Healthcare Services Outreach Grants

The Committee provides \$57,266,000 for rural health outreach grants, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$55,905,000. This program supports projects that demonstrate new and innovative models of outreach in rural areas, such as integration and coordination of health services.

Frontier Extended Stay Clinics.—The Committee is aware that a research program is underway at the Centers for Medicare and Medicaid Services related to frontier extended stay clinics. The Committee urges HRSA to maintain its existing relationship with the clinics, so that there are no complicating factors in the interpretation of the research results.

Rural Health Research

The Committee provides \$9,950,000 for the Rural Health Research program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$9,929,000.

The funds provide support for the Office of Rural Health Policy to be the focal point for the Department's efforts to improve the delivery of health services to rural communities and populations. Funds are used for rural health research centers, the National Advisory Committee on Rural Health, and a reference and information service.

Rural Hospital Flexibility Grants

The Committee provides \$41,200,000 for rural hospital flexibility grants, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$40,915,000.

Under this program, HRSA works with the States to provide support and technical assistance to Critical Access Hospitals to focus on quality and performance improvement and to integrate emergency medical services. Of the amount provided, the Committee includes \$15,000,000 to continue the Small Rural Hospital Improvement Grant Program, as authorized by section 1820(g)(3) of the Social Security Act and Public Law 107–116 and outlined in House Report 107–342. The program provides support for small rural hospitals and focuses on quality improvement and adoption of health information technology.

The Committee remains strongly supportive of the collaboration between the Department of Veterans Affairs and rural hospitals to provide locally based care, and understands that one of the largest barriers to this effort is the lack of electronic medical records that are interoperable with the VISTA system. For that reason, the Committee has again included bill language identifying \$1,000,000 for grants authorized under section 1820(g)(6) of the Social Security Act to provide telehealth equipment and to develop electronic health records that are compatible with the VISTA system. The Committee encourages HRSA to coordinate with the Department of Veterans Affairs to ensure that this equipment furthers the goal of treating the illnesses and disabilities of our Nation's veterans. The Committee is particularly concerned with ensuring that veterans receive appropriate mental healthcare.

Delta Health Initiative

The Committee has included \$34,927,000 for the Delta Health Initiative as authorized in section 219 of division G of Public Law 110–161. The fiscal year 2010 comparable level was \$34,927,000. The budget request for fiscal year 2011 did not include funds for this purpose.

Rural and Community Access to Emergency Devices

The Committee provides \$2,526,000 for rural and community access to emergency devices. This is the same amount as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$2,521,000.

This appropriation provides funding for both the rural program under section 413 of the Public Health Service Act and the community access demonstration under section 313. The Committee urges HRSA to prioritize rural communities.

Funding will be used to purchase automated external defibrillators, place them in public areas where cardiac arrests are likely to occur and train lay rescuers and first responders in their use.

The Committee encourages the placement of additional automated external defibrillators [AEDs] in rural areas. Only an estimated 8 percent of victims who suffer a sudden cardiac arrest outside of a hospital survive. Immediate cardiopulmonary resuscitation and early intervention, using an AED, can more than double a patient's chance of survival. Communities with comprehensive AED programs, including training of anticipated rescuers, have achieved survival rates of nearly 40 percent.

State Offices of Rural Health

The Committee provides \$10,075,000 for the State Offices of Rural Health, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$10,005,000.

The State Offices of Rural Health program helps the States strengthen rural healthcare delivery systems by allowing them to better coordinate care and improve support and outreach in rural areas.

Black Lung Clinics

The Committee provides \$7,200,000 for black lung clinics. This is the same amount as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$7,185,000.

This program funds clinics that treat respiratory and pulmonary diseases of active and retired coal miners, steel mill workers, agricultural workers, and others with occupationally related respiratory and pulmonary impairments. These clinics reduce the incidence of high-cost inpatient treatment for these conditions.

Radiation and Exposure Screening and Education Program

The Committee provides \$1,952,000 for activities authorized by the Radiation Exposure Compensation Act. This is the same amount as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$1,948,000.

This program provides grants for the education, prevention, and early detection of radiogenic cancers and diseases resulting from exposure to uranium during its mining and milling at nuclear test sites.

Native and Rural Alaskan Healthcare

The Committee does not provide funding for the Denali Commission. The fiscal year 2010 comparable level was \$10,000,000 and the budget request for fiscal year 2011 did not include funding for this program.

These funds support the construction and renovation of health clinics, hospitals and social service facilities in rural Alaska, as authorized by Public Law 106–113.

Family Planning

The Committee provides \$327,356,000 for the title X family planning program, the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable level was \$316,832,000.

Title X grants support primary healthcare services at clinics nationwide. About 85 percent of family planning clients are women at or below 150 percent of poverty level. Title X of the Public Health Service Act, which established the family planning program, authorizes the provision of a broad range of acceptable and effective family planning methods and preventive health services to individuals, regardless of age or marital status. This includes FDA-approved methods of contraception.

The Committee urges HRSA to use the increased funds to augment the awards for existing grantees to offset the rising cost of providing healthcare services. In addition, the Committee encourages the Department to provide a portion of the increase provided for family planning to be used to provide technical assistance to grantees to be prepared for healthcare reform, including the expansion of Medicaid, technology upgrades and participating as essential community providers.

The Committee is aware of a 2009 Institute of Medicine [IOM] report which found that the title X family planning program provides critically needed health services to individuals with the most difficulty accessing family planning care. The Committee supports the Office of Family Planning's efforts to review and update the title X program guidance and administrative directives in response to the IOM report. The Committee encourages the Office of Family Planning to consider additional ways to strengthen the program's infrastructure and service delivery needs.

Healthcare-related Facilities and Activities

The Committee provides \$156,329,000 for the construction and renovation (including equipment) of healthcare-related facilities and other healthcare-related activities. In fiscal year 2010, \$337,300,000 was provided and the budget request for fiscal year 2011 included \$100,000,000 for these activities.

The Committee expects HRSA to use no more than 1 percent of the funds allocated for projects for agency administrative expenses. These funds are to be used for the following projects and in the following amounts:

	Amount
Aberdeen Area Tribal Chairmen's Health Board, Rapid City, SD, for facilities and equipment to improve	
prenatal care	\$450.000
Alameda County Medical Center, Oakland, CA, for facilities and equipment	775,000
Alaska Medicare Clinic, Anchorage, AK, for facilities and equipment	500,000
Alaska Native Tribal Health Consortium, Anchorage, AK, for facilities and equipment	1,000,000
Alaska Native Tribal Health Consortium, Anchorage, AK, for the oral health disparities project	250,000
Alexian Brothers Hospital Network, Arlington Heights, IL, for facilities and equipment	375,000
Anchorage Neighborhood Health Center, Anchorage, AK, for facilities and equipment	500,000
Anchorage Project Access, Anchorage, AK, for outreach, care coordination, and support of oral health-	
care	200,000
Apple Tree Dental, Minneapolis, MN, for facilities and equipment related to oral healthcare	150.000
Archbold Medical Center, Thomasville, GA, for facilities and equipment	150.000
Arkansas Methodist Hospital Corporation, Paragould, AR, for facilities and equipment	500,000
Assiniboine and Sioux Tribes of the Fort Peck Reservation, Poplar, MT, for facilities and equipment re-	,
lated to dialysis	200,000
Association for Utah Community Health, Salt Lake City, UT, to implement an electronic medical record	,
system	106.000
Barbara Ann Karmanos Cancer Institute, Detroit, MI, for facilities and equipment	250,000
Barnabas Uplift, Waverly, IA, for a healthcare job training program	300,000
Baton Rouge Children's Health Project, Baton Rouge, Louisiana, for the purchase of mobile mental	,
health units	200.000
Baxter Regional Medical Center, Mountain Home, AR, for facilities and equipment	450,000
Baylor Health Care System and City of Dallas, Dallas, TX, for facilities and equipment	110.000
Bear Lake Memorial Hospital, Montpelier, ID, for facilities and equipment	150,000
Beebe Medical Center, Lewes, DE, for facilities and equipment related to nurse training	150,000
BioOhio, Columbus, OH, for a national vaccine manufacturing and logistics center study	100.000
Bi-State Primary Care Association, Montpelier, VT, for education and outreach	40.000
Bi-State Primary Care Association, Montpelier, VT, for equipment and support of a dental clinic	110,000
Bozeman Deaconess Hospital, Bozeman, MT, for facilities and equipment, including electronic health	.,
records	250.000
Briar Cliff University, Sioux City, IA, for health training equipment and online instruction	100.000
Broadlawns Medical Center, Des Moines, IA, for facilities and equipment	500.000
Brookhaven Memorial Hospital Medical Center, Patchogue, NY, to establish the Brookhaven Breast Can-	,
cer Coalition	100.000
Cassia Regional Medical Center, Burley, ID, for facilities and equipment	150,000

	Amount
Center for Asbestos Related Disease, Libby, MT, for facilities and equipment, including information tech-	
nology	300,00
Center for Enhanced Diabetic Eye Care, Pikesville, MD, for programs related to diabetic retinopathy, in- cluding equipment	100.00
Central Arkansas Radiation Therapy Institute, Little Rock, AR, for facilities and equipment	500,00
Central Maine Medical Center College of Nursing and Health Professions, Lewiston, ME, for facilities and	,
equipment	200,00
Central Maine Medical Center, Lewiston, ME, for health professions training, including equipment	225,00
Chestnut Health Systems, Bloomington, IL, for facilities and equipment Children's Medical Center—Dallas, Dallas, TX, for facilities and equipment	350,00 300.00
Children's Medical Context – Danas, Danas, Pri, for facilities and equipment	200,00
Children's Aid and Family Services, Paramus, NJ, for facilities and equipment	200,00
Children's Hospital of Wisconsin and Health System, Milwaukee, WI, for facilities and equipment	700,00
Children's Hospital, Aurora, CO, for information technology upgrades	150,00
Children's Mercy Hospital, Kansas City, MO, for facilities and equipment Chippewa Valley Free Clinic, Eau Claire, WI, for facilities and equipment	500,00 500,00
CHRISTUS St. Frances Cabrini, Alexandria, LA, for electronic health record implementation	200,00
Chronic Disease Fund, Plano, TX, to expand chronic disease program	500,00
Clarian Health, Indianapolis, IN, for outreach and education services for diabetes	100,00
Cleveland State University, Cleveland, OH, for facilities and equipment	100,00
Coastal Carolina University, Conway, SC, for facilities and equipment	200,00
Coastal Family Health Center, Astoria, OR, for facilities and equipment Columbus Regional Hospital, Columbus, IN, for facilities and equipment	100,00 100.00
Community Dental, Portland, ME, for dental health services, including equipment	450,00
Community Foundation of Southwest Kansas, Dodge City, KS, for facilities and equipment	150,00
Community Health Access Project, Inc., Mansfield, OH, for facilities and equipment	250,00
Community Health Center of Ft. Dodge, Ft. Dodge, IA, for facilities and equipment	100,00
Community Health Center, Inc., Middletown, CT, for a residency training program for nurse practition-	150.00
ers Community Health Centers of Arkansas, North Little Rock, AR, for facilities and equipment	150,00 250.00
Community Health Centers of Southeastern Iowa, Burlington, IA, for facilities and equipment	100.00
Community Health Centers of Southern Iowa, Leon, IA, for facilities and equipment	250,00
Community Health, Chicago, IL, for facilities and equipment	150,00
Comprehensive Community Action Inc., Cranston, RI, for health center facilities and equipment	500,00
Concordia University School of Pharmacy, Mequon, WI, for facilities and equipment	500,00
Connecticut Children's Medical Center, Hartford, CT, for facilities and equipment	500,00 150,00
Coos County Family Health Services, Berlin, NH, for facilities and equipment Copper River Native Association, Copper Center, AK, for facilities and equipment	500,00
Council Bluffs Community Health Center, Council Bluffs, IA, for facilities and equipment	350,00
County of Riverside, Moreno Valley, CA, for facilities and equipment related to trauma care	1,000,00
Crouse Hospital, Syracuse, NY, for facilities and equipment	150,00
Cure for the Kids Foundation, Las Vegas, NV, for facilities and equipment	500,00
Dakota Wesleyan University, Mitchell, SD, for health training equipment	200,00 250,00
Dartmouth Hitchcock Medical Center, Lebanon, NH, for facilities and equipment	400.00
Dean McGee Eye Institute, Oklahoma City, OK, for facilities and equipment	150,00
Delta State University, Cleveland, MS, for facilities and equipment	1,300,00
Denver Hospice, Denver, CO, for facilities and equipment	150,00
Dillard University, New Orleans, LA, for facilities and equipment at the Gentille Center for Health Dis-	250.00
parities and Disease Prevention Drew Memorial Hospital, Monticello, AR, for facilities and equipment	250,00 500,00
East Carolina University, Greenville, NC, for facilities and equipment	500,00
East Carroll Parish Hospital, Lake Providence, LA, for facilities and equipment	600,00
ast Orange General Hospital, East Orange, NJ, for facilities and equipment	200,00
aster Seals Joliet Region, Inc., Joliet, IL, for facilities and equipment related to autism	200,00
astern Maine Healthcare System, Brewer, ME, for a hospice and palliative care initiative	385,00
astern Shore Rural Health System, Inc., Nassawadox, VA, for equipment related to oral healthcare gyptian Public & Mental Health Department, Eldorado, IL, for facilities and equipment at a rural health clinic	150,00 275,00
lathead Valley Community College, Kalispell, MT, for health professions training, including equipment	100.00
loyd Medical Center, Rome, GA, for facilities and equipment	100,00
Free Clinics of Iowa, Des Moines, IA, for coordination of care	350,00
Garfield Memorial Hospital, Panguitch, UT, for facilities and equipment	106,00
Sillette Children's Specialty Healthcare, St. Paul, MN, for facilities and equipment	100,00
Global to Local Health Initiative, Seattle, WA, for a health disparities program, including equipment	400,00
Good Samaritan Health Clinic of Cullman, Inc., Cullman, AL, to implement an electronic medical records system	100,00

	Amount
Goodall Hospital, Sanford, ME, for facilities and equipment	300,00
Grays Harbor Community Hospital, Aberdeen, WA, for facilities and equipment	750,00
Greater Sioux Community Health Center, Sioux Center, IA, for facilities, equipment, supplies, and out-	
reach Habersham Medical Center, Demorest, GA, for facilities and equipment	600,00
	100,00
Harms Memorial Hospital District, American Falls, ID, for facilities and equipment	100,00
Harris County Hospital District, Houston, TX, for facilities and equipment	250,00
Hawkeye Community College, Waterloo, IA, for health education facilities and equipment	400,00
Health Work Force Institute, Seattle, WA, for programs to identify and address workforce needs	300,00
Healthy Howard Health Plan, Inc, Columbia, MD, for outreach, support and care coordination	500,00
Hidalgo Medical Services, Lordsburg, NM, for facilities and equipment in Silver City	250,00
Hospice of the Panhandle, Martinsburg, WV, for facilities and equipment	3,000,00
Houston Community College, Houston, TX, for recruitment and nurse training	250,00
Howard Community College, Columbia, MD, for health education facilities and equipment	250,00
Hudson Perinatal Consortium, Jersey City, NJ, for a program to improve birth outcomes	200,00
daho State University, Pocatello, ID, for facilities and equipment	150,00
nnovis Health, Fargo, ND, for facilities and equipment	175,00
ntegrated Service Solutions, Caribou, ME, to implement an electronic health record system	255,00
owa CareGivers Association, West Des Moines, IA, for the Direct Care Worker Resource and Outreach	
Center	300,00
owa Healthcare Collaborative, Des Moines, IA, to improve healthcare provider efficiency and effective- ness	650.00
owa Nebraska Primary Care Association, Des Moines, IA, for planning grants	600,00
owa State University, Ames, IA, for facilities and equipment for the Institute for Novel Vaccines and	
Anti-Microbial Design owa Valley Community College District, Marshalltown, IA, to assist underserved individuals in pursuing	1,000,00
a healthcare career	100,00
owa Western Community College, Council Bluffs, IA, for facilities and equipment for the nursing cen-	,
ter	250,00
I.C. Blair Memorial Hospital, Huntingdon, PA, for facilities and equipment	100,00
lackson Laboratory, Bar Harbor, ME, for facilities and equipment	100,00
lackson Park Hospital, Chicago, IL, for facilities and equipment	250,00
lackson State University, Jackson, MS, for facilities and equipment	1,000,00
lacksonville State University, Jacksonville, AL, for a nursing education program including equipment	100,00
lameson Health System, New Castle, PA, for facilities and equipment	100,00
Kalihi-Palama Health Center, Honolulu, HI, for a program on renal disease	250,00
Kanawha-Charleston Health Department, Charleston, WV, for a chronic disease management program	350,00
Kauai Community Health Center, Lihue, HI, for facilities and equipment	200,00
Kennesaw State University, Kennesaw, GA, for facilities and equipment	200,00
King County Project Access, Seattle, WA, for facilities and equipment	40,00
a Clinica del Valle Family Health Care Center, Inc., Medford, OR, for facilities and equipment	200,00
ake Area Technical Institute, Watertown, SD, for health training equipment	100,00
Lanai'i Community Health Center, Lanai'i City, HI, for facilities and equipment	100,00
eflore County Health Center, Inc, Greenwood, MS, for a patient navigator initiative, including equip-	
ment	250,00
Legacy Health System, Vancouver, WA, for telemedicine programs, including equipment	125,00
Lewis-Clark State College, Lewiston, ID, for facilities and equipment	150.00
Linn Community Care, Cedar Rapids, IA, for facilities and equipment	250,00
Little Company of Mary Hospital, Evergreen Park, IL, for facilities and equipment	400.00
Livingston Health Care, Livingston, MT, for facilities and equipment	150,00
Los Angeles Community College District, Los Angeles, CA, for health professions training, including	150,00
equipment	150,00
	,
Loyola University, Chicago, IL, for facilities and equipment related to nurse training	400,00
Maine Medical Center, Portland, ME, for physician recruitment, including scholarships	355,00
Manchester College, Fort Wayne, IN, for facilities and equipment	150,00
Manilag Association, Kotzebue, AK, for facilities and equipment	1,500,00
Marcus Autism Center, Atlanta, GA, for rural health outreach	200,00
Marquette University, Milwaukee, WI, for a comprehensive dental outreach program	850,00
Marshall University, Huntington, WV, for facilities and equipment related to genetic research Massachusetts League of Community Health Centers, Boston, MA, for workforce training and develop-	2,300,00
	100,00
	100,00
ment	
ment Maui Medical Center, Wailuku, HI, for health professions training, including equipment	,
ment Maui Medical Center, Wailuku, HI, for health professions training, including equipment Mental Crisis Services, Denver, CO, for electronic health record implementation	150,00
ment Maui Medical Center, Wailuku, HI, for health professions training, including equipment	,

	Amount
Minot State University, Minot, ND, for its Great Plains Autism Treatment Program to serve transition-age	
youth with autism spectrum disorders	200,000
Mission Health System, Asheville, NC, for facilities and equipment	150,000
Mississippi Blood Services, Inc., Jackson, MS, for facilities and equipment	485,000
Mississippi County Hospital System d.b.a. Great River Medical Center, Blytheville, AR, for facilities and	
equipment Mississippi Primary Health Care Association, Jackson, MS, for facilities and equipment	200,000 350,000
Mississippi State University, Mississippi State, MS, for biomedical engineering facilities and equip-	
ment Mississippi State University. Mississippi State. MS. for facilities and equipment	1,000,000 500.000
Mississippi University for Women, Columbus, MS, for facilities and equipment	190,000
Missouri River Medical Center, Fort Benton, MT, for facilities and equipment	300,000
Moses Cone Health System, Greensboro, NC, for facilities and equipment	200,000
Murray State University, Murray, KY, to purchase a mobile health unit	500,000 590,000
Nathan Adelson Hospice Foundation, Las Vegas, NV, for facilities and equipment National Jewish Health, Denver, CO, for facilities and equipment	250,000
Native Women's Health Care Center, Rapid City, SD, for facilities and equipment	100,000
Navos, Seattle, WA, for facilities and equipment	100,000
Nevada Cancer Institute, Las Vegas, NV, for equipment	750,000
New Mexico Foundation for Dental Health, Research and Education, Albuquerque, NM, for outreach, care coordination, and support of oral healthcare	100,000
New York Presbyterian Hospital, New York, NY, for facilities and equipment	150,000
New York University Langone Medical Center, New York, NY, for facilities and equipment	750,000
North Colorado Medical Center, Greeley, CO, for facilities and equipment	250,000
North Dakota Medical Association, Bismarck, ND, to set up a statewide quality improvement network	250,000
North Idaho College, Coeur d'Alene, ID, to expand the physical therapy program North Shore Long Island Jewish Health System, Great Neck, NY, to implement electronic medical re-	100,000
cords	500,000
Northeast Missouri Health Council, Inc., Kirksville, MO, for facilities and equipment	750,000
Nye County, Pahrump, NV, for facilities and equipment	400,000
Oakwood Healthcare, Inc., Dearborn, MI, for facilities and equipment related to orthopedics	150,000
Oglala Sioux Tribe, Pine Ridge, SD, for facilities and equipment related to emergency care Ohio State University Comprehensive Cancer Center—James Cancer Hospital and Solove Research Insti-	250,000
tute, Columbus, OH, for facilities and equipment Ohio University, Athens, OH, for health outreach and services in Appalachia Ohio	200,000 200,000
Oklahoma Medical Research Foundation, Oklahoma City, OK, for facilities and equipment	100,000
Olympic College, Bremerton, WA, for facilities and equipment related to nurse training	350,000
Our Lady of the Lake University, San Antonio, TX, for nursing curriculum development, including equip- ment	110,000
Palmer College of Chiropractic and Myrna Brind Center of Integrative Medicine, Davenport, IA, to develop a model integrative healthcare program for the treatment of pain	400,000
Parkland Health and Hospital System, Dallas, TX, for facilities and equipment	400,000
Parkview Medical Center, Pueblo, CO, for facilities and equipment	250,000
Peace Health Whatcom Region, Bellingham, WA, for facilities and equipment	200,000
Pennsylvania Breast Cancer Coalition, Ephrata, PA, for screening programs and outreach	100,000
Penobscot Community Health Care, Bangor, ME, for a rural dental health initiative Penobscot Valley Hospital, Lincoln, ME, for facilities and equipment	150,000 395.000
Peoples Community Health Clinic, Waterloo, IA, for facilities and equipment	250,000
Pierce College Puyallup, Puyallup, WA, for health training equipment	130,000
Pioneer Valley Life Sciences Institute, Springfield, MA, for facilities and equipment	100,000
Pratt Regional Medical Center, Pratt, KS, for facilities and equipment Primary Care Association of Hawaii, Honolulu, HI, to support community health centers, including equip-	500,000
ment	1,850,000
Providence Alaska Family Medicine Residency, Anchorage, AK, for physician recruitment and retention	E00 000
initiative in rural Alaska Providence ElderPlace Seattle, Seattle, WA, for facilities and equipment	500,000 300,000
Providence Elderhace Seattle, Seattle, WA, for facilities and equipment	135,000
Regis College, Weston, MA, for facilities and equipment related to nurse training	100,000
Renown Health, Reno, NV, to expand nurse training	500,000
Rhode Island Free Clinic, Providence, RI, for coordination of care, data collection and analysis	250,000
Rice Lake Area Free Clinic, Rice Lake, WI, for facilities and equipment Rice University, Houston, TX, for facilities and equipment	100,000 200,000
Richmond Medical Center dba Richmond University Medical Center, Staten Island, NY, for facilities and	,
equipment	350,000
Rosebud Sioux Tribe, Rosebud, SD, for facilities and equipment	450,000

	Amount
Rosebud Sioux Tribe, Rosebud, SD, for facilities and equipment including purchase of a vehicle related	
to elderly care	50,00
Saint Elizabeth's Medical Center, Wabasha, MN, for facilities and equipment	100,00
Saint Patrick Hospital and Health Sciences Center, Missoula, MT, for facilities and equipment	150,00
Salish Kootenai College, Pablo, MT, for facilities and equipment related to health professions training	100,00
Salve Regina University, Newport, RI, for facilities, equipment, and training for an expanded nursing	500.00
program	500,00
an Luis Valley Regional Medical Center, Alamosa, CO, to implement electronic medical record system anders County Community Development Corporation, Thompson Falls, MT, for facilities and equipment	250,00
at the Hot Springs Medical Clinic	300,00
Seton Medical Center—Austin, Austin, TX, for facilities and equipment	200,00
Sherman County Health District dba Moro Medical Clinic, Moro, OR, for facilities and equipment	150,00
Snow College, Ephraim, UT, for facilities and equipment	150,00
Solaris Health System—JFK Medical Center, Edison, NJ, for facilities and equipment	400,00
Somerset Hospital, Somerset, PA, for facilities and equipment	100,00
Southeast Missouri State University, Cape Girardeau, MO, for the S.H.O.W. mobile initiative, including	
equipment	200,00
Southeastern Community College, West Burlington, IA, for facilities and equipment	200,00
Southeastern Ohio Regional Medical Center, Cambridge, OH, for information technology upgrades	250,0
Southern Nevada Immunization Coalition, Las Vegas, NV, for a community immunization project	200,0
Southwest Colorado Mental Health Center, Inc., Durango, CO, for facilities and equipment at the Cortez	050.0
Clinic	250,00
Sparrow Ionia County Memorial Hospital, Lansing, MI, for facilities and equipment	500,00
Spokane County Medical Society Foundation, Spokane, WA, for outreach and care coordination	100,00
St. Alexius Medical Center Foundation, Bismarck, ND, for facilities and equipment	300,0
St. Charles Health Council, Inc., Pennington Gap, VA, for a mobile respiratory care clinic, including	150.00
equipment St. John Medical Center Foundation, Longview, WA, for health professions training equipment	150,00
	100,0
St. Joseph Hospital, Nashua, NH, to implement an electronic medical record system St. Joseph's Mercy Health Foundation, Hot Springs, AR, for facilities and equipment	250,0 200,0
St. Jude Children's Research Hospital, Memphis, TN, for facilities and equipment	1,600,00
St. Louis Children's Hospital, St. Louis, MO, for facilities and equipment	500,00
St. Mary's Foundation for St. Mary's Regional Medical Center, Reno, NV, for planning and support of oral	500,00
healthcare	300,00
St. Mary's Hospital, Cottonwood, ID, for facilities and equipment	100,00
St. Mary's Janesville Hospital, Janesville, WI, for facilities and equipment	700,00
St. Mary's Medical Center, Huntington, WV, for facilities and equipment	250,0
St. Vincent Hospital, Billings, MT, for facilities and equipment	250,0
State of Maryland, Baltimore, MD, for facilities and equipment related to emergency care	1,250,0
Straub Hospital Burn Center, Honolulu, HI, for facilities and equipment	150,0
emple University Health System, Philadelphia, PA, for facilities and equipment	100,0
eton Valley Hospital, Driggs, ID, for facilities and equipment	100,0
exas Children's Hospital, McAllen, TX, for education and outreach programs at the Vannie E. Cook Jr.	
Children's Cancer and Hematology Clinic	250,0
exas Health Institute, Austin, TX, for emergency response initiative, including purchase of equipment	200,0
exas Medical Center, Houston, TX, for facilities and equipment	650,0
exas Tech University Health Sciences Center, Austin, TX, for facilities and equipment	200,0
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	Wesley College, Dover, DE, for facilities and equipment related to nurse training	200,000
		250,000
West Virginia Northern Community College, Weirton, WV, for facilities and equipment related to health professions training		3,000,000

	Amount
West Virginia University Health Sciences, Morgantown, WV, for facilities and equipment	1,000,000
West Virginia University, Morgantown, WV, for the construction of a Multiple Sclerosis Center	2,300,000
Western Kentucky University, Bowling Green, KY, for facilities and equipment	2,500,000
Whatley Health Services, Greensboro, AL, for facilities and equipment	150,000
Wheeling Jesuit University, Wheeling, WV, for the HealtheWV program, including equipment	2,500,000
White River Medical Center, Batesville, AR, for facilities and equipment	500,000
Whittemore-Peterson Institute for Neuro-Immune Disease, Sparks, NV, for facilities and equipment	1,000,000
Williamsport Hospital, Williamsport, PA, for facilities and equipment	100,000
Woman's Christian Association Hospital, Jamestown, NY, for facilities and equipment	150,000
Yankton Sioux Tribe, Marty, SD, for facilities and equipment related to dialysis care	100,000

Telehealth

The Committee provides \$15,000,000 for telehealth activities. The budget request for fiscal year 2011 was \$11,600,000. The fiscal year 2010 comparable level was \$11,575,000. The telehealth program promotes the effective use of technologies to improve access to health services for people who are isolated from healthcare and to provide distance education for health professionals.

Program Management

The Committee provides \$154,808,000 for program management activities for fiscal year 2011. The fiscal year 2010 comparable level was \$147,052,000 and the budget request for fiscal year 2011 was \$153,808,000.

Within the total provided, the Committee has included \$1,000,000 for a GAO study on hospital contract management. The Committee recognizes the challenges that rural and safety-net hospitals face in managing contracts, including contracts for health professional services, information technology, supplies and pharmaceuticals. The Committee intends the GAO study to analyze the potential cost savings these hospitals can realize from the use of electronic contract management, in particular any possible savings to public assistance programs like Medicare and Medicaid. Electronic contract management provides for the construction of a database to administer the contracts necessary for hospital operations and to provide comprehensive Web-based access to such database through a software-as-a-service application. The Committee expects a recommendation from the GAO on the efficacy of an electronic contract management service for rural, safety-net hospitals, especially those hospitals participating in disproportionate share hospital payments under the Medicaid and Medicare programs.

HEALTH EDUCATION ASSISTANCE LOANS PROGRAM

The Committee has transferred the administration of the Health Education Assistance Loans program to the Department of Education, as proposed in the President's budget. The fiscal year 2010 comparable level was \$2,847,000.

VACCINE INJURY COMPENSATION PROGRAM TRUST FUND

Appropriations, 2010	\$122,410,000
Budget estimate, 2011	122,410,000
Committee recommendation	122,410,000

The Committee provides that \$122,410,000 be released from the vaccine injury compensation trust fund in fiscal year 2011, the

same as the comparable level in fiscal year 2010 and the budget request for fiscal year 2011. Of that amount, \$6,502,000 is for administrative costs.

The National Vaccine Injury Compensation program provides compensation for individuals with vaccine-associated injuries or deaths. Funds are awarded to reimburse medical expenses, lost earnings, pain and suffering, legal expenses, and a death benefit. The vaccine injury compensation trust fund is funded by excise taxes on certain childhood vaccines.

COVERED COUNTERMEASURE PROCESS FUND

Appropriations, 2010	
Budget estimate, 2011	\$2,500,000
Committee recommendation	2,500,000

The Committee provides \$2,500,000 for the administration of the Covered Countermeasure Process fund and for costs under the Smallpox Emergency Personal Protection Act of 2003. The fiscal year 2011 budget request was \$2,500,000. The fiscal year 2010 appropriation did not include funds for this purpose.

The Covered Countermeasure Process fund provides compensation for individuals injured from the manufacture, administration, or use of countermeasures that the Secretary has declared necessary to respond to a public health threat. Funds are available until expended.

CENTERS FOR DISEASE CONTROL AND PREVENTION

DISEASE CONTROL, RESEARCH, AND TRAINING

Appropriations, 2010	\$6,804,946,000
Budget estimate, 2011	6,891,695,000
Committee recommendation	6,905,810,000

The Committee provides a program level of \$6,905,810,000 for the Centers for Disease Control and Prevention [CDC]. The Committee recommendation includes \$6,527,235,000 in discretionary budget authority, an additional \$138,358,000 via transfers available under section 241 of the Public Health Service Act, an additional \$55,358,000 in mandatory funds and assumes \$184,859,000 in balances from Public Law 111–32 in accordance with the budget request. In addition, the Committee recommends \$663,000,000 be transferred to the CDC from the Prevention and Public Health Fund. The fiscal year 2010 comparable program level was \$6,804,946,000, and the program level budget request for fiscal year 2011 was \$6,891,695,000.

The activities of the CDC focus on several major priorities: providing core public health functions; responding to urgent health threats; monitoring the Nation's health using sound scientific methods; building the Nation's health infrastructure to insure our national security against bioterrorist threats; assuring the Nation's preparedness for emerging infectious diseases and potential pandemics; promoting women's health; and providing leadership in the implementation of nationwide prevention strategies to encourage responsible behavior and adoption of lifestyles that are conducive to good health.

The Committee is aware that the CDC began reorganizing itself in August 2009 and the reorganization took place in fiscal year 2010. That reorganization is largely complete; personnel have been moved and new leadership positions have been filled. Despite repeated requests, the Committee has yet to receive a reprogramming notification that would align the budget with the reorganization. Therefore, the recommendation that follows reflects the structure of the CDC Centers as they existed in fiscal year 2009. In addition, the Committee has included enacted figures in the internal funding tables in order to provide a better frame of reference as programs experience transfers, reorganizations and reprogrammings over the course of fiscal year 2010.

NATIONAL CENTER FOR IMMUNIZATION AND RESPIRATORY DISEASES

The Committee has included a program level of \$735,807,000 for the activities of this Center in fiscal year 2011. The comparable level for fiscal year 2010 was \$718,460,000. The budget request for fiscal year 2011 included \$579,463,000 for this Center. The Committee recommendation includes \$12,864,000 in transfers available under section 241 of the Public Health Service Act and \$116,344,000 in transfers from Public Law 111–32 in accordance with the budget request.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
Section 317 Immunization Program	496,847	511,062	511,062
Vaccine Purchase Grants	261,977	289,546	289,546
State Infrastructure Grants	234,870	221,516	221,516
Program Operations	62,621	65,630	65,630
National Immunization Survey (PHS Evaluation Transfers) (non-			
add)	12,864	12,864	12,864

Immunization.—The Committee supports the expansion of the section 317 immunization program contained in the Patient Protection and Affordable Care Act, and encourages the CDC to publish guidance expeditiously. The Committee requests that the CDC identify in the fiscal year 2012 budget justification a detailed breakdown of adult vaccines purchased by the States using the new authority. The Committee encourages the CDC to create and manage a broad public education campaign targeted at improving adult immunization rates, with active participation by and collaboration with State and local public health departments. The Committee further encourages the CDC to increase its capacity to measure adult immunization coverage rates and support enhanced development, interoperable functionality, and use of State and regional immunization registries and/or take advantage of advances in electronic medical health records.

Influenza.—The Committee recommendation includes \$159,115,000 for influenza activities, of which \$116,344,000 is assumed to be transferred from Public Law 111–32 balances, consistent with the budget request. However, the Committee is concerned by the administration's proposal to use previously appropriated emergency funds to pay the salaries of the scientists and staff in the Influenza Division of this Center. Therefore, the Committee has provided \$40,000,000 in budget authority for the pandemic influenza program. The Committee intends these funds to be used to pay the costs of FTE.

NATIONAL CENTER FOR ZOONOTIC, VECTOR BORNE, AND ENTERIC DISEASES

The Committee includes \$80,488,000 for fiscal year 2011 for this Center. The comparable fiscal year 2010 level was \$76,647,000 and the fiscal year 2011 budget request was \$58,027,000. This Center provides outbreak investigation, infection control and scientific evaluations of zoonotic, vector borne, and enteric diseases; and conducts food-borne illness surveillance and investigation.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

Budget activity	Fiscal year 2010	Fiscal year 2011	Committee
	enacted	request	recommendation
Vector-borne Diseases Lyme Disease Food Safety Chronic Fatigue Syndrome	26,717 8,938 26,942 4,825	9,055 35,195 4,598	26,717 10,000 35,195 4,825

Chronic Fatigue Syndrome.—The Committee urges the CDC to follow recommendations made by the CFS Advisory Committee and the 2008 peer review panel to prioritize laboratory efforts aimed at the identification of diagnostic subtypes and therapeutic biomarkers with increasing efforts in viral etiology. Intervention, including vaccination studies, against pathogens with known associations with CFS should be pursued in collaboration with other agencies and investigators to support genetic, genomic and intervention studies. The Committee continues to support efforts to make data accumulated since 1984 by the CFS research program available to outside researchers to maximize the value of this data.

Food Safety.—The Committee strongly supports the administration's proposal to expand food safety surveillance. In particular, the Committee believes that efforts to improve multi-jurisdictional outbreak investigations are crucial to improving the safety of the Nation's food. Further, the Committee believes that PulseNet should be a model program at the CDC for the way in which it allows officials at the Federal, State and local levels to submit and view information on outbreaks that are happening or could be happening within their jurisdictions.

Prion Diseases.—The Committee has not included funding specifically for prion diseases. The fiscal year 2010 enacted level was \$5,474,000 and the President requested \$5,390,000 for this activity. Prion diseases are most often transmitted through food. The Committee has increased funding for food safety efforts by the CDC and intends that surveillance for prion diseases be incorporated into the national food safety detection and control programs.

Vector Borne Disease.—The Committee has rejected the administration's proposal to eliminate funding for research and surveillance of vector-borne disease. The Committee notes that recent natural disasters like hurricanes or floods result in unavoidable pools of standing water that are breeding grounds for mosquitoes, and changes in weather patterns extend the areas in our country that are hospitable to mosquitoes. For these reasons, the Committee believes it would be irresponsible to eliminate funding to track vector borne diseases and premature to cancel research on prevention methods.

NATIONAL CENTER FOR HIV, VIRAL HEPATITIS, STD, AND TB PREVENTION

The Committee includes \$1,072,004,000 for the activities at this Center in fiscal year 2011. The fiscal year 2010 level was \$1,045,382,000 and the fiscal year 2011 budget request was \$1,083,286,000. The Committee has included funding for the following activities at the following amounts:

ĺln	thousands	of	dollars]	

Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
Domestic HIV/AIDS Prevention and Research	727,980	758,540	746,04
HIV Prevention by Health Departments	328,887	343,062	328,88
HIV Surveillance	109,455	109,113	109,45
National/Regional/Local/Community/Other Organizations	134,793	135,052	134,79
Enhanced HIV Testing	65,273	63,680	65,27
Improving Program Effectiveness	89,572	107,633	107,63
Viral Hepatitis	19,259	21,107	21,10
Sexually Transmitted Diseases	153,875	160,588	160,58
Tuberculosis	144,268	143,051	144,26

Hepatitis Testing.—The Committee recognizes the high incidence of hepatitis and its often undocumented state. In fiscal year 2010, the Committee requested the CDC to formulate a plan for significant testing for hepatitis, including the implementation of rapid testing technology as a means of ascertaining the prevalence of hepatitis and updating its testing guidelines. The Committee encourages the development of a pilot testing program to enhance this effort.

HIV Prevention.—The Committee fully supports the goals of the National HIV/AIDS Strategy. Racial and ethnic minorities, men who have sex with men [MSM], and women are disproportionately affected by HIV in the United States. The Committee encourages the CDC to expand the range of interventions available through the Diffusion of Evidence-based Interventions program by increasing support for the development of promising "home grown interventions" that can be rapidly evaluated and disseminated into the field. The Committee also encourages the CDC to increase technical assistance and training activities to community-based organizations involved in adapting promising evidence-based interventions to new settings.

HIV/AIDS Surveillance.—The Committee commends ongoing efforts by the CDC to enhance HIV/AIDS surveillance activities that monitor the HIV/AIDS epidemic and provide data for targeting the delivery of HIV prevention, care, and treatment services.

HIV Testing.—The Committee commends ongoing efforts by the CDC to expand HIV testing among African Americans in clinical

settings and encourages health departments to work with community-based organizations to expand testing in nonclinical settings.

İmproving Program Effectiveness.—The Committee commends the CDC efforts to improve the effectiveness of existing HIV prevention programs and to develop new tools for HIV prevention. Within the total provided, \$10,000,000 is for efforts to integrate data in ways that improve program performance. Special Populations.—Recent CDC reports have shown that MSM

account for more than one-half of all new HIV infections each year, with African-American MSM making up a disproportionate share of these infections, and that MSM are 44 times more likely to acquire HIV than other men. The Committee urges the CDC to enhance prevention programs tailored to gay and bisexual men that inte-grate behavioral and biomedical interventions, community-level interventions, and structural interventions to shift social norms in

support of safer sex and family acceptance of young gay men. Viral Hepatitis.—The Committee is aware of the January 2010 Institute of Medicine report that outlined a national strategy for prevention and control of hepatitis B and C. Therefore, the Committee encourages the CDC to address the report's recommendations and continue to validate interventions focused on the motherchild transmission issue. Also, as the hepatitis B virus is the single greatest health disparity impacting the Asian and Pacific Islander populations in the United States, the Committee urges a targeted and increased effort to address this issue, including the funding of replicable demonstration projects to help reach these populations.

NATIONAL CENTER FOR PREPAREDNESS, DETECTION AND CONTROL OF INFECTIOUS DISEASES

The Committee includes \$168,689,000 for fiscal year 2011 for this Center. The fiscal year 2010 level was \$168,689,000 and the budget request for fiscal year 2011 was \$192,075,000. In addition, the Committee recommends \$50,000,000 in transfers from the Prevention and Public Health Fund. This Center builds epidemiology and laboratory capacity and provides technical assistance to identify and monitor infectious diseases.

The Committee recommendation provides sufficient funding to

maintain all existing activities at the fiscal year 2010 enacted level. Epidemiology and Laboratory Capacity [ELC] Grants.—The Com-mittee includes \$50,000,000 for ELC grants from amounts transferred from the Prevention and Public Health Fund. The Committee has included bill language exempting the awards from statutory funding floors that exceed the transferred amount. The administration transferred \$20,000,000 for this purpose in fiscal year 2010. The Committee is aware that the number of genetic and metabolic disorders included in State newborn screening programs ranges from 4 to 36 and that most States screen for 8 or fewer disorders. Tandem mass spectrometry has greatly increased the number of disorders that can be detected, but States have varying resources to acquire this technology. The Committee encourages the CDC to consider bulk purchasing to increase States' ability to utilize this life-saving technology.

Lyme Disease.—The Committee requests that the CDC report on its implementation of its Lyme disease plan. In particular, the report should include details on grants on diagnostic methods, longterm complications, plans to support community-based Lyme disease prevention and control programs, and the development of Lyme disease education for physicians and communities. The Committee is supportive of innovative advancements and technologies that provide opportunities for improved diagnostics beyond the technologies employed today.

NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

The Committee recommends \$931,154,000 for chronic disease prevention and health promotion. The comparable level for fiscal year 2010 was \$931,154,000 and the budget request for fiscal year 2011 was \$937,307,000. In addition, the Committee recommends \$542,000,000 in transfers from the Prevention and Public Health Fund.

Chronic diseases are the most prevalent and costly healthcare problems in the United States, but are often preventable. Nearly half (45 percent) of all Americans suffer from at least one chronic disease. More than two-thirds of all deaths are caused by one or more of five chronic diseases: heart disease, cancer, stroke, chronic obstructive pulmonary disease, and diabetes. Many chronic diseases are lifelong conditions, and their impact lessens the quality of life not only of those suffering from the diseases, but also of their family members, caregivers, and others.

Chronic disease not only affects health and quality of life, but is also a major driver of healthcare costs and threatens healthcare affordability. Research from the CDC indicates that chronic disease accounts for about 75 percent of the Nation's aggregate healthcare spending—or about \$5,300 per person in the United States each year. In taxpayer-funded programs, treatment of chronic disease constitutes an even larger proportion of spending—96 cents per dollar for Medicare and 83 cents per dollar for Medicaid. Much of the persistent increase in spending over the past two decades is attributable to rising disease prevalence, lower clinical thresholds for treatment, and new medical innovations that have emerged to treat chronic and other diseases.

Unhealthy behavior and increased incidence of chronic disease are also extremely costly in terms of healthcare coverage affordability. Since 2000, health insurance premiums for employer-sponsored family coverage have increased by 87 percent. Healthcare costs for people with a chronic condition average \$6,032 annually five times higher than for those without such a condition.

For these reasons, the Committee has included a major initiative in fiscal year 2011 to transform the chronic disease activities undertaken by the CDC in cooperation with State health departments.

Currently, CDC funding to help States plan their approaches to addressing many of these chronic diseases is allocated through competitive, discrete, State-based programs. In fact, many States have received funding from the CDC to create separate plans for up to 4 of the 5 top chronic diseases, with only chronic obstructive pulmonary disease not directly funded. With the exception of the comprehensive cancer program, each of the other State funding streams has nearly identical target populations and largely overlapping public health interventions. Yet the programs that fund and manage these State plans have remained separate and distinct.

The States and the CDC have long struggled with how to coordinate these separate programs through a variety of management devices. The President's budget, for example, includes statutory authority to allow States to redirect 10 percent of their CDC chronic disease funds to supplement any other CDC grant on chronic disease that addresses the top five chronic diseases in that State.

Compounding the problem, the amount of funding available to States to create or implement their multiple chronic disease plans have been far less than needed. Heart disease and stroke plans are being implemented in only 14 States. Nine of the remaining 36 States did not receive any funding in fiscal year 2010 to create a plan. Diabetes plans, meanwhile, were created in every State, but only one State has more than \$1,000,000 to address a disease that currently affects nearly 24 million Americans and will soon strike an estimated 57 million more.

The Committee believes that the time is long past for a comprehensive approach to chronic disease, in particular, those chronic diseases for which obesity is the prime risk factor. Therefore, the Committee recommendation includes new bill language creating a State block grant for chronic disease that will consolidate several of the individual existing chronic disease programs. The Committee believes that this new approach will increase efficiency at the State level by breaking down the "silos" that currently divide each program. In addition, the Committee recommendation includes substantially more funding for the block grant than is currently available for the various programs combined. This increase will ensure that States receive funding to address all of the top obesity-related chronic diseases, rather than apply to the CDC for competitive funds for each one.

The Committee includes \$687,151,000 for chronic disease efforts by the CDC, including \$410,000,000 from the Prevention and Public Health Fund. The comparable fiscal year 2010 funding level was \$301,327,000. Within this total, \$308,978,000 is for community grants, \$251,000,000 is for a new chronic disease block grant, \$75,723,000 is for national activities, and \$51,450,000 is for CDC leadership activities.

Community Grants

The Committee includes \$308,978,000 for community grants, including \$270,000,000 in transfers from the Prevention and Public Health Fund. This amount includes \$220,000,000 for the community transformation grants authorized under section 4201 of the Patient Protection and Affordable Care Act [PPACA] and \$88,978,000 for the Racial and Ethnic Approaches to Community Health [REACH] program.

The Committee intends the increase in the REACH program primarily to increase the efforts of existing Action communities. The Committee is particularly interested in ensuring that REACH communities are taking full advantage of all the preventive benefits included in the PPACA. The Committee has not included funding for the Healthy Communities program with the intention that the CDC should use community transformation grants funds to complete all obligations made under that program. Within the community transformation grants, the Committee directs the CDC to give full and fair consideration to nonprofit organizations that have pioneered effective models for community transformation in cooperation with the CDC.

The Committee has not included specific funding for the administration's proposed Big Cities Initiative. The budget for fiscal year 2011 proposed \$20,000,000 for this initiative. The Committee intends that funding for the community transformation grants be structured in such a way that all communities may fully participate. For that to happen, the Committee is strongly supportive of efforts to ensure that municipal areas compete with areas of similar size.

State Grants

The Committee recommendation includes \$251,000,000, including \$140,000,000 from the Prevention and Public Health Fund, to create a Chronic Disease block grant. Of this amount, \$25,000,000 is available until September 30, 2012.

Included in this block grant are existing State grant programs on diabetes; heart disease, and stroke; nutrition, physical activity, and obesity; arthritis; and school health, which totaled \$111,000,000 in fiscal year 2010. Sufficient funding is included at the Committeerecommended level for every State to receive more funding from the block grant than it currently receives from the individual programs combined.

The goal of the block grant shall be to decrease the incidence of preventable chronic diseases through surveillance, planning, policy change, and the implementation of evidence-based public health interventions. Funds may be awarded to States, the District of Columbia, territories, and tribal nations.

Of the amounts provided, \$226,000,000 shall be awarded by formula based on rates of chronic disease and population to create and implement a comprehensive chronic disease plan. No State shall receive less than \$2,000,000.

In addition, \$25,000,000 shall be awarded competitively for bonus payments. In the first year of this initiative, bonus payments shall be awarded based on a review of the strength of the comprehensive plan submitted. The Committee has included 2-year availability for these funds to ensure that entities have sufficient time to complete quality plans. In subsequent years, a bonus payment shall be awarded to any State that achieves a goal from the comprehensive plan or enacts a major policy change in line with the comprehensive plan.

The strength of the plan shall be determined by reviewing the degree to which the plan includes:

- -Active participation from the State Departments of Public Health, Education, Human Services, Aging and Transportation;
- —An assessment of the burden of chronic disease in the State, a review of the existing programs and strategies in place, and a plan for ongoing surveillance for chronic diseases;

—A review of and a plan to increase the number, reach, and quality of policies and standards related to chronic disease;

- --Implementation and evaluation plans for culturally appropriate, evidence-based interventions and prevention strategies aimed at reducing the top chronic diseases related to obesity, including but not limited to: diabetes, heart disease, stroke, and arthritis;
- -Efforts to address special populations currently impacted by chronic disease and those at particular risk for future chronic diseases (i.e., people with disabilities, racial and ethnic populations, school-age youth, seniors, etc.);
- -A plan for increasing public awareness of chronic disease and prevention options;
- —An effort to increase collaboration between community, public and private sector partners, including the engagement with health professionals to increase screening, referral to treatment and connections with public health interventions; and
- A plan to increase access to and use of environments to support healthful eating and physical activity in various settings;

National Activities on Chronic Disease

The Committee includes \$75,723,000 for national activities on chronic disease. This funding includes research, demonstration programs, outreach, surveillance and evaluation efforts.

Arthritis.—The Committee is aware of the work by the CDC and stakeholders to develop a national public health agenda for osteo-arthritis. This effort will use evidence-based strategies to prevent and reduce the burden of osteoarthritis, which today affects more than 27 million Americans.

Diabetes.—The Committee recognizes that approximately onethird of people with diabetes do not know that they have it, while another 57 million have pre-diabetes and are at high risk for developing this deadly disease. The Committee is impressed by the success of the National Diabetes Prevention program and is encouraged by private-sector implementation of this evidence-based model. The Committee encourages the CDC to continue expanding this model through public and private efforts including wide-spread distribution of training standards and models for training programs. The Committee further encourages the CDC to continue translating research findings into clinical and public health practice; supporting the National Diabetes Education Program; and strengthening public health surveillance. The Committee feels strongly that CDC efforts to develop, advance, and implement innovative interventions and national programs will improve diabetes outcomes and prevent diabetes.

Diabetes in Native Americans/Native Hawaiians.—The high incidence of diabetes among Native American, Native Alaskan, and Native Hawaiian populations persists. The Committee is pleased with the CDC's efforts to target this population and assist the leadership of the Native Hawaiian and Pacific Basin Islander communities in addressing this disease. The Committee encourages the CDC to build on its historical efforts in this regard.

Diabetes and Women's Health.—The Committee is concerned by the rising incidence of type 2 diabetes mellitus. Although the onset of type 2 diabetes can be prevented or delayed through prevention methods, obstetricians and other women's healthcare providers and their patients are often unaware of the woman's later risk and need for followup and preventive measures. Less than one-half of women with gestational diabetes receive recommended glucose testing at a postpartum visit. The Committee encourages the CDC to promote education and awareness among both patients and providers.

Heart Disease and Stroke.—The Committee has included sufficient funding within chronic disease national activities to maintain the CDC's Paul Coverdell National Acute Stroke Registry. In addition, the Committee is supportive of the effort to establish a cardiovascular disease surveillance system to monitor and track these disorders at the national, State, and local levels. The Committee further notes that the CDC has developed an "ABCS" Initiative, which promotes appropriate, low-dose aspirin therapy, improved high blood pressure and cholesterol control and prevention, and smoking avoidance and cessation. The Committee urges the CDC to continue its work with communities, other Federal agencies, and food manufacturers to reduce sodium in food, thus helping control heart disease and stroke.

The Mississippi Delta Region experiences some of the Nation's highest rates of chronic diseases, such as diabetes, hypertension, obesity, heart disease, and stroke. The Committee recognizes CDC's expertise in implementing research and programs to prevent the leading causes of death and disability. The Committee recommendation for chronic disease national activities provides a total of not less than \$5,000,000 to expand CDC's background community assessment of health and related social and environmental conditions in the Delta.

Within the total provided for the National Center for Chronic Disease Prevention and Health Promotion, the following amounts are available for the following categories of funding:

dollars]

	Final year 2010	Finand upor 2011	Committee
Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	recommendation
Office of Smoking and Health	110,704	107,214	197,214
Prevention and Public Health Fund Transfer (non-add)	14,500		90,000
Health Promotion	29,856	26,724	29,866
BRFSS	7,316	7,179	7,316
Community Health Promotion	6,468	6,365	6,468
Sleep (non-add)	861	845	861
Mind-Body Institute	1,500		1,500
Glaucoma	3,519	3,524	3,524
Visual Screening Education	3,229	3,234	3,234
Alzheimer's Disease	1,846	1,813	1,846
Inflammatory Bowel Disease	686		686
Interstitial Cystitis	660		660
Excessive Alcohol Use	2,500	2,474	2,500
Chronic Kidney Disease	2,132	2,135	2,132
Prevention Centers	33,675	33,136	43,675
Prevention and Public Health Fund Transfer (non-add)			10,000
Cancer Prevention and Control	370,346	355,152	385,177
Breast and Cervical Cancer	214,850	210,935	217,550
WISEWOMAN—Total (non-add)	20,787	20,787	20,787
Breast Cancer Awareness for Young Women	5,000	5,006	5,000
Cancer Registries	51,236	51,303	54,000
Colorectal Cancer	44,532	44,590	44,590

79

[In thousands of dollars]

20,693 6,807 5,707 13,638	20,730	30,000
5,707	5,714	C 007
		6,807
13,638		5,707
	13,656	13,638
2,190	2,200	2,190
4,677		4,677
1,016	1,018	1,018
15,000	14,607	25,000
44,782	55,643	46,782
2,005	2.008	2.008
207	207	207
-		1
		30.000
		2,000
7 976	7 817	7.976
.,		4,505
,		1,500
,	,	12.308
	7,976 4,505 1,500 12,308	4,505 4,425 1,500 1,498

Aortic Aneurysms.—The Committee notes the release of new treatment guidelines for the management of aortic aneurysms by leaders in the professional cardiology community. The Committee encourages the CDC to raise awareness of the guidelines, which are of importance to millions of patients suffering from familial aortic aneurysms, Marfan syndrome, and other related conditions.

Autoimmune-related Disease.—Correct diagnosis of autoimmune diseases often takes more than 4 years and approximately four doctors. The Committee recognizes the importance of increased awareness for early intervention and treatment of autoimmune disease. The Committee also recognizes the chronic nature of autoimmune disease and the importance of targeting minority communities and women that may be underserved or disproportionately affected by autoimmune diseases.

Cancer Screening.—The Committee is aware that CDC's cancer screening programs cover only 1 in 10 eligible Americans and is strongly supportive of the dramatic expansion of preventive screening coverage authorized under the recent health reform legislation. The Committee has included additional funding with the intention that it be used to ensure that community-based screening programs are able to effectively transition from grant funding to reimbursement based care. The Committee requests the CDC to submit to the Committee no later than 8 months from enactment of this act a plan for ensuring that CDC-funded screening programs are able to be reimbursed by the new high-risk pools and private insurers. The plan should include projections for the number and proportion of screenings conducted by grant funds, Medicare, Medicaid, high-risk pools, private insurance, and by other funding sources over the next 5 years.

Childhood Cancer.—The Committee is pleased with the efforts the CDC has undertaken to implement the Conquer Childhood Cancer Act, which requires the CDC to track the epidemiology of pediatric cancer in a comprehensive nationwide registry. Additional funding is included in the Committee recommendation to continue the development of rapid reporting and simplifying the procedure for biomedical researchers to utilize registry data. The Committee is hopeful that these improvements will strengthen the registry for all forms of cancer.

Chronic Obstructive Pulmonary Disease.—COPD is the fourth leading cause of death in the United States and the only 1 of the top 5 causes of death that is on the rise. The Committee encourages the CDC to develop, in consultation with appropriate stakeholders, a Federal plan to respond to this disease.

Chronic Pain Conditions in Women.—The Committee encourages the CDC to build on its previous related epidemiological work to undertake a study of the prevalence, overlapping nature, and shared risk factors of chronic pain conditions which solely or disproportionately impact women, including vulvodynia, TMJ disorders, endometriosis, fibromyalgia, interstitial cystitis, and chronic fatigue syndrome. The Committee further encourages the CDC to educate the public about the seriousness and societal costs of these conditions; make available and promote sources of reliable information on the symptoms, diagnosis, treatment, and overlapping nature of the conditions; and make available information to women with chronic pain about how to communicate effectively with their health professionals about these conditions.

Community Health Worker Demonstration.—The Committee recommendation includes \$30,000,000 in transfers from the Prevention and Public Health Fund for grants to hire community health workers, newly authorized in the Patient Protection and Affordable Care Act [PPACA]. The Committee encourages the CDC to prioritize applications that include increasing awareness of the new preventive benefits covered in the PPACA.

Deep Vein Thrombosis [DVT] and Pulmonary Embolism [PE].— The Committee believes that public education and awareness are key to reducing the death rate blood clots that form in the legs [DVT] and then travel to the lungs [PE]. Therefore, the Committee encourages the CDC to expand its efforts to increase public and health provider awareness about the causes and prevention of DVT and PE, expand surveillance activities, and stimulate research.

Epilepsy.—The Committee strongly supports the CDC epilepsy program, which has made considerable progress over the past decade in establishing and advancing a public health agenda to meet the needs of Americans with epilepsy. This funding allows for national programs to improve the lives of youth, seniors, young adults and others living with epilepsy; research activities that promote self-management and improved quality of life for people with epilepsy; and epidemiologic and surveillance research to improve understanding of the causes and prevalence of epilepsy among higherrisk subpopulations, as well as their needs and ability to access quality care.

Excessive Alcohol Use.—The Committee applauds the work being done by the CDC to prevent underage and excessive alcohol use and encourages the development of tools that will support the translation of prevention strategies that have been shown to be effective through scientific reviews into public health practice.

Inflammatory Bowel Disease [IBD].—The Committee continues to prioritize CDC's inflammatory bowel disease epidemiology study and has included funding to continue current research focused on the etiology of IBD, why the course of illness varies among individuals, and what factors may improve patient outcomes.

Interstitial Cystitis.—The Committee is pleased with CDC's education and awareness campaigns on interstitial cystitis. Funding is included to continue education outreach activities to healthcare providers.

Office of Smoking and Health.—The Committee includes \$197,214,000 for the Office of Smoking and Health, including \$90,000,000 in transfers from the Prevention and Public Health Fund. The Committee has long recognized that efforts to reduce to-bacco use are among the most effective and cost-effective investments in prevention that can be made.

The Committee is pleased with the work of the Environmental Health Laboratory's effort to analyze tobacco products and cigarette smoke, and believes this work will only grow in importance as the FDA continues to implement the Family Smoking Prevention and Tobacco Control Act. The Committee expects the Office of Smoking and Health to transfer no less than the amount it did in fiscal year 2010 to the Environmental Health Laboratory to support this work. The Committee notes that this transfer is to be provided to the lab in a manner that supplements and in no way replaces existing funding for tobacco-related activities.

The Committee has included \$55,000,000 through the Prevention and Public Health Fund for a media campaign to prevent tobacco use in youth. In addition, the Committee has long supported counseling through quitlines, and has increased funding for quitlines by \$15,000,000 through the Prevention and Public Health Fund.

To complement the efforts of the quitlines, the Committee is recommending \$20,000,000 for a new demonstration program on providing expanded smoking cessation services to low-income and uninsured individuals. The Committee intends for the CDC to coordinate the existing quitlines and the new cessation program so that individuals with the hardest struggle can avail themselves of the best chance of success. The Committee requests to be briefed on the program model prior to funds being announced.

Oral Health.—The Committee understands that preventing oral disease through broad-based community programs can ultimately result in significant cost savings. The Committee has increased funding for the Division of Oral Health to invest in community prevention of oral disease and to expand its program to States to strengthen their oral health infrastructure programs. The Committee remains concerned about the high incidence of tooth decay among American Indian/Alaska Native [AI/AN] children and therefore encourages the Division to collaborate with the Indian Health Service to assess the current Early Childhood Caries [ECC] epidemiology in AI/AN children. The Committee encourages the CDC to identify and fill strategic information gaps about age of onset, prevalence, severity and microbiology to improve and accelerate existing and novel approaches to prevent ECC and reduce the large disproportionate disease burden in Native American children.

Prevention Outreach.—The Committee includes \$2,000,000 for the education and outreach campaign authorized in section 4004 of the Patient Protection and Affordable Care Act, funded through transfers from the Prevention and Public Health Fund. Prevention Research Centers.—The Committee recommendation includes \$43,675,000 for the Prevention Research Centers, including \$10,000,000 in transfers from the Prevention and Public Health Fund. The Committee intends the additional funding be used to expand existing centers and create new centers.

Primary Immune Deficiency Diseases.—The Committee remains strongly supportive of this program and believes it has demonstrated success in identifying, and moving into treatment, persons with undiagnosed diseases that pose a public health threat.

Psoriasis.—As many as 7.5 million Americans are affected by psoriasis and/or psoriatic arthritis—chronic, inflammatory, painful, and disfiguring autoimmune diseases for which there are limited treatment options and no cure. Recent studies show that people with psoriasis are at elevated risk for other chronic and debilitating health conditions, such as heart attack, diabetes, Crohn's disease, obesity, and liver disease, and that people with severe psoriasis have a 50 percent higher risk of mortality. The Committee encourages the CDC to continue to refine and implement the psoriasis and psoriatic arthritis data collection and registry process.

Pulmonary Hypertension.—The Committee notes the significant increase in FDA-pproved therapies for pulmonary hypertension in recent years and encourages the CDC to expand awareness of the disease and its new treatment options among the general public and healthcare providers.

Safe Motherhood/Infant Health.—The Committee is concerned about late preterm infants, who are at greater risk of morbidity and mortality, and it encourages the CDC to expand work in this area and to improve national data systems to track preterm birth rates and expand epidemiological research that focuses especially on the causes and prevention of preterm birth and births at 37– 38 weeks gestation.

Stillbirths.—The Committee is aware that there are more than 25,000 stillbirths and more than 4,000 Sudden Unexpected Infant Deaths [SUIDs] each year. In addition, in 2006 about 1 in 11 newborns were late preterm in the United States—an increase of 20 percent from 1996. Late preterm births make up 71 percent of all preterm births, and late preterm infants are at greater risk of morbidity and mortality. The Committee believes the CDC should continue to research and evaluate these issues. The Committee includes additional funding within the Safe Motherhood funding to improve and expand national and state data systems to track stillbirth, SUIDs, and preterm birth rates and expand epidemiological research that focuses especially on the causes and prevention of stillbirth, SUIDs, and preterm births.

Vision Health.—The Committee recognizes that good vision is an integral component to health and well-being, affects virtually all activities of daily living, and impacts individuals physically, emotionally, socially, and financially. Vision-related conditions affect people across the lifespan from childhood through elder years. The Committee supports the Vision Health Initiative, which aims to improve State-based public health approaches to address vision and eye health; research on evidence-based public health interventions; and initiatives to address the growing problem of diabetes among children and the associated impacts of diabetic retinopathy, which can develop later in life.

Well-integrated Screening and Evaluation for Women Across the Nation [WISEWOMAN].—WISEWOMAN screens uninsured and under-insured low-income women ages 40 to 64 for heart disease and stroke risk and provides counseling, education, referral and followup to those with abnormal results. From 2000 to mid-2008, WISEWOMAN reached more than 84,000 low-income women, provided more than 210,000 lifestyle interventions, and identified 7,647 new cases of high blood pressure, 7,928 new cases of high cholesterol, and 1,140 new cases of diabetes. Among those participants who were re-screened 1 year later, average blood pressure and cholesterol levels had decreased considerably.

NATIONAL CENTER ON BIRTH DEFECTS, DEVELOPMENTAL DISABILITIES, DISABILITY AND HEALTH

The Committee includes \$145,289,000 for birth defects, developmental disabilities, disability, and health in fiscal year 2011. The comparable level for fiscal year 2010 was \$143,347,000 and the fiscal year 2011 budget request was \$143,539,000.

Within the total provided, the following amounts are provided for the following categories of funding:

Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
Birth Defects and Developmental Disabilities	64,697	65,442	71,613
Birth Defects	21,342	20,819	26,492
Prevention and Public Health Fund Transfer (non-add)			5,000
Craniofacial Malformation (non-add)	1,878	1,882	2,028
Fetal Death (non-add)	846	848	848
Alveolar Capillary Dysplasia (non-add)	247		24
Fetal Alcohol Syndrome	10,140	9,990	10,14
Folic Acid	3,126	3,110	3,126
Infant Health	8,028	7,696	8,02
Autism	22,061	23,827	23,82
luman Development and Disability	58,759	57,854	66,47
Disability and Health (includes Child Development Studies)	13,611	13,361	18,36
Prevention and Public Health Fund Transfer (non-add)			5,00
Charcot Marie Tooth Disorders	1,000	1,002	1,00
Limb Loss	2,906	2,908	2,90
Tourette Syndrome	1,749	1,749	1,74
Early Hearing Detection and Intervention	10,888	10,689	10,88
Muscular Dystrophy	6,291	6,021	6,02
Special Olympics Healthy Athletes	5,534	5,545	6,00
Paralysis Resource Center		6,886	6,88
Attention Deficit Hyperactivity Disorder	1,751	1,755	1,75
Fragile X	1,905	1,909	1,90
Spina Bifida		6,029	7,00
Congenital Heart Failure			2,00
Public Health Approach to Blood Disorders		20,243	
lemophilia	17,203		17,20

[In thousands of dollars]

Birth Defects Research and Surveillance.—The Committee commends the CDC's work in the area of birth defects surveillance, research, and prevention and has provided \$5,000,000 through the Prevention and Public Health Fund for CDC to analyze genetic samples obtained through the National Birth Defects Prevention Study. The Committee believes it is important to begin analyzing these samples because the identification of genetic risk factors for certain birth defects will further preventive efforts by targeting interventions to women at the highest-risk for certain defects.

Blood Disorders.—The Committee recommendation rejects the administration's proposal to create a new public health approach to blood disorders. The Committee notes that the plan for the new program was significantly delayed and did not adequately address the transition from the current approach to the new structure. The Committee has included sufficient funding to maintain the Hemophilia Treatment Centers at the fiscal year 2010 enacted level. However, the Committee did not restore funding for thallasemia, diamond blackfan anemia or hemachromatosis.

Congenital Disabilities.—The Committee encourages the CDC to continue to increase scientifically sound information and support services provided to patients receiving a positive test result for Down syndrome or other pre- or postnatally diagnosed conditions. The Committee further urges CDC to disseminate current and accurate information about the tested condition; coordinate the provision of, and access to, supportive services for patients and families; and provide assistance to State and local health departments to integrate the results of prenatal testing and pregnancy outcomes into State-based vital statistics and birth defects surveillance programs.

Charcot-Marie-Tooth [CMT] Disorders.—The Committee has included funding to continue the national CMT resource center. This center will foster collaboration between CMT patients and their providers and ensure that patients are being properly diagnosed and treated with the latest standards of care.

Congenital Heart Disease.—Approximately 800,000 children and 1,000,000 adults in the United States are now living with congenital heart disease [CHD], which requires life-long cardiac care. The Committee is concerned that there is a lack of rigorous epidemiological and longitudinal data on individuals of all ages with CHD and has included funding to begin to compile this information. The Committee is particularly interested in information on prevalence, barriers to effective care, survival outcomes, and neurocognitive outcomes.

Craniofacial Malformation.—The Committee includes \$150,000 above last year's funding level for the enrichment of a physician awareness program on craniostosis for its dissemination not only to craniofacial centers throughout the United States, but also to medical schools, pediatricians, and fetal medicine doctors nationwide. This physician awareness program will be developed from already created medical postcard programs with the information and data presented at the March 2010 conference in Atlanta, and will include Web-based courses for pediatricians, nurses, obstetricians and fetal medicine doctors on craniosyntosis to be developed starting in 2011.

Disability and Health.—The Committee recommendation includes \$18,361,000 for disability and health, including \$5,000,000 in transfers from the Prevention and Public Health Fund. The Committee intends the increase to be used to expand research grants into health promotion for people with disabilities.

Folic Acid Education Campaign.—The Committee strongly supports the folic acid education campaign. The Committee encourages the CDC to explore strengthening this campaign by incorporating its message in other prevention education initiatives aimed at improving birth outcomes, such as obesity prevention and medication use during pregnancy.

Fragile X Syndrome.—The Committee has included funding to support the National Fragile X Public Health Initiative.

Hereditary Hemorrhagic Telangiectasia [HHT].—The Committee is aware of a recent conference on HHT and encourages the CDC to review strategies and recommendations from that conference aimed at increasing the knowledge, education, and outreach on this preventable condition.

Maternal Mortality.—The Committee encourages the CDC to address maternal mortality, given that each day two to three women in the United States die from delivery complications. The Committee encourages the CDC to expand its work gathering information on pregnancy-related deaths, collecting and providing information about women's health and behaviors around pregnancy, and translating findings and guidelines on preconception care into everyday practice and healthcare policy.

Obesity Research, Treatment, and Prevention.—Obese pregnant women are at increased risk for poor maternal and neonatal outcome. The Committee urges the CDC to conduct research and interventions to address the increased risk of birth defects and stillbirths in obese women, especially those receiving infertility treatment; ways to optimize outcome in obese women who become pregnant after bariatric surgery; and the increased future risk of childhood obesity in their offspring.

Spina Bifida.—The Committee recognizes that spina bifida is the most common permanently disabling birth defect in the United States. While spina bifida and related neural tube defects are highly preventable through adequate daily folic acid consumption, there are an estimated 166,000 individuals living with all forms of this complex birth defect. The Committee intends the funding provided for the National Spina Bifida Program to be used to support the implementation of a patient registry to improve the efficiency and quality of care.

Tourette Syndrome.—The Committee commends CDC for its work in developing a public health education and research program on Tourette syndrome. The Committee encourages CDC to use these funds to continue to educate physicians, educators, clinicians, allied professionals, and the general public about the disorder and to expand on the scientific knowledge base on prevalence, risk factors, and co-morbidities of Tourette syndrome.

NATIONAL CENTER FOR HEALTH STATISTICS

The Committee recommendation includes \$161,883,000 for the National Center for Health Statistics [NCHS]. This amount is the same as the budget request for fiscal year 2011. The fiscal year 2010 comparable funding level was \$138,683,000.

In addition, the Committee recommendation provides \$34,000,000 in transfers from the Prevention and Public Health Fund. The administration transferred \$20,000,000 for these activities in fiscal year 2010.

Statistics collected by NCHS provide policymakers with critical data to assess the health of the Nation and make informed deci-

sions about how best to direct resources and activities. Health statistics also provide researchers with population-based trends that help identify the best targets for research and the data needed to reach reliable conclusions, and they help enable individuals to make informed choices in their lives and the lives of their families.

National Health and Nutrition Examination Survey [NHANES].—Since 1959, NHANES has provided critical data about the state of the Nation's health. This information has resulted in a number of highly successful public health actions, including removing lead from gasoline and vaccinating all infants and children against hepatitis B infections. While these national data have been extremely important, many of our most pressing public health challenges are faced at the State and local level. The Committee encourages NHANES to consider ways to expand the applicability of NHANES reports to the State and local level.

Sodium.—The Committee is strongly supportive of the work that the CDC is doing to determine the most appropriate method for ongoing surveillance of sodium intake. The Committee requests to be briefed by the CDC on the results of the various survey-design research efforts. The Committee further requests that the briefing include cost estimates for implementation.

Vital Statistics.—The Committee strongly supports the effort to transition vital statistic collection to electronic systems, in particular the effort to phase in electronic death records. The Committee also encourages the CDC to work with the Centers for Medicare and Medicaid Services and the Office of the National Coordinator to pilot test the integration of electronic birth and death records and electronic medical records.

NATIONAL CENTER FOR PUBLIC HEALTH INFORMATICS

The Committee recommendation includes \$67,285,000 for the National Center for Public Health Informatics. The budget request for fiscal year 2011 was \$67,285,000. The comparable level for fiscal year 2010 was \$70,597,000.

The Committee is concerned that, despite approximately \$70,000,000 in appropriations to the informatics division in fiscal year 2010, programs of the CDC routinely contract for informatics support outside the agency. The Committee reiterates its belief that the public health informatics division should serve the programs of the CDC.

Information systems and information technology are critical to the practice of public health. The activities of this Center reflect ongoing efforts to build a national network of public health information systems that will enhance public health partner capabilities in detection and monitoring, surveillance, data analysis and interpretation, and other public health activities.

NATIONAL CENTER ON HEALTH MARKETING

The Committee recommendation includes \$72,180,000 for the National Center for Health Marketing. The budget request for fiscal year 2011 was \$77,779,000. The comparable level for fiscal year 2010 was \$79,374,000. In addition, the Committee provides \$7,000,000 through transfers from the Prevention and Public Health Fund. The administration transferred \$5,000,000 for this purpose in fiscal year 2010.

The CDC links directly with the people whose health it is trying to improve. This activity uses commercial, nonprofit, and public service marketing practices to better understand people's health-related needs and preferences; to motivate changes in behaviors; and to enhance the CDC's partnerships with public and private organizations to more effectively accomplish health protection and improvement.

Task Force on Community Preventive Services.—The Committee recommendation includes \$12,000,000 for the task force, including \$7,000,000 in transfers from the Prevention and Public Health Fund.

NATIONAL CENTER FOR ENVIRONMENTAL HEALTH

The Committee recommends \$190,710,000 for Environmental Health in fiscal year 2010. The fiscal year 2010 comparable funding level was \$187,090,000 and the budget request for fiscal year 2011 was \$182,350,000.

Many modern public health successes can be traced to innovations in environmental health practices. However, emerging pathogens and environmental toxins continue to pose risks to our health and significant challenges to public health. The task of protecting people's health from hazards in their environment requires a broad set of tools. First among these tools are surveillance and data collection to determine which substances in the environment are getting into people and to what degree. It also must be determined whether or not these substances are harmful to humans, and at what level of exposure.

The Committee recommendation includes funding for the following activities:

Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
Environmental Health Laboratory	43,346	41,980	43,346
Newborn Screening Quality Assurance Program (non-add) Newborn Screening for Severe Combined Immuno. Diseases (non-	6,915	6,755	6,915
add)	988	982	988
Environmental Health Activities	78,043	75,022	82,016
Safe Water (non-add)	7,237	7,001	8,737
Environmental and Health Outcome Tracking Network (non-add)	33,124	32,548	33,124
Amyotrophic Lateral Sclerosis Registry (non-add)	6,014	5,795	7,000
Climate Change (non-add)	7,540	7,567	7,540
International Emergency & Refugee Health (non-add)	6,262	6,250	6,262
Built Environment & Health Initiative (non-add)		4,000	4,000
Asthma	30,924	30,734	30,734
Health Homes/Childhood Lead Poisoning	34,805	34,614	34,614

[In thousands of dollars]

Asthma.—The Committee continues to encourage the CDC to work with States and the asthma community to implement evidence-based best practices for policy interventions, with specific emphasis on indoor and outdoor air pollution. The Committee requests an update on the status of implementation in the CDC fiscal year 2012 budget justification.

Biomonitoring.—The Committee applauds the CDC's ongoing national biomonitoring efforts, which gather data that are invaluable in understanding the population's exposure to environmental chemicals and in helping prioritize research into the health impacts of those chemicals. The Committee commends the CDC for the publication of the Fourth National Report on Human Exposure to Environmental Chemicals. Funds may be used for State biomonitoring programs; intramural programs such as providing expertise, training and technical assistance to States; development and simplification of laboratory methods for detecting chemicals; studies to investigate the relationship between exposure to chemicals and adverse health effects; ongoing support to the National Children's Study; and measurements for new priority chemicals.

Built Environment.—The Committee has included funding for the administration's built environment initiative, including the Healthy Community design activities. The Committee strongly supports efforts to integrate health impact assessments into community planning as universally as possible and as quickly as possible. For that reason, the Committee is concerned that the CDC's planned activities focus almost exclusively on adding personnel to health departments, rather than on designing toolkits and health assessment curricula that can be adopted by all actors in community planning. The Committee once again urges the CDC to design materials that can be used by nonhealth experts, and engage with urban planning schools and professional organizations. Further, the Committee notes that the new chronic disease State grant program seeks to incorporate State Departments of Transportation in the chronic disease planning and policy change process. The Committee urges the CDC to utilize the built environment resources to engage with State transportation officials to support this effort.

National Environmental Public Health Tracking Network.—An estimated 125 million Americans suffer from at least one chronic condition. These chronic conditions account for three-quarters of healthcare spending and 7 out of every 10 deaths in the United States. Since 2002, Congress has provided funding for, and the CDC has administered, the National Environmental Public Health Tracking program. The program's objective is to analyze environmental hazard data in relation to health outcome data to identify possible public health interventions and prevention strategies.

Polycythemia Vera Cluster.—The Committee has not continued funding for research into polycythemia vera clusters. The Committee is pleased by the research completed and published in 2010, funded by the CDC. The Committee notes that the 2-year award made in fiscal year 2009 is complete and the Agency for Toxic Disease Registry closed its investigation in 2008. The Committee expects the CDC to continue funding ongoing surveillance through the cancer registry program in the National Center on Chronic Disease Prevention and Health Promotion.

NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL

The CDC is the lead Federal agency for injury prevention and control. Programs are designed to prevent premature death and disability and reduce human suffering and medical costs caused by: fires and burns; poisoning; drowning; violence; lack of bicycle helmet use; lack of seatbelt and proper baby seat use; and other injuries. The national injury control program at the CDC encompasses nonoccupational injury and applied research in acute care and rehabilitation of the injured. Funds are utilized for both intramural and extramural research as well as assisting State and local health agencies in implementing injury prevention programs.

The Committee recommends \$147,729,000 for injury prevention and control activities at the CDC. The comparable fiscal year 2010 funding level was \$148,593,000. The budget request for 2011 was \$147,570,000.

The Committee recommendation includes \$6,152,000 for Traumatic Brain Injury programs, the same as the enacted fiscal year 2010 level. The President's budget request for fiscal year 2011 was \$5,985,000. In addition, the Committee has included \$5,000,000 for the National Violent Death Reporting System. The enacted fiscal year 2010 level was \$3,544,000 and the budget request for fiscal year 2011 was \$5,008,000. All other activities are funded at the budget request level.

Explosives.—The Committee recognizes the most likely cause of injuries in a man-made disaster will be related to explosives, and yet our emergency medical system is unprepared for bomb blast injuries, especially in a mass casualty situation. The Committee encourages the CDC to continue its ongoing work in preparing cities and hospital systems to respond to such events, with a special emphasis on assessing the bomb blast response capacity of high-risk cities and communities.

Injury Control Research Centers.—Funds are provided to the centers to support core operations; conduct the research necessary to fill gaps in the evidence base for developing and evaluating new injury control interventions and improving translation of effective interventions; conduct training of injury control professionals; and undertake other programmatic activities to reduce the burden of injury.

National Violent Death Reporting System.—The Committee supports the National Violent Death Reporting System [NVDRS], a State-based system aimed at preventing violent deaths by developing an understanding of the circumstances surrounding them. The program enables the collection and analysis of data from medical examiners, coroners, police, crime labs, and death certificates. NVDRS information is then used to develop, inform, and evaluate violence prevention programs at the national, State and community level. The Committee urges the CDC to continue to work with States to develop electronic portals at the State level for the submission of NVDRS data. States that apply for funding and demonstrate the ability to collect electronic data should be given priority.

Suicide Prevention.—The Committee encourages the CDC to support evaluation efforts to identify promising and effective suicide prevention strategies that follow the public health model and prevent self-directed violence by promoting and strengthening connectedness among individuals, families, and communities.

Traumatic Brain Injury [TBI].—The Committee has included funding to continue programs authorized by the Traumatic Brain Injury Act as amended in 2008, including public awareness and education efforts, grants to States for TBI registries, and studies on the incidence and prevalence of TBI in the United States. Violence Against Women.—The Committee encourages the CDC to continue research on the psychological sequelae of violence against women and expand research on special populations and their risk for violence, including adolescents, older women, ethnic minorities, women with disabilities, immigrant women, and other affected populations.

Youth Violence Prevention.—The Committee supports the CDC's efforts to foster innovation in evidence-based youth violence prevention strategies through its Striving to Reduce Youth Violence Everywhere program.

OCCUPATIONAL SAFETY AND HEALTH

The Committee recommends a program level of \$453,293,000 for occupational safety and health programs. The fiscal year 2010 program level was \$373,129,000 and the budget request for fiscal year 2011 was \$456,042,000.

The CDC's National Institute for Occupational Safety and Health [NIOSH] is the only Federal agency responsible for conducting research and making recommendations for the prevention of work-related illness and injury. The NIOSH mission spans the spectrum of activities necessary for the prevention of work-related illness, injury, disability, and death by gathering information, conducting scientific biomedical research (both applied and basic), and translating the knowledge gained into products and services that impact workers in settings from corporate offices to construction sites to coal mines. The Committee recommendation includes funding for the following activities at the following amounts:

[In thousands of dollars]

Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
Education and Research Centers	24,370	24,460	26,460
Personal Protective Technology	17,218	16,892	16,892
Healthier Workforce Center	5,036	5,055	5,459
National Occupational Research Agenda [NORA]	117,406	124,528	117,406
NORA—Budget Activity	25,682	32,804	95,682
NanoTechnology (non-add)	9,500	16,544	9,500
NORA—PHS Evaluation Transfers	91,724	91,724	21,724
World Trade Center—BA	70,723	150,137	150,137
Mining Research	53,705	52,736	53,705
Other Occupational Safety and Health Research	84,713	82,234	83,234
Miners Choice (non-add)	648	650	650
National Mesothelioma Registry and Tissue Bank			
(non-add)	1,024	1,028	1,028

Construction Research.—Construction is one of the most dangerous industries for its workers. Every year, some 1,200 construction workers are killed on the job and thousands more die from occupationally related diseases. In 1990, Congress directed NIOSH to develop a comprehensive prevention program directed at health and safety problems affecting construction workers. The Committee is aware that the National Academy of Sciences/Institute of Medicine's Review of the NIOSH Construction Research Program, published in 2009, concluded that the NIOSH Construction Research Program has been highly relevant and has had an impact in improving safety and health in the construction industry. The Committee requests NIOSH to include in the fiscal year 2012 budget justification a description of plans to implement the recommendations of the report.

Food Processing.—Within the funding for Occupational Safety and Health Research, the Committee has included additional funding for NIOSH to conduct a study on the relationship between line speed and worker safety in the meat packing, poultry and food processing industries. The Committee intends this study to be multi-year and industry-wide.

National Occupational Research Agenda.—NIOSH continues to work with partners and stakeholders across the country to update the National Occupational Research Agenda [NORA]. This collaborative effort has produced strategic plans for priority research in each of the eight sectors into which the U.S. economy is divided. Several plans, such as that for agriculture, mining, and construction, are also informed by the major program reviews and positive feedback from the National Academies. Important issues cutting across all the different sectors are also addressed by NORA, such as developing methods of reducing the impact of stressful workplaces on psychological and physical health. The Committee is very concerned that the research coming from NORA be designed in a way that facilitates expeditious translation into practice. The Committee requests a report in the CDC fiscal year 2012 budget justification on the steps the agency is taking to integrate translational goals into the NORA prioritization system.

Volcanic Emissions.—The Committee has included increased funding for NIOSH to continue to study the impact of potentially toxic volcanic emissions. In particular, pre-existing respiratory conditions such as asthma, chronic bronchitis, and emphysema seem to be particularly susceptible to the effects of sulfur dioxide. Further study is warranted on the acute and long-term impact that these emissions have on both the healthy and the residents predisposed to illness. The Committee strongly advises the establishment of a dedicated center that embraces a multi-disciplinary approach studying the short- and long-term health effects of the volcanic emissions.

GLOBAL HEALTH

The Committee recommends \$353,294,000 for global health-related activities at the CDC in fiscal year 2011. The fiscal year 2010 comparable level was \$336,075,000 and the budget request for fiscal year 2011 was \$351,944,000.

The Global Health Center leads and coordinates the CDC's global programs to promote health and prevent disease in the United States and abroad, including ensuring rapid detection and response to emerging health threats. The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands (of de	ollars]
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Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
Global AIDS Program	118,979	118,092	118,092
Global Immunization Program	153,676	151,792	153,191
Polio Eradication	101,800	100,601	102,000
Other Global/Measles	51,876	51,191	51,191
Global Disease Detection	37,756	37,805	37,756

9	2	

[[]In thousands of dollars]

Budget activity	Fiscal year 2010	Fiscal year 2011	Committee
	enacted	request	recommendation
Global Malaria Program	9,405	9,173	9,173
Other Global Health	16,308	35,082	35,082

The Committee has included bill language that would allow the CDC to administer the Afghanistan Health initiative formerly appropriated to the Office of the Secretary. The Committee has not specified a recommended amount in statute, consistent with the administration's fiscal year 2011 budget request.

Chronic Disease.—The Committee is greatly concerned by the spread of chronic disease throughout the world. The Committee strongly supports the expansion of the Field Epidemiology Training programs to increase the capacity of other countries to conduct surveillance and evaluate local interventions to address this growing global crisis.

Hepatitis B.—The Committee notes that there are 400 million people chronically infected with hepatitis B worldwide, with more than 120 million of these individuals in China. While hepatitis B transmission requires direct exposure to infected blood, worldwide misinformation about the disease has fueled inappropriate discrimination against individuals with this vaccine-preventable, blood-borne, and treatable disease. The Committee encourages the CDC to consider global programs to increase the rate of vaccination, reduce mother-child transmission and promote educational programs to prevent the disease and to reduce discrimination targeted against individuals with the disease.

Malaria.—The Committee is pleased with the CDC's continuing contribution to global malaria prevention and control efforts, particularly as part of the President's Malaria Initiative. In particular, CDC scientists and doctors excel in "downstream" research that connects basic science to practical field applications in order to develop new or modify existing prevention and control tools, enhance monitoring and surveillance to track outbreaks and measure disease control success.

Neglected Tropical Diseases [NTDs] and Diarrheal Diseases.— NTDs are infections that affect more than 1.4 billion people worldwide, many of them in the poorest nations. NTDs—including diarrheal and arboviral diseases—stigmatize, disable, and inhibit individuals from caring for themselves or their families, thereby promoting poverty. The Committee recognizes that the CDC has had a long history of working on NTDs and has provided much of the science that underlies those global policies and programs in existence today. The Committee encourages the CDC to continue its work on NTDs, diarrheal diseases believed to kill 2 million children ages 5 and younger worldwide each year, and arboviruses, such as Japanese encephalitis and dengue.

PUBLIC HEALTH PREPAREDNESS AND RESPONSE

The Committee provides \$1,464,668,000 for public health preparedness and response activities. The amount requested by the administration in fiscal year 2011 was \$1,464,656,000. The comparable fiscal year 2010 level was \$1,549,128,000. The Committee recommendation includes funding for the following activities in the following amounts:

Budget activity	Fiscal year 2010 enacted	Fiscal year 2011 request	Committee recommendation
State and Local Preparedness and Response Capability Public Health Emergency Preparedness Cooperative Agreement	761,100	757,793	757,793
(non-add)	714,949	714,738	714,738
Academic Centers for Public Health Preparedness (non-add)	30,013	30,009	30,009
Advanced Practice Centers (non-add)	5,263	5,262	5,262
CDC Preparedness and Response Capability	192,509	183,330	183,342
BioSense (non-add)	34,404	34,362	34,362
Quarantine (non-add)	26,518	26,485	26,518
Strategic National Stockpile	595,749	523,533	523,533
Public Law 111–32 Transfer (non-add)		68,515	68,515

Biosurveillance Activities.—The Committee supports efforts by the CDC and State public health laboratories to strengthen national and international biosurveillance systems for effective, rapid detection and identification of influenza, emerging infectious diseases, biothreats, and "all-threats" detection. The Committee encourages the CDC to collaborate with other global and Federal agencies and continue to assist State laboratories in advancing these important efforts.

PUBLIC HEALTH RESEARCH

Public Health Research.—The Committee has provided \$31,170,000 to fund the Public Health Research program. This amount is the same as the fiscal year 2010 comparable level and the fiscal year 2011 budget request. In addition, the Committee recommends \$20,000,000 in transfers from the Prevention and Public Health Fund, which is intended to support extramural grants for research on public health and prevention.

The Committee is strongly supportive of public health and prevention research, which bridges the gap between medical research discoveries and behaviors that people adopt by identifying the best strategies for detecting new diseases, assessing the health status of populations, motivating healthy lifestyles, communicating effective health promotion messages, and acquiring and disseminating information in times of crisis.

PUBLIC HEALTH IMPROVEMENT AND LEADERSHIP

The Committee provides \$209,808,000 for public health improvement and leadership activities at the CDC. The fiscal year 2010 comparable level was \$211,404,000 and the budget request for fiscal year 2011 was \$192,916,000.

The Committee recommendation includes funding for the following activities in the following amounts:

[In thousands of dollars]

Budget activity	Fiscal year 2010	Fiscal year 2011	Committee
	enacted	request	recommendation
Leadership and Management	149,986	142,469	142,469
Director's Discretionary Fund	3,000	2,508	5,000
Public Health Workforce Development	37,826	47,939	57,939

Disability.—The Committee is pleased by the formation of the first Disability and Health Work Group at the CDC. The Committee hopes the work group will advance the health of people with disabilities by facilitating collaboration on disability inclusion within and across all relevant components and activities, including surveys, showcasing best practices, and ensuring that relevant issues for people with disabilities are reflected in the CDC's programs and policies.

Institutional Research Training Grant Program.—The Committee encourages the CDC to continue the Institutional Research Training Grant program.

Leadership and Management Savings.—The Committee strongly believes that as large a portion as possible of funding should go to programs and initiatives that improve the health and safety of Americans. To facilitate this goal, any savings in leadership and management may be reallocated to the Director's Discretionary Fund upon notification of the Committee.

Public Health Workforce.—The Committee has included funding above the President's budget request for public health workforce efforts. Of the increase, the Committee intends that \$5,000,000 be used for section 776 of the PHS Act and the remainder be used to supplement the Epidemiology Intelligence Service. In addition, the Committee is strongly supportive of the administration's proposed Health Prevention Corps and encourages the CDC to consider creating an inter-agency agreement with the Corporation for National and Community Service [CNCS] to provide loan repayment to participants through the CNCS Education Award Program.

In addition, the Committee has included sufficient funding for the following projects in the following amounts for fiscal year 2011:

Amount

	Amount
Chicago Public Schools, Chicago, IL, for nutrition and health education programs, including equipment	\$150,000
City of Fort Wayne, IN, for outreach, screening and education for Burmese refugees	100,000
East Carolina University, Greenville, NC, for a health disparities behavioral and chronic disease management	,
initiative	300,000
Fibrous Dysplasia Foundation, Washington, DC, for the development of a patient network	200,000
Fletcher Allen Health Care, Burlington, VT, to expand the Center for Nutrition and Healthy Food Systems	100,000
Hawaii Primary Care Association, Honolulu, HI, to continue a program on childhood asthma	200,000
John M. Tedeschi Pediatric Institute at Virtua, Camden, NJ, to establish an outreach and education program	
to combat childhood obesity	750,000
Lower Brule Sioux Tribe, Lower Brule, SD, for health education and promotion programs	100,000
Mary Bird Perkins Cancer Center, Baton Rouge, Louisiana, for cancer outreach initiatives	200,000
National Council of La Raza, Washington, DC, for the Institute of Hispanic Health	1,000,000
PE4life Foundation, Kansas City, MO, for expansion and assessment of PE4life programs across lowa	300,000
Shelburne Farms, Shelburne, VT, to expand Farm-to-School activities	250,000
Silent Spring Institute, Newton, MA, for studies of the impact of environmental pollutants on breast cancer	
and women's health	200,000
South Dakota State University, Brookings, SD, for research on health promotion	200,000
University of Georgia, Athens, GA, for obesity intervention and prevention	100,000
University of Hawaii at Hilo, HI, for occupational safety and health research	100,000
University of Northern Iowa, Cedar Falls, IA, for a health literacy program	300,000
Waterloo Fire Rescue, Waterloo, IA, for FirePALS, a school-based injury prevention program	150,000

PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT

The Committee provides \$102,034,000, the same as the fiscal year 2011 budget request, for the Preventive Health and Health

Services block grant. The fiscal year 2010 comparable level was \$102,019,000.

The block grant provides funding for primary prevention activities and health services that address urgent health problems in local communities. This flexible source of funding can be used to target concerns where other funds do not exist or where they are inadequate to address the extent of the health problem. The grants are made to the 50 States, the District of Columbia, two American Indian tribes, and eight U.S. territories.

BUILDINGS AND FACILITIES

The Committee provides \$12,000,000 for buildings and facilities of the Centers for Disease Control and Prevention. The fiscal year 2010 comparable level was \$69,140,000 and the budget request for fiscal year 2011 did not include funding for this activity.

The Committee again provides bill language to allow the CDC to enter into a single contract or related contracts for the full scope of development and construction of facilities, and instructs the CDC to utilize this authority when necessary.

The Committee has provided the statutory authority and sufficient funding for the CDC to conduct the necessary repairs to the Lake Lynn laboratory. The Committee is concerned that this unique research facility has been closed due to unsafe conditions, making it impossible for the United States to conduct some types of mine safety research, including research on mine explosions. This situation is unacceptable.

BUSINESS SERVICES AND SUPPORT

The Committee provides \$382,152,000 for business services support functions. This amount is the same as the administration request for fiscal year 2011. The fiscal year 2010 comparable level was \$369,814,000. These funds will be used to support agency-wide support functions.

NATIONAL INSTITUTES OF HEALTH

The Committee recommends an overall funding level for the National Institutes of Health [NIH] of \$32,007,237,000, the same as the budget request. This amount is \$1,002,036,000 more than the fiscal year 2010 level.

The Committee recognizes that the NIH faces an imposing "funding cliff" following the historic increase—nearly \$10,400,000,000 provided by the American Recovery and Reinvestment Act of 2009 [ARRA]. Negotiating the softest possible landing is critical to maintaining the scientific momentum gained over the past 2 years and ensuring that young investigators in particular can find a bright future in the field of biomedical research. While the 3.2 percent increase proposed by the administration and recommended by the Committee is less than what would have been desired in stronger economic times, it keeps up with biomedical inflation—a distinction that was all too rare during the mid-2000s. The Committee hopes that this will mark the first of several years of growth for the NIH that, if not spectacular, are at least steady and predictable. Within the increase provided, the Committee includes \$50,000,000 to create the Cures Acceleration Network [CAN], which is described more fully in the section on the Office of the Director, which will administer the new program.

The Committee recommends \$561,629,000 for the Common Fund. This is the same amount as the budget request. The fiscal year 2010 level was \$544,109,000.

NATIONAL CANCER INSTITUTE

Appropriations, 2010	\$5,100,906,000
Budget estimate, 2011	5,264,643,000
Committee recommendation	5,256,409,000

The Committee recommends an appropriation of \$5,256,409,000 for the National Cancer Institute [NCI], of this amount, \$8,000,000 is available for repairs and improvements to the NCI facility in Frederick, Maryland. The budget request for fiscal year 2011 is \$5,264,643,000, and the comparable level for fiscal year 2010 is \$5,100,906,000.

The Committee commends the NCI for launching programs that will translate knowledge gained from sequencing the cancer genome into benefits for patients, such as the cancer Human Biobank [caHUB], a tissue acquisition and storage center; and BIG Health, an interoperable information technology program that is an offshoot of the highly successful cancer Biomedical Informatics Grid [caBIG].

Adolescents.—NCI is encouraged to give additional consideration to adolescents, whose overall risk of contracting most cancers is lower than for adults, but who, because of factors peculiar to adolescence, are less likely to participate in clinical trials and often diagnosed at later stages. In particular, a research focus on health communication strategies for adolescents, their families and their health providers is encouraged.

Behavioral Research on Tobacco Control.—The Committee notes that NCI's research on smoking cessation, smokeless tobacco and collaborations with NIDA, NICHD, and NHLBI are critical to building knowledge to reduce the use of tobacco by adolescents. The Committee also believes that behavioral science should facilitate FDA regulation of tobacco, including consumer perceptions, development of warning labels, product development and response, risk communication, and cultural effects, and recommends that the NCI support such research.

Bone Defects.—The Committee urges research on how to repair bone defects caused by cancer cells, mechanisms by which cancer cells affect the bone's endogenouse cells, the biology of tumor dormancy and the role of tumor stroma in conferring therapeutic resistance.

Breast Cancer Surveillance.—The Committee commends the NCI's commitment to breast cancer research and evaluation through the support and funding of the Breast Cancer Surveillance Consortium. This research program is critical for improving breast cancer surveillance and improving clinical and community practices. The NCI is urged to maintain support for this program in order to further the advancement of lifesaving breast cancer prevention research, improve quality of care, and save lives. The Committee also urges the NCI to expand current data collection and surveillance systems to monitor utilization and quality of other widely prescribed cancer screening tools.

Breast Cancer Vaccines.—The Committee strongly urges the NCI to support research on and clinical development of prophylactic breast cancer vaccines.

Clinical Trials Network.—The Committee is concerned by the findings of the recent Institute of Medicine [IOM] report regarding the NCI clinical trials network. The IOM concluded that the network is too bureaucratic, underfunded, and poorly coordinated. The Committee understands that the NCI requested the report and plans to consider seriously its recommendations. The Committee requests an update on the NCI's progress in implementing the recommendations in the fiscal year 2012 congressional budget justification.

Gastric Cancer.—The Committee remains concerned about the rise in deadly gastrointestinal cancers in young people, as high-lighted in a recently published study by NCI scientists. The Committee strongly supports the NCI's efforts to address gastric cancer and is pleased to see the inclusion of gastric cancer in the Cancer Genome Atlas. The Committee recommends that NCI convene a workshop of experts in the field of gastric cancer to stimulate research and quickly analyze forthcoming data on this lethal cancer.

Liver Cancer.—The Committee encourages a stronger focus on liver cancer and urges the funding of a series of Specialized Programs of Research Excellence [SPOREs] focused on this cancer. While SPOREs currently exist for other major cancers, none are focused on liver cancer.

Lung Cancer.—The Committee continues to urge the NCI to support increased research for lung cancer diagnosis and treatment.

Melanoma.—The Committee continues to encourage NCI to work with advocates, researchers, and industry to fund the areas of research-basic, translational, clinical, and prevention-identified by the strategic research plan and to utilize all available mechanisms. The Committee is aware of recent successes in the therapy of molecularly classified subgroups of melanoma that are the result of translating basic research efforts on the genetic signature of melanomas, and is encouraged by the NCI's recent decision to support inclusion of melanoma in the Cancer Genome Atlas [TCGA]. The Committee urges the NCI to develop new models of alliances between industry, academia and foundations in the field of melanoma research to foster earlier validation of biomarker-driven therapies in the laboratory and clinical trials involving key therapeutic agents, regardless of whether they are within the NCI portfolio. Since initial data suggest that concomitant administration of two or more therapies will be required to cure the majority of melanomas, NCI is urged to participate in efforts to develop rational therapeutic drug combinations, including through the use of novel partnerships. The Committee also encourages the Developmental Therapeutics Program to incorporate a more relevant panel of melanoma cell lines based on molecular subtypes, many of which have been developed with NCI funding, to facilitate its goal of identifying novel chemical leads and biologic mechanisms relevant to the prevention and treatment of melanoma. Lastly, the Committee

encourages the NCI to explore the feasibility of a screening program, with a focus on high-risk individuals. The Committee requests an update on these requests in the fiscal year 2012 congressional budget justification.

Nanoparticles.—The Committee encourages the NCI to accelerate the testing and development of nanoparticles for the improved treatment of cancer that are composed of nontoxic materials and remain at the nano-scale in biological fluids, resisting aggregation.

Neuroblastoma.—The Committee continues to encourage NCI to expand genetic and clinical research on neuroblastoma and convene a state of the science conference on treatment options for high-risk and relapse patients.

Pancreatic Cancer.—The Committee is disappointed with the lack of progress toward a pancreatic cancer-specific research initiative. The Committee again calls upon the NCI to establish a discrete pancreatic cancer research grant program; re-institute a policy of "exceptions" funding for grant applications whose primary focus is pancreatic cancer; and include more experts in pancreatic cancer on scientific review panels. Further, the Committee notes that the NCI released the "Consensus Report of the National Cancer Institute Clinical Trials Planning Meeting on Pancreas Cancer Treatment" 2 years after the meeting was held and that the report does not include an action plan. The Committee strongly encourages the NCI to develop and implement action steps for research on this disease.

Social Media.—The Committee encourages the NCI to fund research on how social media can be used to promote health behaviors and social support.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Appropriations, 2010	\$3,095,349,000
Budget estimate, 2011	3,187,516,000
Committee recommendation	3,182,524,000

The Committee recommendation includes \$3,182,524,000 for the National Heart, Lung, and Blood Institute [NHLBI]. The budget request for fiscal year 2011 is \$3,187,516,000, and the comparable level for fiscal year 2010 is \$3,095,349,000.

Aortic Aneurysm and Dissection.—The Committee commends the NHLBI for its strong support of the Genetically Triggered Thoracic Aortic Aneurysms and Other Cardiovascular Conditions Registry (GenTac).

Congenital Heart Disease.—The Committee commends the NHLBI for the development and implementation of the Bench to Bassinet program in an effort to provide multidisciplinary translational research for congenital heart defects across the lifespan. The Committee urges the NHLBI to continue its work with patient advocacy organizations, other NIH Institutes, and the CDC to expand collaborative research initiatives and other related activities targeted to the diverse life-long needs of congenital heart defect survivors.

Diamond-Blackfan Anemia [DBA].—The Committee understands that NHLBI's research initiatives regarding DBA continue to demonstrate the benefits of translational research and have led to important insights into the biology of blood disorders, birth defects, and cancer development and to a breakthrough in one of the first human disorders linked to a ribosomal protein defect. The Committee understands that, prior to this discovery, changes in the ribosomal protein gene expression were considered inconsequential but have now proven to be a fundamental unit of cellular function. The Committee commends the NHBLI for its attention to this important area of disease research and strongly encourages the Institute to continue efforts to make understanding the role of ribosomal proteins in DBA and related marrow failure diseases an investigative priority.

Heart Disease.—The Committee strongly urges the NHLBI to aggressively expand and intensify its investment in basic, translational, and clinical heart research to capitalize on advances and burgeoning scientific opportunities. The Committee supports the allocation of increased resources for heart research to expand current studies; support promising and novel research; through all available mechanisms, as appropriate; and accelerate implementation of priorities highlighted in its Division of Cardiovascular Diseases Strategic Plan.

Marfan Syndrome.—The Committee commends the NHLBI for its continued support of research related to Marfan syndrome, particularly in the area of pediatrics. The Committee encourages the Institute to facilitate support of research related to surgical outcomes for adult patients who undergo procedures to repair compromised aortas and valves.

Pulmonary Hypertension [PH].—The Committee continues to support research in this area and commends the NHLBI for convening a working group on pulmonary hypertension to identify priority research topics. The Committee urges support for the working group's agenda and encourages the Institute to collaborate with the PH community to raise awareness of the disease among the general public and healthcare providers.

Sarcoidosis.—The Committee is concerned that little progress has been made in understanding the cause of sarciodosis, which can cause chronic debilitating or life threatening heart, neurological, and internal organ disease. To date, there are no effective treatments options. The Committee strongly encourages the NHLBI to place a higher priority on sarcoidosis by intensifying its investments in basic research, clinical investigations and trials.

Sleep Disorders.—The Committee is impressed by research demonstrating a clear association between sleep disruption and cardiovascular disease, diabetes, hypertension, and stroke, as well as workplace and traffic accidents. The Committee encourages increased research and education programs to decrease the impact of sleep problems on health and safety.

Social Network Analysis.—The Committee commends the NHLBI for contributing to a recent trans-NIH initiative on social networks. Social network analysis can be used to study the transmission of viral infections, behaviors, attitudes, information, or the diffusion of medical practices within social networks.

Sudden Cardiac Arrest [SCA].—The Committee is deeply concerned by the prevalance of and mortality rates associated with SCA and urges the NHLBI to make this condition a top research priority. In particular, the Committee strongly encourages the NHLBI to investigate the use of induced hypothermia therapy as both a life-saving treatment for SCA victims and one that is demonstrating promise in improving neurological outcomes for patients. In addition, the Committee encourages the NHLBI and the NINDS to enhance and coordinate data collection associated with SCA and hypothermia therapy in particular.

NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH

Appropriations, 2010	\$413,014,000
Budget estimate, 2011	423,511,000
Committee recommendation	422,845,000

The Committee recommendation includes \$422,845,000 for the National Institute of Dental and Craniofacial Research [NIDCR]. The budget request for fiscal year 2011 is \$423,511,000, and the comparable level for fiscal year 2010 is \$413,014,000.

Behavioral Research.—The Committee applauds the NIDCR's recognition of behavior as a critical factor in oral health, and it encourages research on the development of educational and behavioral oral health promotion interventions to improve maternal and infant oral health.

Craniofacial Skeleton.—The Committee urges continued support for research on the effects on the craniofacial skeleton of systemic drugs prescribed for the treatment of bone diseases, including factors predisposing individuals to osteonecrosis of the jaw, as well as novel approaches to facilitate bone regeneration.

Temporomandibular Disorders [TMJD].—The Committee appreciates the Institute's recent support for research on TMJD but notes that prospects for significant progress are hampered by the lack of a coherent body of knowledge on the etiology and patho-genesis of these conditions. Therefore, as it did last year, the Committee requests the NIDCR to take the lead in developing a comprehensive multidisciplinary 5-year TMJD research plan that ar-ticulates the strategies and goals necessary to resolve the issues that have plagued the TMJD field over the decades. The plan should include research to develop definitive diagnostic criteria; support an updated epidemiology, including a count of co-morbid conditions; examine genetic and other factors that increase risk for TMJD; and support endocrine, immune, and nervous system research on pain mechanisms and treatments. The plan's research goals should incorporate the appropriate mix of multidisciplinary, basic, clinical and translational science, recruitment strategies to recruit scientists from the many pertinent disciplines, and meaningful training programs to enlarge the pool of investigators and indicate what funding mechanisms should be employed. The Committee requests an update on this request in the fiscal year 2012 congressional budget justification.

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Appropriations, 2010	\$1,807,094,000
Budget estimate, 2011	1,857,589,000
Committee recommendation	1,854,674,000

The Committee recommendation includes \$1,854,674,000 for the National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK]. The budget request for fiscal year 2011 is \$1,857,589,000, and the comparable level for fiscal year 2010 is \$1,807,094,000.

Childhood Liver Disease Research and Education Network (ChiL-DREN).—The Committee commends the NIDDK for funding 16 ChiLDREN centers to study biliary atreisa and seven other rare pediatric liver diseases.

Chronic Kidney Disease [CKD] and Asian/Pacific Islanders.— The Committee notes that the incidence of CKD among the Asian/ Pacific Islander [API] population is higher than for most other groups. The Committee urges the NIDDK to focus research efforts on preventing chronic kidney disease among this population.

Drug-induced Liver Injury and Acute Liver Failure.—The Committee supports the NIDDK's decisions to continue funding the Drug Induced Liver Injury Network for an additional 5 years and continue funding the adult and pediatric acute liver failure multicenter networks.

Glomerular Disease Research.—The Committee is pleased that the NIDDK and the NCMHD are collaborating on a scientific conference on the MYH9 gene, which has been linked to the high prevalence of focal segmental glomerulosclerosis among AfricanAmericans, and it urges the NIDDK to collaborate with the NCMHD to support expanded research on this condition through the Nephrotic Syndrome Rare Disease Clinical Research Network.

Inflammatory Bowel Disease [IBD].—The Committee encourages expanded support for research on IBD as identified in the NIH National Commission on Digestive Diseases report and the scientific community's Challenges in IBD Research agenda, particularly as they relate to pediatrics.

Inflammatory Digestive Diseases in Children.—Some inflammatory digestive diseases begin in childhood and progress through life. Examples include inflammatory bowel disease, gluten sensitive enteropathy, autoimmune enteropathy, necrotizing enterocolitis with resultant intestinal failure, acute and chronic pancreatitis, autoimmune hepatitis, autoimmune cholangitis, and primary sclerosing cholangitis. As more effective interventions in the pediatric age group could reduce the burden of these illnesses in children and adults, the Committee urges the NIDDK to encourage more research leading to earlier diagnosis and treatment of these and other digestive diseases that are lifelong burdens.

Interstitial Cystitis [IC].—The Committees supports the important work of the Multidisciplinary Approach to the Study of Chronic Pelvic Pain [MAPP] Research Network but encourages the NIDDK to continue to expand its portfolio specifically on IC research.

Irritable Bowel Syndrome [IBS].—The Committee encourages the NIDDK to consider collaborating with the IBS patient and scientific community to host a state of the science conference focusing on recent breakthroughs in the etiology and epidemiology of IBS.

National Commission on Digestive Disease.—The Committee requests a progress report on implementing recommendations in the Commission's final report issued in March 2009. This report should be included in the NIDDK's annual report and include the NIDDK digestive disease research funding history over the past 3 years. *Pediatric Kidney Disease.*—Because many adult kidney diseases originate prenatally or during childhood, the Committee encourages the NIDDK to assign a higher priority to pediatric kidney disease research, especially congenital kidney abnormalities, pediatric glomerular disease, pediatric acute kidney injury, and pediatric chronic kidney disease. Due to the unique challenges of recruiting children into clinical trials, an emphasis on funding for both infrastructure and collaborative registries to enhance comparative multicenter pediatric prospective clinical/translational trials that will improve patient outcomes is strongly encouraged.

will improve patient outcomes is strongly encouraged. Polycystic Kidney Disease [PKD].—The Committee applauds the NIDDK's commitment to the CRISP and HALT-PKD clinical studies, the four PKD Centers of Excellence, research grants supporting the development of PKD biomarkers, high-throughput screening assays, and additional PKD specific translational research. The Committee suggests that the NIDDK's strategic plan for PKD complement current public/private partnerships such as the FDA partnership designed to speed the development of PKD therapies to market and the establishment of PKD diagnostic and clinical treatment centers in collaboration with the NIH. To expand and solidify this integrated approach, the Committee urges the NIDDK to consider sponsoring an international PKD strategic planning meeting.

Vitamin D and Chronic Kidney Disease.—The Committee encourages support for research on the relationship between vitamin D and morbidity and mortality in chronic kidney disease. Research is also needed on the value of anti-resorptive therapies, the link between renal insufficiency and diabetic bone disease, the differences in calcification of blood vessels, the mechanisms of metastasis of renal cell carcinoma, and diseases that occurs in patients with end stage chronic renal disease on hemodialysis.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

Appropriations, 2010	\$1,635,477,000
Budget estimate, 2011	1,681,333,000
Committee recommendation	1,678,696,000

The Committee recommendation includes \$1,678,696,000 for the National Institute of Neurological Disorders and Stroke [NINDS]. The budget request for fiscal year 2011 is \$1,681,333,000, and the comparable level for fiscal year 2010 is \$1,635,477,000. Charcot-Marie-Tooth [CMT].—The Committee commends the

Charcot-Marie-Tooth [*CMT*].—The Committee commends the NINDS for its recent efforts to advance understanding and development of therapies for CMT and related neurodegenerative diseases. The Committee supports translational research that has the greatest potential to rapidly develop therapies for patients with CMT and other degenerative disorders. The Committee encourages the NINDS to develop innovative communications mechanisms to ensure that information on treatments can be shared in an accurate and timely manner with practitioners and patients.

Dystonia.—The Committee commends NINDS and the Office of Rare Disease Research for supporting the Dystonia Rare Disease Clinical Research Coalition, part of the Rare Diseases Clinical Research Network.

Epilepsy.—The Committee applauds the NINDS for recognizing epilepsy as a priority area and for developing new research oppor-

tunities that will accelerate the rate at which research will be conducted. Following on the heels of the Curing Epilepsy 2007 Conference that resulted in community-determined benchmarks designed to forward the progress of finding a cure for epilepsy, these new grant opportunities will provide avenues for cooperative programs in translational research and high-risk transformative research programs designed to yield new information about epilepsy. The Committee continues to be particularly interested in three areas of epilepsy research—epileptogenesis, co-morbidities, and sudden unexplained death—and encourages the NINDS to focus attention on existing and new grants and mechanisms to address these areas.

Frontotemporal Dementia.—The Committee commends the NINDS and NIA for establishing a frontotemporal dementia [FTD] module of the Uniform Data Set [UDS], with data collected in a uniform manner across the Alzheimer's Disease Centers [ADCs] and maintained within the National Alzheimer's Coordinating Center database. The Committee encourages the two Institutes to establish a pilot program of FTD core centers within the existing ADCs to characterize and follow patients with FTD longitudinally in order to prepare for participation in drug trials.

Spinal Cord, Brachial Plexus, and Peripheral Nerve Injuries.— The Committee encourages research support into the pathophysiology of spinal cord, brachial plexus, and peripheral nerve injuries in order to develop targeted therapies to improve neural regeneration and functional recovery.

Stroke.—The Committee is concerned that the NIH continues to invests only 1 percent of its budget on stroke research, recognizing that funding and resources for this often deadly and disabling disease is not commensurate with current scientific opportunities, the number of Americans afflicted, the increasing prevalence of stroke in an aging population, and the economic toll it exacts on our Nation. In light of the exorbitant burden that stroke places on our society now and in the future, the Committee urges the NIH to aggressively expand and intensify its investment in basic, translational and clinical stroke research to capitalize on advances and burgeoning scientific opportunities.

Stroke in Women.—Many studies have shown significant gender differences concerning stroke. For example, women often receive fewer diagnostic tests and intervention procedures; women have a much higher rate of death from brain aneurysms; and hormone replacement therapy and oral contraceptives increase risk of stroke. The Committee encourages the NINDS to give specific attention to gender-related differences in stroke risk, preventative measures, acute stroke management, post-stroke recovery, long-term outcomes, and quality of care. Also of particular concern is the underrepresentation of women in many NIH-sponsored trials of stroke.

Stroke Rehabilitation.—The Čommittee is pleased that the NINDS has convened an expert panel to discuss issues related to stroke treatment and recovery and how people reintegrate into their daily lives following a stroke. Given that stroke produces a substantial financial and emotional stress on the caregiver who is more often than not the female companion, wife, or daughter, the Committee encourages the NINDS to support studies that address the long-term consequences of stroke on the family and quality of life.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

Appropriations, 2010	\$4,816,051,000
Budget estimate, 2011	4,977,070,000
Committee recommendation	4,969,301,000

The Committee recommendation includes \$4,969,301,000 for the National Institute of Allergy and Infectious Diseases [NIAID]. The budget request for fiscal year 2011 is \$4,977,070,000, and the comparable level for fiscal year 2010 is \$4,816,051,000. Included in these funds is \$300,000,000 to be transferred to the Global Fund to Fight HIV/AIDS, Malaria, and Tuberculosis. The fiscal year 2010 transfer amount was also \$300,000,000.

Antimicrobial Resistance.—The Committee strongly urges the NIAID to devote additional resources to developing new antibacterial drugs. Priority bacteria include Enterococcus faecium, Staphylococcus aureus, Klebsiella pneumoniae, Acinetobacter baumannii, Pseudomonas aeruginosa, and ESBL positive bacteria such as E. coli and Enterobacter species, which cause the majority of healthcare-associated infections. Rapid diagnostic tests that support antibacterial clinical trials and antibiotics' appropriate use are also needed.

Chronic Hepatitis B.—The Committee understands that while there are now a number of medications approved for the treatment of hepatitis B, they are of limited therapeutic value since they mostly target the same virus functions. The Committee urges additional research on different courses of treatment as well as ways to support efforts to identify new cellular and antiviral targets and develop new strategies for intervention. The Committee also urges an increased focus on pregnant women and pediatric cases of hepatitis B.

Eosinophil-associated Disorders.—The Committee urges the NIAID, in consultation with the NIDDK, NICHD, and NIMH, to convene a working group to develop a research agenda aimed at improving the diagnosis and treatment of eosinophil-associated diseases. The Committee requests an update on this effort in the fiscal year 2012 congressional budget justification. The Committee understands that a number of private sector organizations are interested in funding research in this area and encourages the NIAID to collaborate with these organizations as well as other NIH Institutes in supporting relevant research activities.

Inflammatory Bowel Diseases [IBD].—The Committee encourages the NIAID to expand support for IBD research through its Immune Tolerance Network and Autoimmune Disease Prevention Centers in collaboration with the IBD community.

Microbicides.—The recent results of the CAPRISA study in South Africa mark an important milestone for the field of HIV prevention. The Committee urges the NIH to continue to work with USAID, CDC, and other appropriate agencies to coordinate and increase investment in microbicides research and development, prioritizing support for "next generation" ARV-based microbicides. The NIH is encouraged to support public-private partnerships that have a robust ARV product pipeline. *Neglected Tropical Diseases.*—The Committee is pleased that the NIH has included global health as one of its research priorities. The Committee encourages NIH to continue and expand its investment in neglected tropical disease, diarrheal, and arbovirus research and coordinate that work with other Government agencies to maximize resources and ensure development of basic discoveries into useable solutions.

Organ Donation.—The Committee recognizes the need for more intensive screening processes to prevent the transmission of viral, bacterial, and fungal infections from donors, and it urges additional research in this area in collaboration with the United Network for Organ Sharing.

 $\overline{T}uberculosis$ [TB].—The Committee applauds the NIAID for its increased attention to the development of new TB diagnostics, drugs and vaccines, and it urges the Institute to continue to expand these efforts to halt the spread of TB, including drug-resistant TB.

Vaccine Development for Hepatitis C.—The Committee urges a refocused effort on the development of a hepatitis C vaccine and requests an update in the fiscal year 2012 congressional budget justification.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

Appropriations, 2010	\$2,050,665,000
Budget estimate, 2011	2,125,090,000
Committee recommendation	2,121,783,000

The Committee recommendation includes \$2,121,783,000 for the National Institute of General Medical Sciences [NIGMS]. The budget request for fiscal year 2011 is \$2,125,090,000, and the comparable level for fiscal year 2010 is \$2,050,665,000.

Behavioral Research Training.—The Committee applauds the Institute's leadership role in the OppNet initiative, which will support basic behavioral science throughout the NIH. The Committee encourages the NIGMS to support basic behavioral research to its fullest potential, and to incorporate basic behavioral training in its forthcoming training plan.

EUNICE KENNEDY SHRIVER NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Appropriations, 2010	\$1,328,828,000
Budget estimate, 2011	1,368,894,000
Committee recommendation	1,366,750,000

The Committee recommendation includes \$1,366,750,000 for the Eunice Kennedy Shriver National Institute of Child Health and Human Development [NICHD]. The budget request for fiscal year 2011 is \$1,368,894,000, and the comparable level for fiscal year 2010 is \$1,328,828,000.

Adverse Pregnancy Outcomes.—The Committee is concerned that women with severe, early adverse pregnancy outcomes are at increased risk for long-term chronic health problems, including hypertension, stroke, diabetes, and obesity. The Committee urges the NICHD to undertake studies to identify women at risk for longterm morbidity and develop strategies to prevent long-term adverse outcomes in these women. Behavioral Neuroscience.—The Committee is pleased that the NICHD supports a broad spectrum of behavioral neuroscience research, particularly as it relates to real-world problems. The Committee encourages further work on the effects of socioeconomic adversity on children's brain development.

Chromosome Abnormalities.—The Committee again urges the NIH to convene a state of the science meeting on chromosome abnormalities involving multiple contiguous genes in order to create a plan to collect data regarding dosage-sensitive and dosage-insensitive genes and establish phenotyping and genotyping standards for data collection. The Committee also encourages the NIH to provide new funding to support independent investigators whose work can provide pilot data or insight into future directions for the study of chromosome abnormalities, particularly those involving chromosome 18.

Contraceptive Research and Development.—The Committee encourages the NICHD to strengthen its support for contraceptive research and development for the prevention of unintended pregnancies and the efficacy and safety of hormonal contraceptives among overweight and obese women. The Committee additionally urges the Institute to identify opportunities and research priorities in contraceptive development, such as the need for nonhormonal contraception, postcoital contraception, and multipurpose technologies that would prevent both pregnancy and sexually transmitted infections.

Demographic Research.—The NICHD's historic support for demographic research on the nonaged population has yielded landmark scientific findings, confirming how health and well being in the early years affects long-term health and socioeconomic outcomes. Many of these advances have derived from the Institute's investment in large-scale, longitudinal studies, such as the National Longitudinal Study of Adolescent Health and Child Development Supplement to the Panel Study of Income Dynamics, and inter-agency studies, including the National Survey of Family Growth and National Longitudinal Survey of Youth. The Committee expects the Institute to sustain its support for these important resources and reaffirm its commitment to supporting research on how maternal factors before and during pregnancy and early life events affect health and well being in later life.

Fragile X Syndrome.—The Committee encourages the NIH to implement the NIH Research Plan on Fragile X Syndrome and Associated Disorders and continue to fund translational research that shows significant promise of a safe and effective treatment for Fragile X-associated Disorders [FXD].

Intellectual and Developmental Disabilities Research Centers [IDDRCs].—The Committee continues to recognize the outstanding contributions of the IDDRCs toward understanding the causes for a wide range of developmental disabilities including autism, Fragile X syndrome, Down syndrome and other genetic and environmentally induced disorders. The Committee is particularly pleased with how the IDDRCs have collaborated with each other to leverage resources and scientific capital on such efforts as developing a pilot national registry of patient populations and training and supporting young scientists. These centers received administrative supplements through the American Recovery and Reinvestment Act of 2009 that were used to purchase equipment and develop enhanced scientific core services. However, the Committee urges the NICHD to provide additional resources to the IDDRC network to help bring about progress in expanding registries to include larger samples across different disorders, support and mentor new investigators, and develop opportunities for translational research efforts.

Maternal Fetal Medicine Units Network.—The Committee continues to encourage the NICHD to support this network.

Metabolic Disease and Bone Health.—The Committee urges more research in the emerging field of metabolic disease and bone health in children and adolescents, especially childhood obesity, anorexia nervosa and other eating disorders. Research is also needed on what the optimal vitamin D levels should be in children to achieve maximal bone health and the implications of chronic seasonal vitamin D deficiency to the growing skeleton. Development and testing of therapies and bone-building drugs for pediatric patients are also a pressing clinical need.

Pediatric Research Acceleration.—The Committee recognizes that the NIH and the NICHD in particular use a variety of mechanisms to support pediatric research, including condition-specific centers, clinical trials networks, and the Clinical and Translational Science Awards. The Committee nevertheless remains concerned as to the overall level of support for pediatric biomedical research, particularly for initiatives that focus on the continuum from basic to translational research; that provide infrastructure support, particularly to early-career researchers; and that are connected through a networked approach that encourages resource sharing and collaboration. The Committee urges the NIH to support a networked pediatric research consortia model and requests an update on this request in the fiscal year 2012 congressional budget justification.

Preterm Birth and Stillbirth.—The Committee urges the NICHD to expand its support of preterm birth related research by exploring the feasibility of establishing integrated transdisciplinary research centers as recommended by the Institute of Medicine and the Surgeon General's Conference on the Prevention of Preterm Birth. NICHD is also encouraged to take advantage of highthroughput technologies to understand the causes of preterm birth and stillbirth, and to support genomics, proteomics, and metabolomics studies focusing on prediction and prevention of preterm birth and stillbirth, as well as the use of existing biobanks.

Psychosocial Stress in Children.—The NICHD is encouraged to develop a program of research to better understand the immediate and long-term effects of stress in children, in contexts including families of deployed military personnel, and experiences in natural disasters and war zones.

Vulvodynia.—The Committee is encouraged by positive signs that the NICHD is devoting greater attention to this long-neglected condition, especially with regard to stimulating interest in the research community and ensuring adequate representation of vulvodynia experts on peer-review panels. The Committee expects to be updated on progress in these areas. The Committee also notes that vulvodynia coexists with other persistent pain conditions, including interstitial cystitis, fibromyalgia, temporomandibular joint and muscles disorders, irritable bowel syndrome, endometriosis, headache and chronic fatigue syndrome. The Committee strongly urges the creation of a trans-NIH research initiative that will support studies aimed at identifying common etiological pathways among these disorders, with the goal of developing potential therapeutic targets.

NATIONAL EYE INSTITUTE

Appropriations, 2010	\$706,659,000
Budget estimate, 2011	724,360,000
Committee recommendation	723,220,000

The Committee recommendation includes \$723,220,000 for the National Eye Institute [NEI]. The budget request for fiscal year 2011 is \$724,360,000, and the comparable level for fiscal year 2010 is \$706,659,000.

Cataracts.—The Committee is encouraged by the NEI's collaboration with NASA in developing a new diagnostic technology that identifies those at risk for cataract development before it is clinically detectable.

Improving Clinical Practice.—The Committee recognizes the NEI's leadership in conducting several comparative effectiveness clinical trials to improve ophthalmic care, including the Diabetic Retinopathy Clinical Research Network's comparison of drug therapies as an alternative to laser treatment for diabetic macular edema and proliferative diabetic retinopathy. The Committee is also encouraged by the use of new analytic techniques to evaluate published data from clinical trials for therapies for Primary Open Angle Glaucoma that enable researchers to compare the merits of multiple interventions without conducting additional clinical trials, which will also substantially impact clinical practice.

Leber Congenital Amaurosis.—The Committee is encouraged by recent reports of initial success in treating Leber congenital amaurosis with gene therapy and is pleased that the NEI will evaluate gene transfer in younger patients with less severe disease. The Committee urges the Institute to pursue studies of this promising treatment on an expedited basis in other genetically inherited, retinal degenerative diseases. The Committee requests an update on such efforts in the fiscal year 2012 congressional budget justification.

Trachoma.—The Committee is pleased that a recent NEI clinical trial of a multi-dose treatment course of the antibiotic azithromycin in severely affected communities led to the eradication of trachoma, the leading cause of blindness in the developing world.

Training Program.—The Committee is pleased that the NEI is committed to developing the next generation of vision researchers by expanding its institutional training grant program with a program in ocular statistical genetics to provide the vision research community with expertise in mathematics, modeling, and computation.

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

Appropriations, 2010	\$689,462,000
Budget estimate, 2011	707,339,000
Committee recommendation	706.227.000

The Committee recommendation includes \$706,227,000 for the National Institute of Environmental Health Sciences [NIEHS]. The budget request for fiscal year 2011 is \$707,339,000, and the comparable level for fiscal year 2010 is \$689,462,000.

Alternative Methods of Testing.—The Committee supports the implementation of the National Research Council's report "Toxicity Testing in the 21st Century: A Vision and a Strategy" to create a new paradigm for risk assessment based on use of advanced molecular biological methods in lieu of animal toxicity tests. The Committee urges the NIH to play a leading role by funding relevant intramural and extramural research projects. Current activities at the NIESH, the NIH Chemical Genomics Center and the Environmental Protection Agency show considerable potential, and the NIH is strongly encouraged to explore additional opportunities to augment this effort.

Endocrine Disruption.—The Committee urges the NIEHS to continue to increase its research in the effects of endocrine-disrupting chemicals on women's health outcomes. The Committee requests an update on these efforts in the fiscal year 2012 congressional budget justification.

Genes and Environment Initiative.—The Committee continues to support NIEHS's leadership in this trans-Institute initiative.

Sister Study and Breast Cancer.—The Committee requests an update on this important study in the fiscal year 2012 congressional budget justification.

Women's Health and the Environment.—The Committee urges the NIEHS to increase its research in several areas of special importance to women's health: exposures that may initiate or promote autoimmune diseases; exposures associated with risk of uterine fibroids; the effects of engineered nanomaterials in consumer products, especially cosmetics and personal care products; and environmental exposures that are associated with increased time to pregnancy.

NATIONAL INSTITUTE ON AGING

Appropriations, 2010	\$1,109,634,000
Budget estimate, 2011	1,142,337,000
Committee recommendation	1,140,547,000

The Committee recommendation includes \$1,140,547,000 for the National Institute on Aging [NIA]. The budget request for fiscal year 2011 is \$1,142,337,000, and the comparable level for fiscal year 2010 is \$1,109,634,000.

Age-related Bone Loss.—The Committee encourages research to better define the causes of frailty, age-related bone loss and fractures, and reduced physical performance, including identifying epigenetic changes, with the aim of translating basic and animal studies into novel therapeutic approaches. The prevention and treatment of other metabolic bone diseases, including osteogenesis imperfect, glucocorticoid-induced osteoporosis, and bone loss due to kidney disease, should also be priority research areas.

Behavioral Economics.—The Committee is pleased with the NIA's focus on this emerging area of research, which is yielding insights into the neural and behavioral underpinnings of a variety of social and economic behaviors, and the Committee encourages additional work on this topic.

Demographic and Economic Research.—The Committee urges the NIA to continue to invest in its demographic research portfolio, particularly large-scale longitudinal studies such as the Health and Retirement Study. The Committee also urges the NIA to continue working with other Federal agencies, including the Fogarty International Center, to support and expand its investment in national and international demographic research projects.

Roybal Centers for Translational Research on Aging.—The Committee urges the NIA to continue supporting these important centers.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES

Appropriations, 2010	\$538,773,000
Budget estimate, 2011	555,715,000
Committee recommendation	554.846.000

The Committee recommendation includes \$554,846,000 for the National Institute of Arthritis and Musculoskeletal and Skin Diseases [NIAMS]. The budget request for fiscal year 2011 is \$555,715,000, and the comparable level for fiscal year 2010 is \$538,773,000.

Bone Loss.—The Committee urges support for research into the pathophysiology of bone loss in diverse populations in order to develop targeted therapies to reduce fractures and improve bone density, bone quality and bone strength.

Épidermolysis Bullosa [EB].—The Committee is aware that EB is a group of heritable skin-blistering conditions for which there is no cure. The Committee commends NIAMS for its support of EB research and encourages continued and enhanced efforts to address this painful and disabling condition.

Marfan Syndrome.—The Committee commends NIAMS for its continued support of collaborative, multi-investigator research related to Marfan syndrome and encourages expanded support for research on the orthopedic manifestations of the disease.

Outcomes Measurement.—The Committee notes with approval the success of the NIAMS-led PROMIS initiative, which aims to revolutionize the way patient-reported outcome tools are chosen and used in clinical research and practice.

Scleroderma.—The Committee continues to prioritize research on scleroderma and commends the Institute for its work in this area. The Committee requests an update on the NIAMS scleroderma research portfolio as part of its fiscal year 2012 congressional budget justification.

Temporomandibular Joint Disorders [TMJDs].—As the temporomandibular joint is a joint in the body, the Committee continues to believe that its inclusion in the NIAMS portfolio is clearly warranted. NIAMS scientific expertise and funding would greatly accelerate the basic and clinical understanding of this joint, which is critical to such functions as speaking, breathing, eating, swallowing and making facial expressions. The Committee calls on NIAMS to collaborate with the NIDCR to develop multidisciplinary research teams involving basic and clinical scientists to study the jaw anatomy, physiology and the complex neural, endocrine, and immune systems interactions that orchestrate jaw function and trigger jaw joint pathology. NIAMS should integrate the findings from interdisciplinary studies of the structure, mechanical function, metabolism, and blood flow of bone, joints, and muscles with studies of central and peripheral neural pathways, and the endocrine, paracrine, and cytokine factors that impact upon these craniofacial structures, as a means to understanding the underlying causes of pain and dysfunction. The Committee requests a response from NIAMS, in addition to the response from NIDCR, in the fiscal year 2012 congressional budget justification.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION DISORDERS

Appropriations, 2010	\$418,594,000
Budget estimate, 2011	429,007,000
Committee recommendation	428,331,000

The Committee recommendation includes \$428,331,000 for the National Institute on Deafness and Other Communication Disorders [NIDCD]. The budget request for fiscal year 2011 is \$429,007,000, and the comparable level for fiscal year 2010 is \$418,594,000.

Early Detection and Intervention.—The Committee urges continued support for research on early detection, diagnosis and intervention of children with hearing loss. The NIDCD is encouraged to fund studies that follow speech, language, voice, and auditory behavior outcomes for children identified early in life and for children using various hearing devices and interventions.

Hair Cell Regeneration.—The Committee continues to place a high priority on research involving hair cell regeneration and stem cells.

Hearing Aids and Cochlear Implants.—The Committee strongly encourages the NIDCD to support research to make hearing aids more accessible to the millions of Americans with mild to moderate hearing loss. It urges investigative collaborations into low-cost hearing aids between industry, scientists, clinicians and consumers so that more of the population who need hearing aids can obtain them at affordable costs. Regarding cochlear implants, the Committee recognizes the need to study the expansion of electrical speech processing in children and adults, and to conduct research into mechanisms of acoustic hearing loss in subjects using acoustic plus electric speech processing.

Noise and Environmentally Induced Hearing Loss.—The Committee recognizes that while there is increasing susceptibility to noise and environmentally induced hearing loss as one ages, young individuals are also at risk. The Committee urges the NIDCD to study how to identify school-age children with sound-induced hearing loss and address its negative consequences on their academic achievements and social interactions. It understands the potentially deleterious effects of noise and environmental pollutants in water and air on the inner ear's hair cells, synapses and auditory nerve and encourages studies of protective agents. It recommends research, including proteomic studies, to identify, characterize and prevent effects of toxicants, including such chemicals as lead, mercury and carbon monoxide on hearing, especially during aging, and during prenatal and early postnatal development. The Committee also commends the NIDCD for its efforts to raise public awareness of the omnipresent threats to the auditory system posed by environmental noise.

Otitis Media.—The Committee recognizes the threat to infants' and children's health and development from ear infection. The Committee therefore urges the NIDCD to accelerate its support to investigate the pathogenesis of ear infection and its consequences. Studies should include identification of genetic risk factors; new treatments for chronic and recurrent otitis media; new methods for delivery of drugs to the middle ear; and development of vaccines.

Plasticity.—The Committee continues to support research on functional changes of synapses of the central auditory nervous system, including the cortex, following developmental hearing loss. It encourages research that builds on understanding of the dramatic dysfunction that occurs and explores experimental approaches to restoration of normal function of these synapses. Basic research of ways to use auditory training/learning tasks to restore perception in normal adult subjects and those with auditory or vestibular deficits is also recommended.

Presbycusis.—The Committee urges the NIDCD to continue its support of physiological and neurological studies of the peripheral and central mechanisms of presbycusis.

Tinnitus.—The Committee commends NIDCD for hosting a multi-agency collaborative workshop to support new and expanded research into tinnitus. The Committee recommends that the NIDCD expand its research into causal mechanisms underlying peripheral and central tinnitus and pursue research devoted to preventions, treatments and cures of this prevalent disorder, which is also the largest service-connected disability for returning military personnel.

Vestibular Research.—The Committee continues to urge the NIDCD to conduct vestibular research in animal models and humans to improve the diagnosis, intervention strategies and treatment of vertigo and balance disorders, including studies to prevent the severe vertigo attacks and disequilibrium associated with Meniere's disease.

NATIONAL INSTITUTE OF NURSING RESEARCH

Appropriations, 2010	\$145,578,000
Budget estimate, 2011	150,198,000
Committee recommendation	149,963,000

The Committee recommendation includes \$149,963,000 for the National Institute of Nursing Research [NINR]. The budget request for fiscal year 2011 is \$150,198,000, and the comparable level for fiscal year 2010 is \$145,578,000.

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

Appropriations, 2010	\$462,098,000
Budget estimate, 2011	474,649,000
Committee recommendation	473,904,000

The Committee recommendation includes \$473,904,000 for the National Institute on Alcohol Abuse and Alcoholism [NIAAA]. The budget request for fiscal year 2011 is \$474,649,000, and the comparable level for fiscal year 2010 is \$462,098,000.

Collaboration With State Substance Abuse Agencies.—The Committee applauds the NIAAA for working with State substance abuse agencies and encourages collaborative initiatives to ensure that research findings are relevant and adaptable by publicly funded State substance abuse systems.

Comorbidity. —The Committee recognizes that information from NIAAA's National Epidemiologic Survey of Alcohol Related Conditions and the National Longitudinal Alcohol Epidemiologic Survey has transformed our understanding of alcohol use disorders in the U.S. population at large. These unique resources have provided important information on the extent and nature of alcohol use disorders and their relationship to other substance use problems and co-occurring mental disorders.

NATIONAL INSTITUTE ON DRUG ABUSE

Appropriations, 2010	\$1,059,288,000
Budget estimate, 2011	1,094,078,000
Committee recommendation	1,092,369,000

The Committee recommendation includes \$1,092,369,000 for the National Institute on Drug Abuse [NIDA]. The budget request for fiscal year 2011 is \$1,094,078,000, and the comparable level for fiscal year 2010 is \$1,059,288,000.

Behavioral Genetics.—The Committee encourages NIDA's continued investment in behavioral genetics, especially in studies that combine genetic and behavioral approaches. The Committee particularly commends research on the relationships among behavior, genetics and nicotine addiction, and how they impact cognitive function.

Blending Research and Practice.—The Committee is pleased with the continued success and progress of NIDA's National Drug Abuse Treatment Clinical Trials Network, enabling an expansion of treatment options for providers and patients, and applauds NIDA for its collaborative Blending Initiative with SAMHSA.

Comparative Effectiveness Research.—The Committee encourages NIDA to continue its investment in comparative effectiveness research so that proven models of drug abuse prevention and treatment can be further refined.

Engaging the Medical Community.—The Committee is pleased with NIDAMed, an initiative designed to reach out to physicians, physicians in training, and other healthcare professionals regarding substance abuse. The Committee also supports NIDA's ongoing efforts around the Centers of Excellence for Physician Information and its Screening, Brief Intervention, and Referral to Treatment initiative. The Committee urges the Institute to continue its focus on activities to provide physicians and other medical professionals with the tools and skills needed to incorporate NIDA-funded research findings into their clinical practices.

HIV/AIDS and Criminal Justice Populations.—The Committee is concerned about drug abuse and HIV/AIDS in criminal justice populations, and it supports research efforts to empirically test the "seek, test, and treat" paradigm. NIDA should continue its initiative in this area, which will yield important linkages to appropriate health services and effective HIV prevention, intervention, and treatment in these populations.

Medications Development.—The Committee encourages NIDA to continue to support research to develop new, effective medications that could, either by themselves or combined with validated behavioral therapies, help alleviate the personal and social impact of this complex disease.

Military Personnel, Veterans, and Their Families.—The Committee understands that NIDA has joined with the VA and two other NIH Institutes to support research on substance abuse and associated problems among U.S. military personnel, veterans, and their families. Many returning military personnel need help confronting a variety of war-related problems including traumatic brain injury, post-traumatic stress disorder, depression, anxiety, sleep disturbances, and substance abuse, including tobacco, alcohol, and other drugs. Many of these problems are interconnected and contribute to individual health and family relationship crises, yet there has been little research on how to prevent and treat the unique characteristics of wartime-related substance abuse issues. The Committee commends NIDA for this crucial work and asks for an update in the fiscal year 2012 congressional budget justification.

Pulmonary Hypertension.—The Committee commends NIDA for its interest in pulmonary hypertension related to methamphetamine abuse and requests an update in the fiscal year 2012 congressional budget justification on efforts to initiate a large scale survey to access the frequency of pulmonary hypertension in methamphetamine users.

Relapse Prevention.—The Committee applauds the NIDA for supporting emerging research on the use of cognitive-enhancing therapy to reduce drug abuse relapse. The Committee understands that this research is currently conducted with animal models, and it encourages the NIDA to support research that tests this model in clinical populations.

Teens and Drug Abuse.—The Committee commends NIDA for its educational efforts to raise awareness among teens regarding the harmful health effects associated with drugs of abuse.

Tobacco Addiction.—The Committee applauds the recent progress of NIDA-supported researchers toward identifying genetic factors that contribute to nicotine dependence and affect the efficacy of smoking cessation treatments, and it urges NIDA to continue developing much-needed evidence-based treatments, medications, and prevention strategies to combat nicotine addiction.

NATIONAL INSTITUTE OF MENTAL HEALTH

Appropriations, 2010	\$1,489,569,000
Budget estimate, 2011	1,540,345,000
Committee recommendation	1,537,942,000

The Committee recommendation includes \$1,537,942,000 for the National Institute of Mental Health [NIMH]. The budget request for fiscal year 2011 is \$1,540,345,000, and the comparable level for fiscal year 2010 is \$1,489,569,000.

Behavioral Management Drugs for Children.—The Committee is aware that powerful psychotropic medications are being prescribed for children as young as 5 years old. The NIMH is encouraged to expand its research to better understand the effects these medications have on the development of children, as well to support research on treatment modalities that will lessen both providers' reliance and children's dependence on these medications for behavior management.

Children's Mental Health.—Early diagnosis, prevention, and treatment is critical for the millions of families affected by autism, attention deficit hyperactivity disorder, anxiety disorders, depression, bipolar disorder, and eating disorders. The NIMH is encouraged to continue supporting clinical trials to demonstrate the evidence base for effective pharmacological and behavioral interventions and treatments for child and adolescent populations with these disorders.

Dissemination of Research Results.—The Committee commends the NIMH for leading a multi-Institute research initiative to identify, develop, and refine effective methods for disseminating and implementing research-tested health behavior change interventions into public health and clinical practice settings.

Immigrant Health.—The Committee recognizes that immigrants to the United States experience unique stresses, prejudice and poverty, and it urges the NIMH to direct research on the adaptation, development, health, and mental health needs of diverse immigrant populations.

NATIONAL HUMAN GENOME RESEARCH INSTITUTE

Appropriations, 2010	\$515,799,000
Budget estimate, 2011	533,959,000
Committee recommendation	533.127.000

The Committee recommendation includes \$533,127,000 for the National Human Genome Research Institute [NHGRI]. The budget request for fiscal year 2011 is \$533,959,000, and the comparable level for fiscal year 2010 is \$515,799,000.

NATIONAL INSTITUTE OF BIOMEDICAL IMAGING AND BIOENGINEERING

Appropriations, 2010	\$316,405,000
Budget estimate, 2011	325,925,000
Committee recommendation	325,415,000

The Committee recommendation includes \$325,415,000 for the National Institute of Biomedical Imaging and Bioengineering [NIBIB]. The budget request for fiscal year 2011 is \$325,925,000, and the comparable level for fiscal year 2010 is \$316,405,000.

Bone Disease.—The Committee encourages research on bone diseases and disorders utilizing bone imaging. The Committee further encourages the Institute to use engineering strategies to replace and regenerate bone and soft tissue affected by trauma.

NATIONAL CENTER FOR RESEARCH RESOURCES

Appropriations, 2010	\$1,268,329,000
Budget estimate, 2011	1,308,741,000
Committee recommendation	1,306,695,000

The Committee recommendation includes \$1,306,695,000 for the National Center for Research Resources [NCRR]. The budget request for fiscal year 2011 is \$1,308,741,000, and the comparable level for fiscal year 2010 is \$1,268,329,000.

Under the Committee's recommendation, a portion of the costs of the Clinical and Translational Science Awards [CTSAs] program will continue to shift to the NCRR from the Common Fund. The Committee recommendation includes a total of \$500,403,000 for the CTSAs in fiscal year 2011, divided as follows: \$477,700,000 from the NCRR, compared with \$457,700,000 in fiscal year 2010; and \$22,703,000 from the Common Fund, down from \$25,425,000 in fiscal year 2010. The fiscal year 2010 total for CTSAs was \$482,945,000.

Chimpanzee Breeding.—The Committee is aware that the NCRR instituted a breeding moratorium on chimpanzees that it owns and supports in 1995, and that in 2007 it reaffirmed that moratorium by declaring, "NCRR has determined that it does not have the financial resources to support the breeding of chimpanzees that are owned or supported by NCRR." Nevertheless, disturbing questions have been raised about whether this moratorium is being followed at the New Iberia Research Center [NIRC], which is supported by the NCRR and maintains a mix of chimpanzees that are federally owned and privately owned. Records provided by the NIRC to animal rights groups suggest that in the case of as many as 123 infant chimpanzees born at the NIRC since 2000, either the dam or the sire, or both, were federally owned. The Committee asks the NCRR to investigate this matter promptly, take all steps necessary to ensure that the NIRC is complying with the moratorium, and update the Committee on the results.

Human Tissue Supply.—The Committee remains committed to matching the increased needs of NIH-funded researchers who rely upon human tissues and organs to study human diseases and search for cures. Therefore, the Committee encourages the NCRR to increase its core support for its nationwide human tissue and organ procurement network and urge other Institutes to expand their support as well.

Primate Research.—The Committee continues to support the National Primate Research Centers [NPRCs], which provide the necessary facilities, animal models, animal care experts, and the translational research scientists for NIH-supported institutions to conduct nonhuman primate research that is essential to improving human health.

Research Centers at Minority Institutions [RCMI].—The Committee continues to support the RCMI program and encourages the NCRR to strengthen participation from the minority health professions schools.

NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE MEDICINE

Appropriations, 2010	\$128,772,000
Budget estimate, 2011	132,004,000
Committee recommendation	131,796,000

The Committee recommendation includes \$131,796,000 for the National Center for Complementary and Alternative Medicine [NCCAM]. The budget request for fiscal year 2011 is \$132,004,000, and the comparable level for fiscal year 2010 is \$128,772,000.

NATIONAL INSTITUTE ON MINORITY HEALTH AND HEALTH DISPARITIES

Appropriations, 2010	\$211,474,000
Budget estimate, 2011	219,046,000
Committee recommendation	218,705,000

The Committee recommendation includes \$218,705,000 for the National Institute on Minority Health and Health Disparities [NIMHD], which was elevated from center status this year by the Patient Protection and Affordable Care Act. The budget request for fiscal year 2011 is \$219,046,000, and the comparable level for fiscal year 2010 is \$211,474,000.

The Committee is pleased with the Centers of Excellence program, which sponsors multidisciplinary and interdisciplinary research on debilitating diseases affecting health disparities populations. The Committee also recognizes the importance of the research endowment program, which promotes health disparities research capacity building, recruits diverse faculty, and enhances recruitment and retention of underrepresented students.

Urban-based Network.—The Committee encourages the Institute to support a new network of urban-based academic institutions focused on, and with demonstrated commitment and capacity to, addressing recruitment and training needs of minority and urban underserved populations and reducing health disparities in these urban communities.

JOHN E. FOGARTY INTERNATIONAL CENTER FOR ADVANCED STUDY IN THE HEALTH SCIENCES

Appropriations, 2010	\$69,997,000
Budget estimate, 2011	73,027,000
Committee recommendation	72,914,000

The Committee recommendation includes \$72,914,000 for the Fogarty International Center [FIC]. The budget request for fiscal year 2011 is \$73,027,000, and the comparable level for fiscal year 2010 is \$69,997,000.

Global Health Research Training and Workforce Capacity.—The Committee believes that the U.S. effort to improve health in the developing world can only succeed if other countries can contribute the necessary expertise and knowledge to fight malaria, neglected tropical diseases, and other infectious diseases that disproportionately impact the global poor. The FIC plays a strong role by supporting long-term research and training partnerships between U.S. research institutions and those in developing countries. The Committee supports the FIC's continued work in this area.

NATIONAL LIBRARY OF MEDICINE

Appropriations, 2010	\$350,557,000
Budget estimate, 2011	364,802,000
Committee recommendation	364,254,000

The Committee recommendation includes \$364,254,000 for the National Library of Medicine [NLM]. The budget request for fiscal year 2011 is \$364,802,000, and the comparable level for fiscal year 2010 is \$350,557,000. An additional \$8,200,000 is made available from program evaluation funds. Of the funds provided, \$4,000,000 is for improvement of information systems, to remain available until expended.

Access to Research Information.—The Committee applauds the NLM and the Nation's medical librarians for their continuing efforts to improve public access to biomedical information, and it encourages the NLM to continue to work with the network of medical libraries to ensure rapid access to valuable health information.

Disaster Information Management.—The Committee encourages NLM's continued efforts to identify and implement best practices for providing information during disasters, develop innovative products and services to serve emergency responders and preparedness activities, and conduct research to support disaster health information management and recovery efforts. The Committee also encourages the NLM to make accessible the broad range of literature on disaster health, including an information portal for traumatic brain injury and post traumatic stress disorders.

Funding Needs.—The Committee is concerned that NLM funding of extramural research and training programs has declined precipitously, to the point where research opportunities across the full range of biomedical informatics are being deferred, and the necessary cadre of trained informatics scientists and innovators is lacking. The Committee encourages the NLM to contract with the National Research Council of the National Academies of Science to provide: (1) an assessment of the extramural biomedical informatics training programs supported by the NLM, including funding trends and the career paths of graduates; (2) an assessment of both current and past biomedical informatics extramural research activities funded by the NLM; (3) an assessment of the funding available for extramural biomedical informatics research and education, including trends over time; (4) the identification of promising research opportunities that are not represented in the current NLM portfolio; and (5) an estimate of funding needed to support additional opportunities in biomedical informatics research and education programs, including recommendations on such funding goals as the field evolves further over the next decade.

Public Access.—The Committee strongly supports the NIH's public access policy. As the last report on the policy's implementation was completed in July 2008, shortly after it became mandatory, the Committee requests a follow-up report by May 1, 2011. The report should address updated figures on participation rates by authors, collaborations with publishers, and efforts to ensure compliance by NIH-funded researchers. In a related matter, NLM international partners are now depositing their manuscripts in PubMed Central, enhancing the benefits of this database to U.S. researchers. The

Committee believes the results of NIH-funded research should likewise be shared with these NLM partners, further accelerating the discovery process and advancing global public health.

OFFICE OF THE DIRECTOR

Appropriations, 2010	\$1,176,844,000
Budget estimate, 2011	1,220,478,000
Committee recommendation	1,268,580,000

The Committee recommendation includes \$1,268,580,000 for the Office of the Director [OD]. The budget request for fiscal year 2011 is \$1,220,478,000, and the comparable level for fiscal year 2010 is \$1,176,844,000.

\$1,176,844,000. Within this total, the Committee recommendation includes bill language appropriating \$50,000,000 to create the Cures Acceleration Network, which was newly authorized in the Patient Protection and Affordable Care Act. The Committee believes this program offers exciting potential to help speed the translation and application of promising new treatments for diseases. CAN will be administered under the Office of the Director and is authorized to make grants to biotech companies, universities, and patient advocacy groups to target new discoveries that have shown potential at the laboratory level but have not advanced far enough to attract significant investments from the private sector. Specifically, CAN will focus on funding the development of "high need cures," which are defined as drugs, biological products, or medical devices that the NIH Director determines to be a priority "to diagnose, mitigate, prevent, or treat harm from any disease or condition, and for which the incentives of the commercial market are unlikely to result in its adequate or timely development." CAN is also intended to re-duce the barriers between laboratory discoveries and clinical trials for new therapies and facilitate FDA review for the high need cures funded by CAN.

Two types of awards are authorized-grant awards and partnership awards, the latter of which require a \$1 to \$3 match. In both cases, the grants may be a maximum of \$15,000,000 per project in the project's first fiscal year. Up to 20 percent of the appropriated funds may be used to obligate funds through "other transactions," which are funding agreements or mechanisms that are not grants, contracts, or cooperative agreements, and are intended to provide additional flexibility akin to that of the Department of Defense's Defense Advanced Research Projects Agency [DARPA].

The Committee hopes to fund CAN at higher levels in future years, but notes that there will be limited time in fiscal year 2011 to award grants through this program, considering that a CAN Review Board must first be established.

The Committee appreciates the information that the NIH provides each year on how each Institute and Center plans to use its appropriation by mechanism, both in the annual congressional budget justification and again in an update it provides by August 1 each year. The Committee understands that small changes in mechanism totals may occur between August 1 and the end of the fiscal year as grants are awarded. Therefore, the Committee requests that the NIH begin providing the final mechanism totals for each fiscal year, in table form, by November 30. National Children's Study.—The Committee includes bill language providing \$194,400,000 for continuation of the National Children's Study [NCS]. The Committee appreciates the improvements to the management and oversight of this study that have occurred in the past year. While the implementation of the main study has been delayed, the Committee believes this will allow more time to evaluate the project's scope and cost, and allow the NIH and Congress to make better-informed decisions about its future.

OFFICE OF BEHAVIORAL AND SOCIAL SCIENCES RESEARCH [OBSSR]

Basic Behavioral and Social Sciences.—The Committee is pleased that the Basic Behavioral Opportunity Network (OppNet) was launched in fiscal year 2010 with the support of 24 Institutes and Centers and the NIH Director. The Committee has addressed basic behavioral science in many previous reports, and it applauds NIH's recognition that basic behavioral research is essential in efforts to improve the Nation's health. The Committee understands that OppNet represents a minimum of a 5-year, cross-NIH initiative designed to fill critical gaps in the NIH's basic behavioral research enterprise. The Committee requests an update on OppNet's progress in the fiscal year 2012 congressional budget justification.

OFFICE OF RARE DISEASES [ORD]

Dystonia Consortium.—The Committee commends the ORDR for providing funding for 19 research consortia including the Dystonia Coalition, as part of the second phase of the Rare Diseases Clinical Research Network. The Committee requests an update on the Dystonia Coalition research activities in the fiscal year 2012 congressional budget justification.

OFFICE OF RESEARCH ON WOMEN'S HEALTH [ORWH]

The Committee commends the ORWH for convening a series of town hall meetings across the Nation to receive input from stakeholders regarding the strategic direction of women's health research over the next decade. The Committee encourages the ORWH to continue its dialogue with the scleroderma and pulmonary hypertension communities in this regard.

Health Disparities Research in Women.—Women of racial and ethnic minorities face higher rates of diseases including obesity, cancer, diabetes, heart disease, and HIV/AIDS, when compared with white women. There is also a disproportionately higher rate of pre-term birth among African-American women that cannot be accounted for by known risk factors. The Committee encourages the ORWH to support research into the causes of health disparities and develop and evaluate interventions to address these causes. The Committee also understands that continued and expanded collection of data capturing racial and ethnic information is essential in understanding and reducing disparities.

Stroke in Women.—The Committee encourages the ORWH to support research to determine the biologic basis, including studies of genetic susceptibility factors, as to why brain aneurysms are much more frequent in women compared to men, particularly at younger ages, and initiatives to advance the understanding of stroke care in women, including poststroke rehabilitation, and the identification of stroke treatment and rehabilitation.

Vulvodynia.—The Committee notes the lack of resources allocated to the vulvodynia educational campaign in fiscal years 2009 and 2010, and it urges the Director to reinvigorate this initiative by allocating sufficient resources to expanding the scope of this important effort. Developed educational materials should be widely disseminated to Federal funded health centers and college health clinics, as well as to the public, patient and medical communities. In addition, the Committee requests that the ORWH support a vulvodynia conference to be held in fiscal year 2011.

MULTI-INSTITUTE RESEARCH INITIATIVES

Amyotrophic Lateral Sclerosis [ALS].—The Committee urges the NIH to collaborate and develop partnerships with voluntary health associations and Government agencies, including the Food and Drug Administration, in implementing programs targeting those with ALS and other conditions with unmet medical needs. NIH's collaboration with FDA to fast track innovations that focus on translational and regulatory science is an example of the type of partnership that may speed the delivery of new treatments to people with ALS.

Angiogenesis.—The Committee supports the ongoing research on angiogenesis to examine the ability to detect and treat diseases at early stages. The Committee strongly encourages the Director to coordinate with all relevant Institutes to study correlation of platelet proteomes to angiogenesis with the goal of developing a health marker.

Autoimmune Diseases.—The Committee urges the Director to facilitate increased basic research on environmental triggers and biomarkers of autoimmune diseases in collaboration with the Directors of related research Institutes through the NIH Autoimmune Diseases Coordinating Committee. The Committee believes that basic research is needed to identify the mechanisms that drive the autoimmune response.

Basic Cell Research.—The Committee believes that the funding of basic biomedical research is an important investment in the future health and well-being of our Nation. Ideas that may one day result in the development of cures and treatments for cancer and other diseases begin with basic research into the understanding of how cells work. The Committee believes that basic biomedical research should remain a key component of both the intramural and extramural research portfolio at the NIH.

Career Development Awards.—The Committee recognizes the role of clinical researchers as a primary resource for advancement and innovation in biomedical science. In order to ensure and expand the pool of highly talented patient-oriented researchers, the Committee supports the preservation of K awards as a critical training mechanism.

Chronic Fatigue.—The Committee is aware that in October 2009, a group of researchers announced that it had performed blood tests on patients with Chronic Fatigue Syndrome [CFS] and found sufficient evidence of the presence of xenotropic murine leukemia virusrelated virus [XMRV] to suggest a correlation between XMRV and CFS. While the work has not yet been replicated, the reported research warrants further discussion and investigation. The Committee is aware that NIH will host an international symposium on XMRV in September 2010 to address the pathogenesis and clinical and public health implications of the XMRV virus and to obtain input in developing a coordinated strategy for XMRV research. The Committee also is aware that the second State of the Knowledge Conference is being planned by the Trans-NIH Working Group on Chronic Fatigue Syndrome for 2011 and is encouraged that this conference will likely make additional recommendations about future funding opportunities for XMRV and CFS research.

Class B Animal Dealers.—The Committee noted with strong interest the April 2010 report issued by the NIH titled "The Use of Random Source Class B Dealers in NIH-Supported Research." The report concludes that the best way to phase out the use of class B dealers as the providers for random-source dogs and cats in NIHsupported research is to supplement class A dealers so that they can provide these animals instead. The 3- to 4-year timeline projected by the NIH to complete this transition is longer than the Committee would have preferred, especially considering that the NIH largely ignored this issue for years. However, the Committee is pleased that the NIH is on track to meet the early milestones of this timeline. The Committee expects this pace to continue and requests an update in the fiscal year 2012 congressional budget justification.

Clinical and Translational Science Awards [CTSAs].—The Committee strongly supports the CTSA program, a nationwide network of research institutions that aims to increase the translation of basic science, speed the delivery of treatments and cures to the public, and foster the development of the next generation of diverse, highly trained clinical and translational science professionals. The Committee believes that greater involvement from all 27 Institutes and Centers [ICs] would help the program reach its full potential. Therefore, the Committee requests that the Director consider developing a formal, NIH-wide plan on how to align the CTSAs with the programmatic and funding priorities of the ICs.

Communication of Research Findings.—The Committee is pleased that the NIH has continued to support NIH MedlinePlus magazine, which provides consumers and health professionals with easy-to-read health information based on the latest NIH-supported research, and a new bilingual version of the magazine, NIH MedlinePlus Salud. While the bulk of the support for the magazine comes from the NLM, the Committee urges the Director to work with the Institutes and Centers to provide the resources necessary to increase the distribution of these important sources of consumer health information to reach all physician offices, federally qualified health centers, hospitals, libraries and free-standing health clinics.

Diabetes.—The Committee recognizes that more research and education is needed on the disparate effects of diabetes on minority populations. Therefore, the Committee urges the NIH to expand, intensify, and support ongoing research and other activities with respect to pre-diabetes and diabetes in minority populations, including research to identify clinical, socioeconomic, geographical, cultural, and organizational factors that contribute to diabetes in such populations. Specifically, the Committee encourages NIH to research behavior and obesity; environmental factors that may contribute to the increase in type 2 diabetes in minorities; environmental triggers and genetic interactions that lead to the development of type 2 diabetes in minority newborns; genes that may predispose individuals to the onset of type 1 and type 2 diabetes and its complications; methods and alternative therapies to control blood glucose; and diabetic and gestational diabetic pregnancies in minority mothers. The Committee also asks that the NIH, through the NIMHD and the National Diabetes Education Program, mentor health professionals to be more involved in weight counseling, obesity research and nutrition; provide for the participation of minority health professionals in diabetes-focused research programs; and encourage increased minority representation in diabetes-focused health fields.

Down Syndrome.—The Committee is pleased that the NINDS is co-hosting a conference in December to further identify and explore the issues involved in the development of a national Down syndrome patient registry and one or more biobanks, and it encourages additional support for this effort. As increased Federal funding for translational research is important to fostering a better understanding of Down syndrome and exploring therapeutic treatments, the Director is encouraged to dedicate sufficient resources to the implementation of the 2007 NIH Research Plan for Down syndrome. Finally, the Committee continues to urge the NIH to establish workshops and mentoring programs to encourage young researchers and scientists to successfully pursue NIH grants for Down syndrome research.

Fibromyalgia.—The Committee recognizes that fibromyalgia is a disorder that impacts the lives of millions of Americans and is deeply concerned regarding the lack of a sustained commitment to fibromyalgia-specific research at the NIH. While NIAMS has been the lead Institute for fibromyalgia, the NINDS should also play a key role because of substantial evidence implicating pathology within the central nervous system in the development and expression of fibromyalgia symptoms, including abnormal brain activity, abnormal concentrations of a variety of neurotransmitters in cerebrospinal fluid, dysautonomia and neuroendocrine dysfunction. The Committee urges both Institutes to stimulate interest in this field by supporting additional research through all available funding mechanisms and by convening a conference to open the door to new particular scientific findings. Areas of interest include neurotransmitter abnormalities and other neurological problems revealed by prior brain and cervical neck imaging studies, as well as further investigation of sleep disturbances and genetic factors.

Lung Disease.—The Committee encourages the Director to work with the NHLBI, NIEHS, NIAID, and FIC to develop cross-Institute initiatives on the causes, identification, treatment and prevention of lung disease.

tion of lung disease. Lupus.—The Committee continues to support additional basic, clinical and translational research on lupus.

Lyme Disease.—The Committee is encouraged that the NIH has signaled its intent to hold a scientific conference on Lyme and other tick-borne diseases in coordination with the NIAID. The Committee believes that the conference should represent the broad spectrum of scientific views on Lyme disease as well as individuals with Lyme disease.

Lymphatic Research and Lymphatic Disease.—The Committee applauds the Trans NIH Coordinating Committee for Lymphatic Research for the success of recent NIH lymphatic-related symposia and for eliciting multidisciplinary extramural recommendations from a Lymphatic Research Working Group. The Committee is disappointed, however, that the NIH's June 2009 report on lymphatic research did not fulfill the Committee's request "to set forth short and long-term strategic plans to advance research of the lymphatic system and lymphatic diseases, and specifically addressing the Trans-NIH Working Group 2008 Recommendations." Therefore, the Committee again asks each of the Institutes and Centers [ICs] with an interest in lymphatic research (NHLBI, NCI, NIDDK, NICHD, NINR, NEI, NIAID, NIAMS, NIBIB, and ORD) to set forth explicit, prospective, actionable plans and implementation strategies for each Working Group recommendation for the years 2011–2014, including but not limited to: (a) the creation of centralized core facilities for experimental molecular and diagnostic lymphatic imaging; (b) the development and standardization of research reagents; (c) the generation of virtual networks to facilitate basic, translational, and clinical research; (d) the development of techniques for the quantitative and molecular imaging of lymphatic function, lymphatic malformations, and lymph nodes; (e) the creation of interdisciplinary programs to train new investigators in lymphatic research; (f) the support of patient registries and the creation of a lymphatic disease tissue bank; (g) the generation and characterization of animal models to foster and facilitate investigations in lymphatic biology; and (h) the identification of suitable panels of biomarkers for lymphatic disease. In addition, the Committee once again urges all relevant ICs to continue to expressly include lymphatic system research in related funding mechanism requests where a lymphatic research component is appropriate.

Mitochondrial Disease and Dysfunction.—The Committee supports the effort to make greater progress in researching mitochondrial disease and dysfunction, and believes that the Director should therefore continue to prioritize research on functional variations in mitochondria under the Transformative Research grants program and other Common Fund activities. In light of the large number of NIH Institutes and Centers that have some involvement in mitochondrial-related research, the Committee urges the Director to enhance efforts to coordinate and promote such research.

Neurodegeneration with Brain Iron Accumulation [NBIA].—The Committee urges the NINDS, NICHD, NEI and ORDR to put a higher priority on research involving NBIA, a group of rare disorders for which there is no treatment or cure. Neurofibromatosis [NF].—The Committee continues to place a

Neurofibromatosis [*NF*].—The Committee continues to place a high priority on NF and requests an update in the fiscal year 2012 congressional budget justification on the research being supported by the multiple NIH Institutes with an interest in this disease.

Neurogenic Bladder.—The Committee encourages the NIDDK, NICHD and NINDS to study the causes and care of the neurogenic

bladder in order to improve the quality of life of children and adults with spina bifida; to support research to address issues related to the treatment and management of spina bifida and associated secondary conditions, such as hydrocephalus; and to invest in understanding the myriad co-morbid conditions experienced by children with spina bifida, including those associated with both paralysis and developmental delay.

Overlapping Chronic Pain Disorders.-The Committee again notes the growing body of evidence demonstrating considerable overlap among chronic fatigue syndrome, endometriosis, fibromyalgia, headache, interstitial cystitis, irritable bowel syndrome, temporomandibular joint and muscle disorders, and vulvodynia. These poorly understood and neglected conditions impact millions of Americans and cost the Nation tens of billions of dollars each year. The Committee requested last year that the Director coordinate a trans-NIH research initiative, and the NIH responded that this work would be carried out by the Trans-NIH Working Group for Research of Chronic Fatigue Syndrome [CFSWG]. The Committee is not satisfied with that response, as the scope of the proposed initiative spans well beyond the purview of the CFSWG, and strongly urges the NIH to take a more comprehensive approach to these conditions. The Committee urges the NIH to promptly develop and coordinate, with all relevant ICs, a trans-Institute research initiative to support studies aimed at identifying etiological pathways of these overlapping conditions with the goal of identifying potential therapeutic targets.

Pain.—The Committee applauds the NIH for entering into negotiations with the Institute of Medicine to convene a "Conference on Pain" to develop recommendations on how to significantly improve the state of pain research, assessment, diagnosis, treatment, and management, as authorized by the Patient Protection and Affordable Care Act [PPACA]. The Committee urges the NIH to assure that appropriate attention is given to chronic pain conditions that solely or disproportionately impact women, including chronic fatigue syndrome, endometriosis, fibromyalgia, interstitial cystitis, temporomandibular disorders, and vulvodynia. The Committee also urges the NIH to promptly appoint and convene a new Interagency Pain Research Coordinating Committee, as described in the PPACA. This committee will provide important visibility to existing efforts, help identify critical research gaps in this field, stimulate pain research collaboration with other Government agencies such as the Departments of Defense and Veterans Affairs, and provide an important avenue for extramural stakeholder involvement as the pain research agenda evolves.

Palliative Care.—The Committee strongly urges the NIH to develop a trans-Institute strategy for increasing funded research in palliative care for persons living with chronic and advanced illness. Research is needed on: treatment of pain and common non-pain symptoms across all chronic disease categories, which should include cancer, heart, renal and liver failure, lung disease, Alzheimer's disease and related dementias; methods to improve communication about goals of care and treatment options between providers, patients, and caregivers; care models that maximize the likelihood that treatment delivered is consistent with patient wishes; and care models that improve coordination, transitions, caregiver support, and strengthen the likelihood of remaining at home. *Psoriasis.*—The Committee recognizes that additional genetics,

immunology and clinical research focused on understanding the mechanisms of psoriasis and psoriatic arthritis are needed, and it encourages the NIAID and NIAMS to further study the genetic susceptibility of psoriasis; develop animal models of psoriasis; identify and examine immune cells and inflammatory processes involved in psoriasis; and elucidate psoriatic arthritis specific genes and other biomarkers. The Committee also recognizes the mounting evidence of co-morbidities associated with psoriasis and the 50 percent higher risk of mortality for people with severe psoriasis. The Committee urges the NHLBI to consider these factors in its research, specifically that individuals with severe psoriasis have an increased risk of heart attack, independent of other major risk factors such as hypertension, diabetes and obesity, and that for people in their 40s and 50s with severe psoriasis, the risk of heart attack is more pronounced. The Committee also urges the NIDDK and NIMH to consider in its research that diabetes and psychiatric symptoms are more prevalent for patients with severe psoriasis than for those with mild disease.

Regenerative Medicine.—The field of regenerative medicine represents a unique approach to treating diseases and disorders by enabling the body to repair, replace, restore, and regenerate damaged or diseased cells, tissues, and organs. The Committee believes that the NIH should carefully and deliberatively consider how best to organize and undertake research in this promising field, with input from experts in multiple disciplines. The Committee urges the Director to develop a plan that would: assess current research; identify research gaps including research methodologies; develop a mechanism to allow for the coordination of research between Institutes; consider the development of a separate study section; and in coordination with FDA, develop clinical trial methodologies and measures to assure the safety and efficacy of therapies, including data and sample registries. The Committee requests a response in the fiscal year 2012 congressional budget justification.

Sex Differences.—The Committee urges the NIH to put a higher priority on understanding the basic biology of the impact of sex/ gender in development, diagnosis, and treatment of disease. Topics should include the cellular and molecular basis of sex differences in the natural history of development of and treatment for disease; a clearer definition of the impact of the hormonal milieu on risk and progression of diseases in women; and an integrated approach to understanding how neurological/physiological factors impact development of disease in women. The Committee recommends that study sections should be better equipped to evaluate such proposals of sex differences in disease, as these typically are complex integrated physiological problems requiring a multidisciplinary approach. The Committee requests an update on these efforts in the fiscal year 2012 congressional budget justification. *Spinal Muscular Atrophy [SMA].*—The Committee is concerned

Spinal Muscular Atrophy [SMA].—The Committee is concerned that the declining NIH investment in developing treatments for SMA comes at a time when treatments are closest to the clinic and the community will benefit from NIH support most. When SMA was designated by NIH in late 2003 as the model disease for a therapeutics development program (the SMA Project), it was viewed as an unprecedented opportunity to find treatments for this devastating and relatively common childhood disease. The Committee strongly supported this NINDS-initiated program to enable the development of therapeutic candidates for the treatment of SMA. Since then, the Committee understands that research supported by private voluntary organizations and the NINDS SMA Project have led to multiple potential treatments for SMA that are advancing rapidly through the drug development pipeline, with the most promising drug candidates expected to reach the clinical trials stage within 12 months. To complete development of any of these potential new treatments, NIH support is needed to put into place the infrastructure for clinical trials. The Committee requests an update in the fiscal year 2012 congressional budget justification.

Spinal Muscular Atrophy [SMA] Carrier Screening.—The Committee continues to support the development of a pan-ethnic carrier screening program for SMA. While the Committee is pleased that in October 2009 the NHGRI, NICHD, and NINDS collectively sponsored a meeting of representatives from government, academia, professional societies, advocacy groups, and industry to explore the scientific basis for SMA carrier screening, many challenges remain to implementing a comprehensive pan-ethnic carrier screening protocol for SMA. The Committee is particularly concerned that contradicting recommendations from professional societies and inconsistencies between various industry-published educational materials for SMA carrier screening are creating confusion among professionals and the public. The Committee strongly encourages the NHGRI, NICHD, and NINDS to collaborate with stakeholder groups to develop unified, specific, and consistent recommendations, guidelines, and educational materials for providers and patients.

Tuberous Sclerosis Complex [TSC].—The Committee applauds the research funded to date by the NIH that has led to a better understanding of TSC and its multiple manifestations. The Committee encourages the Office of the Director to launch a new, multi-Institute approach focused on translational research that will lead to the identification of new drug targets and new treatments for individuals with TSC. In addition, since TSC is a gateway into understanding autism spectrum disorder, the Committee encourages NIH to support research in this area.

OFFICE OF AIDS RESEARCH

The Office of AIDS Research [OAR] coordinates the scientific, budgetary, legislative, and policy elements of the NIH AIDS research program. The Committee recommendation does not include a direct appropriation for the OAR. Instead, funding for AIDS research is included within the appropriation for each Institute, Center, and Division of the NIH. The recommendation also includes a general provision which directs that the funding for AIDS research, as determined by the Director of the National Institutes of Health and the OAR, be allocated directly to the OAR for distribution to the Institutes consistent with the AIDS research plan. The recommendation also includes a general provision permitting the Director of the NIH and the OAR to shift up to 3 percent of AIDS research funding among Institutes and Centers throughout the year if needs change or unanticipated opportunities arise.

The Committee includes bill language permitting the OAR to use up to \$8,000,000 for construction or renovation of National Primate Research Centers. This is the same as the fiscal year 2010 level and the budget request.

HIV/AIDS Behavioral Research.—The Committee urges the NIH to support behavioral research aimed at reducing the likelihood of HIV infection by determining risk factors in various populations as well as the ways in which interventions need to be tailored for specific populations at greatest risk of becoming infected.

BUILDINGS AND FACILITIES

Appropriations, 2010	\$99,985,000
Budget estimate, 2011	125,581,000
Committee recommendation	125,420,000

The Committee recommendation includes \$125,420,000 for NIH buildings and facilities. The budget request for fiscal year 2011 is \$125,581,000, and the comparable level for fiscal year 2010 is \$99,985,000.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

Appropriations, 2010	\$3,562,701,000
Budget estimate, 2011	3,673,596,000
Committee recommendation	3.668.418.000

The Committee recommends \$3,668,418,000 for the Substance Abuse and Mental Health Services Administration [SAMHSA] for fiscal year 2011. The comparable fiscal year 2010 level is \$3,562,701,000 and the administration request is \$3,673,596,000. The recommendation includes \$132,234,000 in transfers available under section 241 of the Public Health Service Act. SAMHSA is responsible for supporting mental health programs and alcohol and other drug abuse prevention and treatment services throughout the country, primarily through categorical grants and block grants to States. In addition, the Committee recommends that \$40,000,000 be transferred to SAMHSA from the Prevention and Public Health Fund.

The Committee has provided funding for programs of regional and national significance under each of the three SAMHSA centers: mental health services, substance abuse treatment, and substance abuse prevention. Separate funding is available for the children's mental health services program, projects for assistance in transition from homelessness, the protection and advocacy program, data collection activities undertaken by the Office of Applied Studies and the two block grant programs: the community mental health services block grant and the substance abuse prevention and treatment block grant.

The Committee has provided \$159,362,000 for grants throughout SAMHSA that fund mental health and substance use treatment services targeted to homeless and at-risk families, youth and individuals. This funding includes \$15,800,000, as requested by the administration, for a new inter-Departmental Homeless Initiative. In this initiative, mental health and substance abuse treatment funding from SAMHSA, together with Medicaid resources and housing vouchers from the Department of Housing and Urban Development, will be used to demonstrate effective approaches to providing permanent supportive housing for those who experience chronic, long-term homelessness. The Committee notes that research shows a wide range of positive benefits from permanent supportive housing programs, such as long-term housing stability and lower criminal justice costs, as well reductions in emergency room use, hospitalizations and other high-cost health services.

CENTER FOR MENTAL HEALTH SERVICES

Appropriations, 2010	\$1,004,869,000
Budget estimate, 2011	1,027,552,000
Committee recommendation	1.041.677.000

The Committee recommends \$1,041,677,000 for mental health The comparable level for fiscal year services. 2010is\$1,004,869,000 and the administration request is \$1,027,552,000. The recommendation includes \$21,039,000 in transfers available under section 241 of the Public Health Service Act. In addition, the Committee recommends that \$40,000,000 be transferred to the Center for Mental Health Services from the Prevention and Public Health fund. Included in the recommendation is funding for programs of regional and national significance, the community mental health services block grant to the States, children's mental health services, projects for assistance in transition from homelessness, and protection and advocacy services for individuals with mental illnesses.

PROGRAMS OF REGIONAL AND NATIONAL SIGNIFICANCE

The Committee recommends \$386,309,000 for programs of regional and national significance. The comparable level for fiscal year 2010 is \$361,352,000 and the administration request is \$374,184,000. In addition, the Committee recommends that \$40,000,000 be transferred to this activity from the Prevention and Public Health Fund. Programs of regional and national significance [PRNS] address priority mental health needs through developing and applying best practices, offering training and technical assistance, providing targeted capacity expansion grants, and changing the delivery system through family, client-oriented and consumerrun activities.

Within the total provided for CMHS programs of regional and national significance, the Committee recommendation includes funding for the following activities:

[In thousands	of	dollars]
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Budget activity	Fiscal year 2010 comparable	Fiscal year 2011 request	Committee recommendation
CAPACITY:			
Co-Occurring State Incentive Grant	2,168	3,611	3,611
Seclusion & Restraint	2,449	2,449	2,449
Youth Violence Prevention	94,333	94,502	94,502
National Traumatic Stress Network	40,800	40,800	44,800
Children and Family Programs	9,194	9,194	9,194
Performance Management and Coordination Activities	3,166	3,530	3,530

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[In thousands of dollars]

Budget activity	Fiscal year 2010 comparable	Fiscal year 2011 request	Committee recommendation
Consumer and Family Network Grants	6,236	6,436	6,436
Mental Health System Transformation & Health Reform	29,106	30,924	26,924
Transformation activities	29,106	26,924	26,924
Mental Health/Substance Abuse SBIRT		4,000	
Project LAUNCH	25,000	27,000	29,000
Depression Centers of Excellence			10,000
Primary and Behavioral Health Care Integration	14,000	14,000	14,000
Prevention and Public Health Fund (non-add)	20,000		40,000
Community Resilience and Recovery Initiative	5,000	5,000	5,000
Suicide Lifeline	5,522	7,522	7,522
Garrett Lee Smith—Youth Suicide State Grants	29,738	30,438	29,738
Garrett Lee Smith—Youth Suicide Campus Grants	4,975	5,400	4,975
American Indian/Native Suicide Prevention Initiative	2,944	5,888	5,888
Homelessness Prevention Programs	32,250	39,696	39,696
Older Adult Programs	4,814	4,814	4,814
Minority AIDS	9,283	9,283	9,283
Criminal and Juvenile Justice Programs	6,684	6,684	6,684
SCIENCE AND SERVICE:			
Garrett Lee Smith—Suicide Prevention Resource Center	4,957	4,957	4,957
Information Dissemination and Training	9,001	8,528	8,528
National Registry of Evidence-based Programs & Practices	544	544	544
SAMHSA Health Information Network	2,673	2,644	2,644
Consumer & Consumer Support Technical Assistance Centers	1,927	1,927	1,927
Minority Fellowship Program	4,279	4,279	4,279
Disaster Response	1,054	1,054	1,054
Homelessness	2,306	2,306	2,306
HIV/AIDS Education	974	774	774

Child Trauma.—The Committee continues its strong support for the National Child Traumatic Stress Network [NCTSN]. The recommendation includes \$44,800,000 for the NCTSN in recognition of its contribution to the recovery of children and youth impacted by a wide range of trauma, including physical and sexual abuse, violence in families and communities, natural disasters and terrorism, life-threatening injury and illness, and refugee and war experience. The comparable level for fiscal year 2010 is \$40,800,000. With the additional funding provided, the Committee encourages SAMHSA, in collaboration with the NCTSN, to broaden the national impact of this critical program while at the same time ensuring that the network's expertise and experience in the field of trauma-related disorders is maintained.

The Committee recognizes the extraordinary value of the core data set developed by the National Center for Child Traumatic Stress [NCCTS], which identifies the impact of multiple traumas on the lives of children and the effectiveness of evidence-based treatment and services. Within the funding provided, the Committee again provides \$1,000,000 to the NCCTS for the continued data analysis and reports related to the core data set.

Clinical Training.—The Committee is aware that a new clinical accreditation program aims to ground practitioner training in empirically supported treatments to ensure that mental health and substance abuse treatment providers are scientifically equipped. The Committee is aware that SAMHSA is planning a conference on these issues, in collaboration with relevant professional organizations, and it encourages SAMHSA to continue this collaboration so

that those seeking services are assured of receiving scientifically sound treatment.

Depression.—The Committee notes that depression and bipolar disorder afflict 1 in 5 Americans and are the second most costly medical disorders in the United States, following only heart disease. The Committee recommendation includes \$10,000,000 to implement the Establishing a Network of Health-Advancing National Centers of Excellence for Depression, or ENHANCED, Act. This funding will support the establishment of a national network of depression centers of excellence to help translate academic treatment advances into clinical care. This network will help address the need for earlier clinical detection of depression and new strategies to prevent recurrences of depressive illnesses, as well as ways of reducing their length and severity.

Minority Fellowship Program.—The Committee notes that minorities represent 30 percent of the population and are projected to increase to 40 percent by 2025. Yet only 23 percent of recent doctorates in psychology, social work, and nursing were awarded to minorities. The Committee commends the Minority Fellowship Program for training an increasing number of culturally competent mental health professionals.

Primary and Behavioral Healthcare Integration.—The Committee notes that people with serious mental illness [SMI] die, on average, 25 years earlier than people in the general population. Many of these deaths are caused by preventable conditions such as cardiovascular disease and diabetes. The Committee strongly believes that a crucial element to eliminating this disparity is building new practice models that integrate primary healthcare into community mental health settings. These community programs will provide people with SMI with better access to screening and care management, including wellness programs that encourage more physical activity, better nutrition, help with medications and smoking cessation programs.

The Committee applauds the administration's goal of increasing the lifespan for people with severe mental illness by 10 years by 2018. Because the Committee believes aggressive action is necessary to meet this goal, the Committee has allocated funding for a major expansion of the Primary and Behavioral Health Care Integration grants at SAMHSA. The Committee provides \$54,000,000 for this program, which includes \$14,000,000 provided in discretionary appropriations and \$40,000,000 in transfers from the Prevention and Public Health Fund. The comparable level for fiscal year 2010 is \$34,000,000.

Project LAUNCH.—The Committee reiterates its strong support for this program, which it created in fiscal year 2008 to assist local communities with the integration of behavioral and mental health into primary care settings. The Committee, however, is disturbed that the administration proposes to split management of this program between CMHS and the Center for Substance Abuse Prevention [CSAP], as well as to fund a program evaluation focusing solely on substance abuse prevention. The Committee directs SAMHSA to manage this program exclusively at CMHS, as originally intended. The Committee also intends that activities funded by this program not duplicate activities funded by other programs, such as the new Home Visitation program created by the Patient Protection and Affordable Care Act.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
Children's Hospital Boston, Boston, MA, for Expansion of Mental Health Capacity in Massachusetts Schools	\$200,000
Clifford W. Beers Guidance Clinic, Inc., New Haven, CT, to expand child and family trauma services Family Service Agency of Marin County, San Rafael, CA, for suicide prevention and mental health serv-	100,000
ices	250,000
Help Center-211, Bozeman, MT, for suicide intervention and outreach services	100,000
Lindsey Wilson College, Columbia, KY, for professional development and mental health services for the Ap- palachia region	100,000
Maniilaq Association, Kotzebue, AK, for suicide prevention activities in Northwest Alaska	200,000
Oregon Partnership, Portland, OR, to provide suicide prevention services to soldiers and military families Pen Bay Healthcare, Rockport, ME, for mental health services	200,000 100.000

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

The Committee recommends \$420,774,000 for the community mental health services block grant. This amount is the same as the comparable fiscal year 2010 level and the administration request. The recommendation includes \$21,039,000 in transfers available under section 241 of the Public Health Service Act.

The community mental health services block grant distributes funds to 59 eligible States and territories through a formula based on specified economic and demographic factors. Grant applications must include an annual plan for providing comprehensive community mental health services to adults with a serious mental illness and children with a serious emotional disturbance.

CHILDREN'S MENTAL HEALTH SERVICES

The Committee recommends \$126,214,000, the same as the administration request, for the children's mental health services program. The comparable fiscal year 2010 level for this program is \$121,316,000. This program provides grants and technical assistance to support a network of community-based services for children and adolescents with serious emotional, behavioral, or mental disorders. Grantees must provide matching funds, and services must be coordinated with the educational, juvenile justice, child welfare, and primary healthcare systems.

PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS [PATH]

The Committee recommends \$70,000,000, the same as the administration request, for the PATH Program. The comparable fiscal year 2010 level is \$65,047,000. PATH provides outreach, mental health, case management, and other community support services to individuals with serious mental illness who are homeless or at risk of becoming homeless.

The Committee recognizes that the PATH program makes a significant difference in the lives of homeless persons with mental illnesses. Multidisciplinary teams provide a continuum of services addressing mental illness, co-occurring substance abuse and medical issues. The Committee has provided additional funds to PATH in recognition that it is a key component in ongoing strategies to end chronic homelessness.

PROTECTION AND ADVOCACY

The Committee recommends \$38,380,000 for the protection and advocacy for individuals with mental illness [PAIMI] program. The comparable fiscal year 2010 funding level and the administration request were both \$36,380,000. This program helps ensure that the rights of mentally ill individuals are protected while they are patients in all public and private facilities, or while they are living in the community, including in their own homes. Funds are allocated to States according to a formula based on population and relative per capita incomes. The Committee notes that the PAIMI program is playing an increasing role in correctional facilities due to the fact that people with mental illness frequently do not receive the community supports they need and often end up incarcerated. The Committee recommendation includes additional funding in recognition of the unmet need for protection and advocacy services for the mentally ill.

CENTER FOR SUBSTANCE ABUSE TREATMENT

Appropriations, 2010	\$2,253,051,000
Budget estimate, 2011	2,287,273,000
Committee recommendation	2,272,123,000

The Committee recommends \$2,272,123,000 for substance abuse treatment programs. The comparable fiscal year 2010 level is \$2,253,051,000 and the administration request is \$2,287,273,000. The recommendation includes \$87,796,000 in transfers available under section 241 of the Public Health Service Act. This appropriation funds substance abuse treatment programs of regional and national significance and the substance abuse prevention and treatment block grant to the States.

Programs of Regional and National Significance

The Committee recommends \$473,532,000 for programs of regional and national significance [PRNS]. The comparable fiscal year 2010 level is \$454,460,000 and the administration request is \$488,682,000. The recommendation includes \$8,596,000 in transfers available under section 241 of the Public Health Service Act. Programs of regional and national significance include activities

Programs of regional and national significance include activities to increase capacity by implementing service improvements using proven evidence-based approaches as well as science to services activities which promote the identification of practices thought to have potential for broad service improvement.

Within the total provided for CSAT programs of regional and national significance, the Committee recommendation includes funding for the following activities:

[in thousands of dollars]

Budget activity	Fiscal year 2010	Fiscal year 2011	Committee
	comparable	request	recommendation
CAPACITY: Co-occurring State Incentive Grants Opioid Treatment Programs/Regulatory Activities Screening, Brief Intervention, Referral, and Treatment [SBIRT]	4,263 8,903 29,106	4,113 8,903 37,106	4,113 8,903 29,106

[in thousands of dollars]

Budget activity	Fiscal year 2010 comparable	Fiscal year 2011 request	Committee recommendation
SBIRT	29,106	22,106	29,106
Mental Health/Substance Abuse SBIRT		15,000	
Targeted Capacity Expansion—General	28,989	28,481	28,481
Pregnant & Postpartum Women	16,000	17,350	17,350
Strengthening Treatment Access and Retention	1,775	1,775	1,775
Recovery Community Services Program	5,236	5,236	5,236
Access to Recovery	98,954	108,854	98,954
Children and Families	30,678	30,488	30,488
Treatment Systems for Homeless	42,750	47,360	47,360
Minority AIDS	65,988	65,888	65,888
Criminal Justice Activities	67,635	84,191	84,191
Services Accountability	20,647	20,816	20,816
Prescription Drug Monitoring [NASPER]	2,000	2,000	4,000
SCIENCE AND SERVICE:			
Addiction Technology Transfer Centers	9,081	9,081	9,081
Minority Fellowship Program	547	547	547
Special Initiatives/Outreach	2,400	2,420	2,420
Information Dissemination	4,553	4,353	4,353
National Registry of Evidence-Based Programs and Practices	893	893	893
SAMHSA Health Information Network	4,255	3,782	3,782
Program Coordination and Evaluation	5,214	5,045	5,045

Hepatitis Testing.—The Committee recognizes the high incidence of hepatitis and its often undocumented state, particularly among substance abusers. The Committee commends SAMHSA on its goal of providing HIV testing to 80 percent of all clients accessing the services of its HIV/AIDS grantees and recommends that SAMHSA consider a similar program for hepatitis testing. In addition, the Committee requests that SAMHSA assess the feasibility of a demonstration project to provide persons who use drugs with viral hepatitis prevention services including patient education and testing, as well as to support hepatitis education and training for substance abuse treatment providers.

HIV Screening.—The Committee notes that mental disorders and substance use or dependence are common among people with HIV. However, HIV screening is not widely available in settings where mental health and substance use services are provided. The Committee encourages SAMHSA to explore opportunities to expand HIV screening throughout mental health and substance abuse treatment delivery systems, and to collaborate with the CDC to increase HIV/AIDS training opportunities for providers in these programs. The Committee requests a progress report on the implementation of its HIV screening efforts in the SAMHSA fiscal year 2012 budget justification.

Screening, Brief Intervention, and Referral to Treatment [SBIRT].—The Committee does not provide the additional funds requested by the administration for expanding the SBIRT program. The Committee is very supportive of SBIRT, and notes that research shows that the program can result in significant reductions in alcohol use among problem drinkers when used in healthcare settings. However, the Committee is concerned that the administration proposes to expand the SBIRT program to include mental health disorders, as well as to non-medical settings such as social service centers. The Committee notes that insufficient evidence exists to suggest that SBIRT is effective in these settings, and urges SAMHSA to instead concentrate its efforts on promoting widespread adoption of the existing evidence-based SBIRT model. Substance Abuse Testing.—The Committee continues to support

Substance Abuse Testing.—The Committee continues to support SAMHSA in its efforts to revise its drug testing policies and update its alternative testing matrix to reflect the advances in science and offer an alternative to testers including rapid, hair and oral fluid testing. The Committee requests a progress report on the status of these policy deliberations in its fiscal year 2012 budget justification.

Treatment Drug Courts .- The Committee recommendation includes \$84,191,000, the same as the administration request, for criminal justice activities. The comparable fiscal year 2010 funding level is \$67,635,000. The Committee has included funding at the administration's proposed level for the drug court, ex-offender reentry, and adult criminal justice treatment programs. The Committee has provided increased funding for fiscal year 2011 in the recognition that, although the number of treatment drug courts has grown, the availability of treatment and recovery support services for individuals involved in the criminal justice system remains extremely limited. The Committee expects that SAMHSA shall ensure that applicants for any drug treatment court grant in SAMHSA's criminal justice portfolio continue to demonstrate extensive evidence of working directly and extensively with the corresponding State substance abuse agency in the planning, implementation, and evaluation of the grant.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
City/County Alcohol Drug Programs, Rapid City, SD, for substance abuse and recovery programs Luna County Healthy Start, Deming, NM, for drug abuse treatment services for women Rosebud Sioux Tribe, Rosebud, SD, for a drug and alcohol treatment program	\$200,000 400,000 150,000

Substance Abuse Prevention and Treatment Block Grant

The Committee recommends \$1,798,591,000 for the substance abuse prevention and treatment [SAPT] block grant. The amount is the same as the comparable level for fiscal year 2010 and the administration request. The recommendation includes \$79,200,000 in transfers available under section 241 of the Public Health Service Act. The block grant provides funds to States to support alcohol and drug abuse prevention, treatment, and rehabilitation services. Funds are allocated to the States according to a formula. State plans must be submitted and approved annually.

The Committee is aware that an independent and comprehensive evaluation released in June 2009 found that the SAPT block grant ensures accountability through Federal-State communication, program monitoring, and data reporting. This data reporting includes information on the positive impact services have on jobs, housing and criminal justice activity. In particular, SAPT block grant outcomes data found that, at discharge, 74 percent of clients were abstinent from illegal drugs and 78 percent of clients were abstinent from alcohol.

CENTER FOR SUBSTANCE ABUSE PREVENTION

Appropriations, 2010	\$202,039,000
Budget estimate, 2011	223,075,000
Committee recommendation	222.492.000

The Committee recommends \$222,492,000 for programs to prevent substance abuse. The comparable fiscal year 2010 level is \$202,039,000 and the administration request is \$223,075,000. The Center for Substance Abuse Prevention [CSAP] is the sole Federal organization with responsibility for improving accessibility and quality of substance abuse prevention services.

Programs of Regional and National Significance

The Committee has provided \$222,492,000 for programs of regional and national significance [PRNS]. Through the PRNS, CSAP supports: development of new practice knowledge on substance abuse prevention; identification of proven effective models; dissemination of science-based intervention information; State and community capacity building for implementation of proven, effective substance abuse prevention programs; and programs addressing new needs in the prevention system.

Within the total provided for CSAP programs of regional and national significance, the Committee recommendation includes funding for the following activities:

Budget activity	Fiscal year 2010 comparable	Fiscal year 2011 request	Committee recommendation
CAPACITY:			
Strategic Prevention Framework	111,607	103,511	129,811
State Incentive Grant	99,941	69,682	79,682
Partnerships for Success	11,666	33,829	50,129
Mandatory Drug Testing	5,206	5,206	5,206
Minority AIDS	41,385	41,385	41,385
Performance Management	6,300	6,300	6,300
Sober Truth on Preventing Underage Drinking [STOP Act]	7,000	8,000	11,000
National Adult-Oriented Media Public Service Campaign	1,000	1,000	1,000
Community-based Coalition Enhancement Grants	5,000	6,000	9,000
Intergovernmental Coordinating Committee on the Prevention			
of Underage Drinking	1,000	1,000	1,000
Steroid Use Education Campaign			1,000
Project LAUNCH		9,683	
Prevention Prepared Communities		22,600	
SCIENCE AND SERVICE:			
Fetal Alcohol Spectrum Disorder	9,821	9,821	9,821
Center for the Application of Prevention Technologies	8,511	8,511	8,511
Science and Service Program Coordination	4,789	4,789	4,789
National Registry of Evidence-based Programs and Practices	650	650	650
SAMHSA Health Information Network	2,749	2,548	2,548
Minority Fellowship Program	71	71	71

[In thousands of dollars]

The Committee applauds the administration for proposing a significant funding increase for CSAP. The Committee is concerned, however, that the administration proposes to blend substance abuse and mental health funding throughout SAMHSA. The Committee recognizes that common risk and protective factors exist for both mental illness and substance abuse. However, the Committee notes that not every program will be effective at addressing both issues. Furthermore, the Committee recognizes that many substance abuse prevention programs are unique in focusing on the environmental strategies for preventing drug and alcohol abuse. According to the Task Force on Community Preventive Services at the Centers for Disease Control and Prevention [CDC], many of these strategies have been proven to be effective regarding preventing excessive alcohol use.

The Committee is also concerned that the latest results from the Monitoring the Future survey, funded by the National Institute on Drug Abuse, shows that the perceptions of harm and social disapproval of drug use are declining among youth, and that youth substance use and abuse are beginning to rise. The Committee does not believe that this is the time to homogenize prevention efforts across centers within SAMHSA or to abandon universal prevention efforts to stop substance use before it starts. Given the paucity of resources for bona fide substance use and underage drinking prevention programs and strategies, the Committee instructs that money specifically appropriated to CSAP for substance use prevention purposes shall not be used or reallocated for other programs or initiatives within SAMHSA. In addition, the Committee is instructing SAMHSA to maintain a specific focus on environmental and population based strategies to reduce drug use and underage drinking due to the cost effectiveness of these approaches.

HIV Screening.—Mental disorders and substance use or dependence are common among people with HIV. However, HIV screening is not widely available in settings where mental health and substance use services are provided. The Committee encourages SAMHSA to explore opportunities to expand HIV screening throughout mental health and substance abuse treatment delivery systems, and to collaborate with CDC to increase HIV/AIDS training opportunities for providers in these programs.

Partnerships for Success.-The Committee provides \$50,129,000, an increase of \$38,463,000 for the Partnerships for Success program. The administration requested \$33,829,000 for this program. The Committee applauds CSAP for its Partnerships for Success program, which is designed to achieve quantifiable declines in substance use and abuse rates. The program, which evolved from the Strategic Prevention Framework State Incentive Grant [SIG], helps States partner with organized communities to determine need, leverage resources, set goals, and implement evidence-based approaches to substance abuse prevention. The initiative also includes a financial incentive to those grantees that meet or exceed performance outcomes. The Committee urges SAMHSA to use the additional funds provided to the SIG program to maximize the number of States and tribes eligible for a Partnerships for Success grant. The Committee also expects SAMHSA to ensure that States who receive Partnership for Success grants give current and former drug-free communities grantees priority status as subrecipient grantees when working with communities within their States.

Performance Enhancing Drugs.—The Committee continues to be concerned about the use and abuse of steroids and other performance enhancing drugs by young people. The Committee recommendation includes \$1,000,000 for SAMHSA, in collaboration with the Department of Education, to develop and carry out a costeffective national education campaign focused on preventing the use of anabolic steroids and other performance enhancing drugs by young people. The Committee intends that this campaign should be school-based as well as community-based, and should focus on both athletes and non-athletes.

Prevention Prepared Communities.—The Committee recommendation does not provide funding for the administration's proposed Prevention Prepared Communities initiative. According to the proposed budget, this new program would use the Strategic Prevention Framework to implement evidence-based programs to promote the wellness of individuals aged 9 to 25. While the Committee commends the administration for its commitment to prevention, it believes the proposal would be redundant given the work of Partnerships for Success. As a result, the Committee is redirecting funds for this proposal to the Partnerships for Success program.

Underage Drinking Prevention.—The Committee recommendation includes \$9,000,000 for the Community-based Coalition Enhancement Grant program authorized under the Sober Truth on Preventing [STOP] Underage Drinking Act. The administration requested \$6,000,000 for these grants. STOP Act grantees focus on implementing community-wide strategies which address the broader culture and context regarding underage drinking. The Committee provides additional funds above the administration request in the recognition that STOP Act grants are a cost-effective means of investing Federal dollars in underage drinking prevention activities at the community level.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
Hamakua Health Center, Honoka'a, HI, for a youth anti-drug program	\$200,000
Waimanalo Community Health Center, Waimanalo, HI, for drug abuse prevention	200,000
West Virginia Prevention Resource Center, Charleston, WV, for drug abuse prevention	1,000,000

PROGRAM MANAGEMENT

The Committee recommends \$132,126,000 for program management activities of the agency. The comparable level for fiscal year 2010 is \$101,947,000 and the administration requested \$135,696,000. The recommendation includes \$23,399,000 in transfers available under section 241 of the Public Health Service Act.

The program management activity includes resources for coordinating, directing, and managing the agency's programs. Program management funds salaries, benefits, space, supplies, equipment, travel, and departmental overhead required to plan, supervise, and administer SAMHSA's programs.

The Committee recommendation includes \$19,000,000, the same as the administration request, for the increased costs associated with the agency's data systems and analytic studies. The recommendation will also support a new initiative, proposed by the administration, for the design and implementation of a communitylevel early warning system that will detect the emergence of new drug threats.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

Appropriations, 2010	\$397,053,000
Budget estimate, 2011	610,912,000
Committee recommendation	397,053,000

The Committee recommends \$397,053,000 for the Agency for Healthcare Research and Quality [AHRQ]. This amount is the same as the comparable funding level for fiscal year 2010. The administration requested \$610,912,000 for AHRQ. The Committee recommendation is funded entirely from transfers available under section 241 of the Public Health Service Act. In addition, the Committee recommends that \$17,000,000 be transferred to AHRQ from the Prevention and Public Health Fund.

The Agency for Healthcare Research and Quality was established in 1990 to enhance the quality, appropriateness, and effectiveness of health services, as well as access to such services. In order to fulfill this mission, AHRQ conducts, supports and disseminates scientific and policy-relevant research on topics such as reducing medical errors, eliminating healthcare disparities, using information technology, and comparing the effectiveness of drugs and medical procedures. AHRQ-supported research provides valuable information to researchers, policymakers, healthcare providers, and patients on ways to improve our Nation's health system and make healthcare more affordable.

HEALTH COSTS, QUALITY, AND OUTCOMES

The Committee provides \$267,290,000 for research on health costs, quality and outcomes [HCQO]. The comparable funding level for fiscal year 2010 is \$270,653,000 and the administration requested \$478,899,000 for this activity. In addition, the Committee recommends that \$17,000,000 be transferred to HCQO from the Prevention and Public Health Fund. The HCQO research activity is focused upon improving clinical practice, improving the healthcare system's capacity to deliver quality care, and tracking progress toward health goals through monitoring and evaluation.

progress toward health goals through monitoring and evaluation. Within the total for HCQO, the Committee provides \$35,000,000 for patient-centered outcomes research, also known as comparative effectiveness research [CER]. The administration requested \$272,750,000 for this activity. The comparable funding level for fiscal year 2010 is \$21,000,000. The Committee notes that the Patient Protection and Affordable Care Act [PPACA] created the Patient Centered Outcomes Research Institute as a new non-governmental entity to manage and prioritize this research. Since AHRQ will conduct much of the research funded by this Institute, the Committee did not provide the funding increase for CER requested by the President, as it did not want to duplicate this effort. The Committee recommendation includes sufficient resources for AHRQ to continue evidence generation and systematic reviews already underway. The funding provided will also allow AHRQ to sustain its research infrastructure until the new Institute is fully operational.

The Committee is aware of the valuable work being done by the Centers for Education and Research in Therapeutics [CERTs], which produce scientific data on the safety and effectiveness of prescribed medications and medical devices. The research performed by these Centers, in such areas as the appropriate use of antipsychotics and the safe and effective use of medications by older adults, plays an important role in improving healthcare quality by preventing adverse effects and improving clinical practice. Within the HCQO total, the Committee recommendation includes \$13,463,000, the same as the comparable level for fiscal year 2010, to continue the work of the 14 CERTs and the coordinating center. The administration proposed to eliminate funding for the existing CERTs.

The Committee recommendation for HCQO includes \$10,000,000 for quality measurement activities. This is a new activity authorized under section 3013 of the PPACA. These funds will be used to identify gaps in quality measurement and develop patient-centered measures to fill those gaps. The Committee notes that strong quality measures that fill in current gaps will help reduce geographic variations in care quality and health disparities, improve the delivery of healthcare services, eliminate waste and improve efficiency. In providing these funds, the Committee recognizes the need for a measures development process that is transparent, consensus-based, involves input from stakeholders and other relevant organizations, and includes strong conflict of interest policies.

Building the Next Generation of Researchers.—The Committee encourages AHRQ to offer more pre- and post-doctoral training grants and fellowships for both clinician and non-clinician researchers. This investment in the next generation of researchers will help build capacity to respond to increasing demands for health services research and will ensure America stays competitive in the global research market.

Chronic Pain Conditions in Women.—The Committee notes that up to 50 million American women suffer from one or more poorly understood and often overlooked chronic pain conditions. The Committee urges AHRQ to analyze the healthcare expenditures associated with chronic fatigue syndrome, endometriosis, fibromyalgia, interstitial cystitis, temporomandibular [TMJ] disorders, and vulvodynia. The analysis should quantify costs associated with the failure to promptly and adequately diagnose and treat these conditions, as well as those incurred by employers due to lost productivity, increased number of sick days and increased disability claims.

Clinical Preventive Services Research.—The Committee has included \$10,000,000 in transfers from the Prevention and Public Health Fund for clinical preventive services research at AHRQ. This research would allow the agency to address new research priorities as described in the Patient Protection and Affordable Care Act [PPACA], and as determined by the Secretary and the National Prevention and Health Promotion strategy. The Committee intends that these funds will be used to focus on the areas of health risk assessment, patient safety, health equity, and implementing clinical preventive services in primary care practice.

Clinical Trial Recruitment.—The Committee recognizes that clinical trials play an important role in the development of biomedical research, in addition to providing treatment options to patients with understudied or rare conditions. The Committee encourages AHRQ to collaborate with voluntary health organizations to expand

and improve patient registries, which will connect patients to resources for treatment and assist clinical researchers in recruitment.

HIV Research Network.—The Committee recognizes the HIV Research Network [HIVRN] as a unique source for information on the cost and cost-effectiveness of HIV care in the United States and notes that HIVRN data and analyses are critical to implementing health reform and an effective National HIV/AIDS Strategy. Within the HCQO total, the Committee provides \$1,413,000, the same as the comparable level for fiscal year 2010, to the HIVRN to continue evaluating healthcare utilization and clinical outcomes in HIV-infected children, adolescents and adults. The administration did not request funding for this activity.

Liver Disorders.—The Committee encourages AHRQ to develop a comprehensive agenda that would promote health services research and implementation science with regard to the broad spectrum of liver disorders.

Lyme Disease.—The Committee continues to encourage AHRQ to create a comprehensive clearinghouse of peer-reviewed literature on tick-borne diseases. It should include literature on persistent infection organized for use by the scientific community, treating physicians, and the public. In the posting of treatment guidelines for Lyme disease, the Committee supports AHRQ's efforts to reflect the full spectrum of creditable science and diverse clinical viewpoints.

Preterm Birth and Pregnancy-related Depression.—The Committee continues to be concerned with the rate of pre-term births in the United States. The Committee believes that AHRQ's comparative effectiveness research may lead to a better understanding of the range of interventions for preterm labor, such as different drugs, tocolytics, preventive tools, and the role of ultrasound care treatments and practices in the diverse patient populations in which they are used. Additionally, the Committee encourages AHRQ to support research evaluating the efficacy of perinatal/ postpartum screening tools and whether they can impact the outcome of pregnancy and perinatal depression.

Restoring Innovation and Competitiveness.—Investigator-initiated research forms the backbone of AHRQ's ability to improve healthcare with creative and innovative approaches to ongoing and emerging healthcare issues. The Committee recommendation includes \$40,360,000, the same as the comparable funding level for fiscal year 2010, for investigator-initiated research. This funding level will allow ARHQ to support new investigator-initiated research grants to advance discovery and the free marketplace of ideas. The Committee urges AHRQ to provide these opportunities through its Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research portfolio, as well as other core programs, including the Effective Health Care program.

U.S. Preventive Services Task Force [USPSTF].—The Committee provides \$11,700,000 for the USPSTF. The recommendation includes \$4,700,000 in evaluation transfers, consistent with the budget request, and \$7,000,000 in transfers from the Prevention and Public Health Fund.

MEDICAL EXPENDITURES PANEL SURVEYS

The Committee provides \$59,300,000, the same as the administration request, for medical expenditures panel surveys [MEPS]. The comparable funding level for fiscal year 2010 is \$58,800,000. MEPS collects detailed information annually from families regarding healthcare use and expenditures, private and public health insurance coverage, and the availability, costs and scope of health insurance benefits. The data from MEPS is used in the development of economic models projecting the costs and savings of proposed changes in policy, as well as estimates of the impact of policy changes on payers, providers, and patients.

PROGRAM SUPPORT

The Committee recommends \$70,463,000 for program support. The comparable funding level for fiscal year 2010 is \$67,600,000 and the administration requested \$72,713,000. The Committee recommendation does not include \$2,250,000 requested by the administration for 15 new staff to support the patient-centered outcomes research portfolio. Since it did not provide the funding increase requested by the administration for this research, the Committee does not believe additional staffing is necessary.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

GRANTS TO STATES FOR MEDICAID

Appropriations, 2010	\$220,962,473,000
Budget estimate, 2011	173,143,799,000
Committee recommendation	173,143,799,000

The Committee recommends \$173,143,799,000 in mandatory funding for Grants to States for Medicaid. This is the same amount as the administration's request for fiscal year 2011. The fiscal year 2010 comparable level was \$220,962,473,000. The fiscal year 2011 recommendation excludes \$86,789,382,000 in fiscal year 2010 advance appropriations for fiscal year 2011. In addition, \$86,445,289,000 is provided for the first quarter of fiscal year 2012, as requested by the administration.

The Medicaid program provides medical care for eligible low-income individuals and families. It is administered by each of the 50 States, the District of Columbia, Puerto Rico, and the territories. Federal funds for medical assistance are made available to the States according to a formula, which determines the appropriate Federal matching rate for State program costs. This matching rate is based upon the State's average per capita income relative to the national average, and shall be no less than 50 percent.

PAYMENTS TO HEALTH CARE TRUST FUNDS

Appropriations, 2010	\$214,590,070,000
Budget estimate, 2011	229,664,000,000
Committee recommendation	229,664,000,000

The Committee recommends \$229,664,000,000 in mandatory funding for Payments to Healthcare Trust Funds. This is the same amount as the administration's request for fiscal year 2011. The fiscal year 2010 comparable level was \$214,590,070,000. This entitlement account includes the general fund subsidy to the Federal Supplementary Medical Insurance Trust Fund for Medicare part B benefits and for Medicare part D drug benefits and administration, plus other reimbursements to the Federal Hospital Insurance Trust Fund for part A benefits and related administrative costs that have not been financed by payroll taxes or premium contributions.

The Committee provides \$173,873,000,000 for the Federal payment to the Supplementary Medical Insurance Trust Fund. This payment provides matching funds for premiums paid by Medicare part B enrollees. The Committee further provides \$54,393,000,000 for the general fund share of benefits paid under Public Law 108– 173, the Medicare Prescription Drug, Improvement and Modernization Act of 2003. The Committee includes bill language requested by the administration providing indefinite authority for paying the general revenue portion of the part B premium match and provides resources for the part D drug benefit program in the event that the annual appropriation is insufficient.

The Committee recommendation does not include funding for hospital insurance for the uninsured, consistent with the budget request. The Committee also recommends \$275,000,000 for the Federal uninsured benefit payment. This payment reimburses the Hospital Insurance Trust Fund for the cost of benefits provided to Federal annuitants who are eligible for Medicare.

The Committee recommendation also includes \$382,000,000 to be transferred to the Supplementary Insurance Trust Fund as the general fund share of part D administrative expenses. The Committee recommendation includes \$561,000,000 in reimbursements to the Health Care Fraud and Abuse Control [HCFAC] fund.

PROGRAM MANAGEMENT

Appropriations, 2010	\$3,470,242,000
Budget estimate, 2011	3,601,147,000
Committee recommendation	3,574,527,000

The Committee recommends \$3,574,527,000 for CMS program management. The administration requested \$3,601,147,000. The fiscal year 2010 comparable level was \$3,470,242,000.

Research, Demonstrations, and Evaluations

The Committee recommends \$41,300,000 for research, demonstrations, and evaluation activities. The Committee includes sufficient funding to fulfill the President's request for: the Medicare Current Beneficiaries Survey; the Real Choice Systems Change grants; other activities; and continuations of the demonstrations begun in fiscal year 2010.

CMS research and demonstration activities facilitate informed rational Medicare and Medicaid policy choices and decisionmaking. These studies and evaluations include projects that measure the impact of Medicare and Medicaid proposed policy changes, measure the impact of Medicare and Medicaid on healthcare costs, measure patient outcomes in a variety of treatment settings, and develop alternative strategies for reimbursement, coverage, and program management. *Diabetes.*—According to research conducted by AHRQ, the Medicare program has costs of up to \$1,300,000,000 attributable to diabetes-related hospital costs that could potentially be avoided by proper disease management. Using insulin is one of the most effective ways to lower blood sugar levels and manage diabetes. The Committee encourages CMS to consider conducting research into the best delivery method for insulin therapy to reduce dosing errors and lower annual treatment costs.

Graduate Nursing Education Pilot .- The Committee recognizes the value of advanced practice registered nurses [APRNs] for improving the accessibility, quality, and affordability of healthcare. Section 5509 of the Patient Protection and Affordable Care Act includes a demonstration project to test the establishment of a Medicare Graduate Nursing Education program. The Committee encourages CMS to begin the design of this initiative. In this design, the Committee encourages CMS to test a full geographically representative mix of small and large, rural and urban APRN educational programs utilizing different mixes of hospital and non-hospital community-based clinical training sites. In addition, the Committee encourages CMS to assure that reasonable costs for the demonstration take into account all types of clinical training regularly employed in and appropriate to the training of APRNs and are not reduced by a factor related to the proportion of hospital inpatient days that are Medicare inpatient days. The Committee requests a progress report in the fiscal year 2012 budget justification.

Prosthetic Devices.—The Committee is aware of findings in peer reviewed literature that identify significant inconsistencies in the alignment of prosthetic devices through the fitting process. Improper alignment for persons with limb loss can result in trauma to the soft tissue, decreased balance, and co-morbidities ranging from inactivity to back pain and increased stress on the hip and knee joints. Consistent prosthesis alignment may produce costs savings to the Medicare program through reduced need for socket replacements. The Committee encourages the CMS and its Alphanumeric Working Group to consider utilizing a unique Healthcare Common Procedure Coding System number for technologies and services that produce consistent prosthesis alignment.

Psychotropic Drugs and Children.—The Committee is aware of findings from recent research showing that poor children are more likely to be prescribed antipsychotic medications than their peers. In addition to possibly causing serious long-term health problems for the children, this pattern dramatically increases Medicaid costs. CMS is urged to support research into reasons for this disparity and to determine the cost of this practice to the Medicaid program. CMS also is urged to work with existing treatment programs to identify more effective methods for treating these children and reducing their dependence on drugs to manage behavior.

The Committee includes \$2,500,000 for Real Choice Systems Change Grants for Community Living to States to fund initiatives that establish enduring and systemic improvements in long-term services and supports.

The Committee strongly supports efforts by CMS to transform and improve quality and efficiency under the Medicaid program, particularly including expansions to the Home and Community Based Service programs and the creation of health homes for eligible beneficiaries. The Committee urges CMS to ensure that the implementation of such initiatives involve providers in ensuring beneficiary access to necessary food and nutrition services integral to the proper management of chronic illness in a non-institutional setting.

The Committee recommendation also includes bill language requiring that funds be provided to the following organizations in the amounts specified:

	Amount
lowa Prescription Drug Corporation, Urbandale, IA, for programs to reduce the cost of prescription drugs University of Mississippi, University, MS, for the Medication Use and Outcomes Research Group	\$500,000 800,000

Medicare Operations

The Committee recommends \$2,335,862,000 for Medicare operations. The administration requested \$2,356,604,000; the comparable funding level for fiscal year 2010 was \$2,335,862,000.

The Medicare operations line item covers a broad range of activities including claims processing and program safeguard activities performed by Medicare contractors. These contractors also provide information, guidance, and technical support to both providers and beneficiaries. In addition, this line item includes a variety of projects that extend beyond the traditional fee-for-service arena.

The Committee recommendation includes \$9,120,000 for CMS Medicare contracting reform activities and includes bill language that extends the availability of those funds until September 30, 2012.

The Committee recommendation includes \$156,000,000 for contract costs for the Healthcare Integrated General Ledger Accounting System and includes bill language that extends the availability of those funds until September 30, 2012.

The Committee recommendation includes \$363,200,000 for Medicare and You, an increase of \$51,700,000 over fiscal year 2010. This funding supports beneficiary materials, contact centers and support services.

The Committee recommendation includes \$68,000,000 for research remaining from the Medicare Improvement for Patients and Providers Act of 2008. Sufficient funding is included to meet the statutory deadline on the section 153 provisions on end-stage renal disease and begin work on section 131 provisions on quality reporting for physicians and the section 132 provision on e-prescribing.

The Committee intends that all other activities be funded at the level requested in the fiscal year 2011 budget.

Health Care Data Improvement Initiative

The Committee recommends \$110,000,000 for the Health Care Data Improvement Initiative. This is the same amount as the level requested in the fiscal year 2011 budget. This activity was not funded in fiscal year 2010.

State Survey and Certification

The Committee recommends \$362,000,000 for Medicare State survey and certification activities. This is the same amount as the administration's request. The fiscal year 2010 funding level was \$346,900,000.

Survey and certification activities ensure that institutions and agencies providing care to Medicare and Medicaid beneficiaries meet Federal health, safety, and program standards. On-site surveys are conducted by State survey agencies, with a pool of Federal surveyors performing random monitoring surveys.

High Risk Insurance Pools

The Committee has not included funding for the High Risk Insurance Pools. The fiscal year 2010 level was \$55,000,000. The administration did not request funds for this program. The Committee notes that the Patient Protection and Affordable Care Act provides \$5,000,000,000 and a new structure for this purpose.

Federal Administration

The Committee recommends \$725,365,000 for Federal administration costs. This amount is the same as the budget request. The fiscal year 2010 funding level was \$696,880,000.

The Committee congratulates CMS for updating its coverage to include HIV testing for at-risk beneficiaries. The Committee urges CMS to update its outreach information to advise beneficiaries of this important new benefit.

The Committee also requests that HRSA and CMS convene a working group to ensure that all phases of the 340B drug discount program are administered without redundancy or contradiction by the two agencies of jurisdiction.

HEALTH CARE FRAUD AND ABUSE CONTROL

Appropriations, 2010	\$311,000,000
Budget estimate, 2011	561,000,000
Committee recommendation	561,000,000

The Committee recommends \$561,000,000, to be transferred from the Medicare trust funds, for healthcare fraud and abuse control activities. This amount, in addition to the \$1,172,683,000 in mandatory monies for these activities, will provide a total of \$1,733,683,000 for healthcare fraud and abuse control activities in fiscal year 2011.

The Committee intends the funds to be allocated as they were requested in the administration budget for fiscal year 2011.

Reducing fraud, waste, and abuse in Medicare and Medicaid continues to be a top priority of the Committee. The Committee is pleased by the progress being made by strike teams and is strongly supportive of the proposed Health Enforcement Action Teams Initiative. The Committee urges CMS to continue to focus on largescale overpayments, off-label prescribing, and systemic pricing issues.

Administration for Children and Families

PAYMENTS TO STATES FOR CHILD SUPPORT ENFORCEMENT AND FAMILY SUPPORT PROGRAMS

Appropriations, 2010	3,788,449,000
Budget estimate, 2011	2,482,814,000
Committee recommendation	2,482,814,000

The Committee recommends \$2,482,814,000 in fiscal year 2011 mandatory funds for payments to States for child support enforcement and family support programs. This is in addition to the \$1,100,000,000 appropriated last year as an advance appropriation for the first quarter of fiscal year 2011. The Committee recommendation is the same as the budget request under current law. The comparable fiscal year 2010 funding level is \$3,788,449,000, which included costs from an enhanced Federal matching provision in the Recovery Act that expires on September 30, 2010. In addition, the Committee recommends \$1,200,000,000, the same as the budget request, in advance funding for the first quarter of fiscal year 2012.

These payments support the States' efforts to promote the selfsufficiency and economic security of low-income families. These funds also support efforts to locate noncustodial parents, determine paternity when necessary, and establish and enforce orders of support.

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM

Appropriations, 2010	\$5,099,223,000
Budget estimate, 2011	3,300,000,000
Committee recommendation	3,300,000,000

The Committee recommends \$3,300,000,000, the same as the budget request, in discretionary funding for fiscal year 2011 for the low income home energy assistance program [LIHEAP]. The comparable fiscal year 2010 funding level is \$5,099,223,000.

In addition to this discretionary funding, the budget request includes a legislative proposal for a trigger that would make additional mandatory funding available based on changes in energy prices and the number of households living in poverty. This trigger, if enacted, is estimated to make an additional \$2,000,000,000 in mandatory LIHEAP funding available in fiscal year 2011, for a total program level of \$5,300,000,000. The Committee recommendation assumes enactment of this proposal.

LIHEAP provides home heating and cooling assistance to low-income households, generally in the form of payments to energy vendors on behalf of the recipient. States have considerable flexibility in administering their programs, including determining benefit amounts and eligibility requirements within broad Federal guidelines. This appropriation supports State formula grants and the contingency fund.

The Committee recommendation includes \$2,709,672,000 for the State formula block grant. The comparable fiscal year 2010 funding level is \$4,509,672,000 and the budget request is \$2,510,000,000. LIHEAP block grants are awarded to States, territories, Indian tribes, and tribal organizations, according to a statutory formula, based in part on each State's share of home energy expenditures by low-income households. The Committee includes similar bill language to that used since fiscal year 2009 adjusting the formula for distributing these funds to States and ensuring a comparable distribution of funds as in recent years.

The Committee recommendation includes \$590,328,000 for the contingency fund. The comparable fiscal year 2010 funding level is \$589,551,000 and the budget request is \$790,000,000. The Committee does not include bill language making the contingency fund available until expended, as proposed by the administration. The contingency fund may be used to provide additional assistance to one or more States adversely affected by extreme heat or cold, significant price increases, or other causes of energy-related emergencies.

The Committee is concerned about a recent Government Accountability Office [GAO] investigation that found misuse of LIHEAP funds, including instances of State agencies providing assistance to individuals over the income eligibility limit and applicants using the information of deceased or otherwise ineligible individuals to increase their assistance payment. The Committee strongly encourages ACF to continue to evaluate internal controls and to work with State LIHEAP administrators, including exploring the use of existing verification tools, to prevent fraud and abuse within the program. The Committee directs HHS to provide a briefing to the Committees on Appropriations of the House of Representatives and the Senate within 30 days of enactment on controls currently in place to prevent misuse of LIHEAP funds; any additional steps that could be taken, legislative, regulatory or otherwise, to further improve program integrity; and any obstacles in the adoption of these additional steps.

REFUGEE AND ENTRANT ASSISTANCE

Appropriations, 2010	\$730,817,000
Budget estimate, 2011	877,602,000
Committee recommendation	834,602,000

The Committee recommends \$834,602,000 for refugee and entrant assistance. The comparable fiscal year 2010 funding level is \$730,817,000 and the fiscal year 2011 budget request is \$877,602,000. The refugee and entrant assistance program is designed to assist refugees, asylees, Cuban and Haitian entrants, trafficking victims, and torture victims (summarized below as "refugees") to become employed and self-sufficient as quickly as possible. It also funds shelter and services for unaccompanied alien children who are in Federal custody awaiting adjudication of their immigration status.

Transitional and Medical Services

The Committee recommendation includes \$392,000,000 for transitional and medical assistance. The comparable fiscal year 2010 funding level is \$353,281,000 and the budget request is \$417,000,000.

Transitional and medical services provide grants to States and nonprofit organizations to provide up to 8 months of cash and medical assistance to incoming refugees as well as foster care services to unaccompanied minors. It also funds the voluntary agency matching grant program that provides grants to resettlement agencies to provide comprehensive services, including case management, job development, job placement, and interim housing and cash assistance, with the goal of refugees becoming self-sufficient within their first 4 months. Refugees enrolled in this program are not eligible for regular transitional and medical assistance. The Committee continues to support the voluntary agency matching grant program and encourages the Office of Refugee Resettlement [ORR] to explore the continued expansion of this program.

The Committee does not include funding for a no-year contingency fund proposed by the administration. The Committee understands the uncertainty in developing these estimates but also notes that the budget request assumes refugees will receive cash and medical assistance for a full 8 months, and bill language provides for the extended availability of these funds for 2 years.

Victims of Trafficking

The Committee recommendation includes \$10,814,000 for victims of trafficking. The comparable fiscal year 2010 funding level is \$9,814,000, the same as the fiscal year 2011 budget request. This program supports a national network for identifying, certifying, and providing comprehensive services to international victims of trafficking. The Committee notes that only an estimated 2 percent of international trafficking victims in the United States are identified each year and has provided additional funding to increase efforts to identify and provide services to trafficking victims.

Social Services

The Committee recommendation includes \$187,005,000 for social services. The comparable fiscal year 2010 funding level is \$154,005,000 and the budget request is \$179,005,000. These funds include formula and discretionary grants to States and nonprofit organizations to provide a variety of employment and support services to incoming refugees.

The current economic conditions have continued to make it difficult for refugees to find and maintain employment. The Committee has included additional funding, above the budget request, to increase discretionary activities to help refugees address barriers to employment; connect to other Federal, State, and related support services; and, in the worst cases, prevent or resolve homelessness. Within the total for social services, the Committee recommendation includes not less than \$15,000,000 for intensive case management activities to provide comprehensive services to refugees and not less than \$10,000,000 for emergency housing assistance.

The Committee recommendation also includes up to \$18,000,000 for the refugee school impact program. This program provides grants to support school districts with significant populations of refugee children. The comparable fiscal year 2010 funding level is \$15,000,000. The Committee intends that the additional funding should be used to serve school districts impacted by Haitian children and families coming to the United States because of the earthquake on January 12, 2010. The Committee has included bill language specifying that these funds should be used to serve both Haitian national and United States citizens formerly living in Haiti and arriving in the United States between January 12, 2010 and May 31, 2010.

Preventive Health

The Committee recommendation includes \$4,748,000 for preventive health. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program funds grants to coordinate and promote refugees' access to health screening, treatment, and follow-up services.

Targeted Assistance

The Committee recommendation includes \$48,590,000 for targeted assistance. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. The targeted assistance program provides additional funds to States with an influx of refugee arrivals and a high concentration of refugees facing difficulties achieving self-sufficiency.

Unaccompanied Alien Children

The Committee recommendation includes \$179,357,000 for unaccompanied alien children. The comparable fiscal year 2010 funding level is \$149,291,000 and the budget request is \$207,357,000. The unaccompanied alien children program provides shelter and related services to unaccompanied alien minors apprehended in the United States by the Department of Homeland Security [DHS] or other law enforcement agencies. Children are taken into ORR's care pending resolution of their claims for relief under U.S. immigration law or release to an adult family member or guardian.

The Committee does not include additional funding to con-centrate more shelter space within 250 miles of the border, as requested by the administration. The Committee supports the initiative to limit the travel time of unaccompanied alien children between DHS's and ORR's care. However, the Committee does not support the specific initiative to move 65 percent of beds within 250 miles of the border by 2012 without a comprehensive evaluation of the support services available to children in these areas compared to those in other shelter locations across the country, and an evaluation of the costs of such an initiative compared to savings from reducing transportation costs. The Committee notes that over 65 percent of beds are already located within 350 miles of the border. The Committee also notes that ORR is developing a request for a more general independent evaluation of the UAC program to determine if the program is operating consistent with child welfare best practices. The Committee encourages ORR to incorporate the findings from this evaluation in any future decisions regarding concentrating shelters closer to the border.

The Committee recommendation fully funds all other shelter, medical, and support services costs included the budget request, including family reunification services, background checks, home studies, placement follow-up services, and pro bono legal services. The reduction below the budget request reflects the specific costs of moving additional beds within 250 miles of the border.

Victims of Torture

The Committee recommendation includes \$12,088,000 for victims of torture. The comparable fiscal year 2010 funding level is \$11,088,000, the same amount as the budget request. This program provides treatment, social, and legal services to victims of torture and training to healthcare providers on treating the physical and psychological effects of torture.

PAYMENTS TO STATES FOR THE CHILD CARE AND DEVELOPMENT BLOCK GRANT

Appropriations, 2010	\$2,126,757,000
Budget estimate, 2011	2,927,081,000
Committee recommendation	3,127,081,000

The Committee recommends \$3,127,081,000 for the child care and development block grant [CCDBG]. The budget request is \$2,927,081,000 and the comparable fiscal year 2010 funding level is \$2,126,757,000. The Recovery Act included an additional \$2,000,000,000 for the CCDBG, available through fiscal year 2010. The CCDBG is a formula grant to States to provide low-income families with financial assistance to pay for child care. It also supports quality improvement activities to increase availability and access to quality child care.

In addition to these discretionary funds, States receive mandatory funding through the child care entitlement to States program. The authorization for these mandatory funds expires at the end of fiscal year 2010. The budget request includes a proposal to increase this mandatory funding by \$800,000,000, but it is unclear whether this increase will be included in the CCDBG reauthorization. Without such an increase, States would be forced to cut child care subsidies to the low-income families that depend on them to maintain employment because Recovery Act funding will no longer be available. The \$200,000,000 increase recommended by the Committee would prevent such a cut and maintain the fiscal year 2010 program level which included Recovery Act funding.

The Committee has included specific set-asides in bill language that provide targeted resources to specific policy priorities: \$26,805,000 for resource and referral programs and school-aged child care activities; \$9,910,000 for child care research and evaluation activities; and \$398,994,000 for child care quality activities, including \$146,328,000 specifically for infant care quality. These quality funds are provided in addition to the 4 percent quality setaside established in the authorizing legislation. The Committee continues to provide these additional quality funds because of the considerable research showing the importance to child development and school readiness of serving children in high-quality child care settings, which include adequately compensated, nurturing providers who are specially trained in child development.

The Committee recommendation for resource and referral activities includes \$1,000,000 to continue support for a national toll-free hotline that provides consumer education materials and assists families in accessing local information on child care options.

SOCIAL SERVICES BLOCK GRANT

Appropriations, 2010	\$1,700,000,000
Budget estimate, 2011	1,700,000,000
Committee recommendation	1,700,000,000

The Committee recommends \$1,700,000,000 in mandatory funds for fiscal year 2011 for the social services block grant [SSBG]. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. The SSBG is a flexible source of funding that allows States to provide a diverse array of services to lowincome children and families, the disabled and the elderly.

The Committee continues to regard the SSBG as a critical source of funding for services that protect children from neglect and abuse, including providing foster and respite care, as well as related services for children and families, persons with disabilities, and older adults. The Committee recognizes the importance of this program, especially in providing mental health and counseling services to underserved populations, and recommends continued usage and flexibility of these funds for such purposes.

CHILDREN AND FAMILY SERVICES PROGRAMS

Appropriations, 2010	\$9,313,180,000
Budget estimate, 2011	10,312,070,000
Committee recommendation	10,359,727,000

The Committee recommends \$10,359,727,000 for fiscal year 2011 for children and families services programs. The comparable funding level for fiscal year 2010 is \$9,313,180,000 and the budget request is \$10,312,070,000. The recommendation includes an additional \$5,762,000 in transfers available under section 241 of the Public Health Service Act.

This appropriation supports a variety of programs for children, youth, and families; the developmentally disabled; Native Americans; victims of child abuse, neglect and domestic violence; and other vulnerable populations.

Head Start

The Committee recommends \$8,223,958,000, the same as the budget request, for Head Start. The comparable funding level for fiscal year 2010 is \$7,233,680,000. The American Recovery and Reinvestment Act (Recovery Act) included \$2,100,000,000 for Head Start, available through fiscal year 2010.

Head Start provides comprehensive development services for lowincome children and families that emphasize cognitive and language development, socio-emotional development, physical and mental health, and parent involvement to enable each child to develop and function at his or her highest potential. At least 10 percent of enrollment opportunities in each State are made available to children with disabilities.

The Committee recommendation allows Head Start to serve approximately 978,000 low-income children and maintain the increase in children served because of Recovery Act funding in fiscal years 2009 and 2010. The Committee has also included bill language to define Head Start slots funded with Recovery Act funds as part of the base grant amount for purposes of formula allocations and to

allow additional funds to be used for quality improvement activities. The Improving Head Start for School Readiness Act of 2007 included several provisions to improve classroom and teacher quality, including credentialing requirements that become effective October 1, 2011. The Committee has included the full budget request to ensure grantees are able to provide quality, comprehensive early childhood services.

At the same time, the Committee is concerned by a recent Government Accountability Office [GAO] undercover investigation at Head Start centers that revealed abuse of eligibility requirements, including grantees enrolling families slightly over the income eligibility limit or who are otherwise ineligible into the program. The Committee strongly urges the Office of Head Start [OHS] to continue to work with grantees to ensure they are aware of their legal obligations to verify the eligibility of each child served in Head Start programs, including the serious consequences of falsifying eligibility determinations, and to increase monitoring of Head Start grantees, with a particular focus on unannounced visits. The Committee notes that in conducting its investigation, GAO contacted over 550 centers and found only 44 with current openings. This illustrates the demand for the comprehensive early childhood services Head Start programs provide, but also the need to ensure these funds are properly used.

The Committee notes that the Improving Head Start for School Readiness Act of 2007 allows Head Start grantees to apply with HHS to transition from part-day to full-day services, and from Head Start to Early Head Start slots. Only a fraction of eligible infants and toddlers are currently served by the Early Head Start program, and the Committee encourages OHS to work with grantees to ensure they are aware of these options, particularly those with current openings. The Committee also notes that OHS is promulgating regulations to implement provisions of the Improving Head Start for School Readiness Act of 2007 concerning the re-competition of Head Start grants, the first time grantees will undergo re-competition, which will provide another check to ensure that grantees are properly and effectively managing their Head Start centers.

Consolidated Runaway and Homeless Youth Program

The Committee recommends \$104,734,000 for the consolidated runaway and homeless youth program. The comparable funding level for fiscal year 2010 is \$97,734,000, the same as the budget request. This program consists of the basic center program, which provides temporary shelter, counseling, and after-care services to runaway and homeless youth under age 18 and their families, and the transitional living program, which provides longer-term shelter and services for older youth. Funding also supports a national tollfree runaway and homeless youth crisis hotline that responds to between 100,000 and 120,000 calls annually.

Basic centers and transitional living programs provide services to help address the needs of some of the estimated 1.6 million runaway and homeless youth, many of whom are running away from unsafe or unhealthy living environments. These programs have been proven effective at lessening rates of family conflict and parental abuse, as well as increasing school participation and the employment rates of youth.

The current economic climate has put increasing pressure on families which has in turn increased the number of runaway and homeless youth. The Committee has included additional funding for this program, and other runaway and homeless youth programs at ACF and the Department of Education, to address an increase in this vulnerable population.

Runaway Youth Prevention Program

The Committee recommends \$18,971,000 for the runaway youth prevention program. The comparable funding level for fiscal year 2010 is \$17,971,000, the same as the budget request. This competitive grant program awards funds to private nonprofit agencies for the provision of services to runaway, homeless, and street youth. Funds may be used for street-based outreach and education, including treatment, counseling, provision of information, and referrals for these youths, many of whom have been subjected to, or are at risk of being subjected to, sexual abuse.

Child Abuse Programs

The Committee recommends \$105,519,000 for child abuse programs. The comparable fiscal year 2010 funding level is \$97,244,000 and the budget request is \$107,244,000. The recommendation includes \$26,535,000 for State grants, \$37,295,000 for discretionary activities, and \$41,689,000 for community-based child abuse prevention. These programs seek to improve and increase activities that identify, prevent, and treat child abuse and neglect through State grants, technical assistance, research, demonstration, and service improvement.

Within the total for child abuse discretionary activities, the Committee recommendation includes \$10,000,000, as requested by the administration, for a new competitive grant program to support States' implementation and increased use of evidenced-based child maltreatment prevention programs and activities. This program will focus on families with very young children who are at the greatest risk of child maltreatment, and will include evidencebased prevention strategies to promote parental resilience, knowledge of parenting and child development, nurturing and attachment, concrete support, and social connections.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
Addison County Parent Child Center, Middlebury, VT, for childcare and parental education programs	\$100,000
County of Contra Costa, Martinez, CA, for an initiative for children and adolescents exposed to domestic violence	350,000
Dakota County, Hastings, MN, for a home visitation program for at-risk infants and toddlers and their	200.000
families Georgia State University, Atlanta, GA, for child abuse prevention education services	300,000 100.000
Nez Perce Tribe, Lapwai, ID, for child abuse prevention	100,000
South Carolina Department of Education, Columbia, SC, for child abuse prevention education services	100,000
Southern Nevada Health District, Las Vegas, NV, for a home visitation program for low-income first-time mothers	400,000
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Abandoned Infants Assistance

The Committee recommends \$11,628,000 for abandoned infants assistance. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program provides grants to public and private community and faith-based organizations to develop, implement, and operate demonstration projects that prevent the abandonment of infants and young children impacted by substance abuse and HIV. Funds may be used to provide respite care for families and caregivers, allow abandoned infants and children to reside with their natural families or in foster care, and carry out residential care programs for abandoned infants and children who are unable to reside with their families or be placed in foster care.

Child Welfare Services

The Committee recommends \$281,744,000, the same as the budget request, for child welfare services. The comparable fiscal year 2010 funding level is \$281,691,000. This program helps State and tribal public welfare agencies improve their child welfare services with the goal of keeping families together. States and tribes provide a continuum of services that prevent child neglect, abuse, or exploitation; allow children to remain with their families, when appropriate; promote the safety and permanence of children in foster care and adoptive families; and provide training and professional development to the child welfare workforce.

Child Welfare Training

The Committee recommends \$27,207,000 for child welfare training. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. These discretionary grants are awarded to institutions of higher learning and other nonprofit organizations for demonstration projects that encourage experimental and promising types of child welfare services, as well as projects that improve education and training programs for child welfare service providers.

Within this amount, the Committee recommendation includes \$20,000,000, as requested by the administration, for the innovative approaches to foster care program. This continues funding for 5year demonstration projects started in fiscal year 2010 to improve the outcomes of children and families in foster care, particularly those with long-term involvement.

The Committee encourages the Administration for Children and Families to develop a federally supported, centralized Web site that includes materials and information relevant to the needs of foster youth who are aging out of the system. This website should provide detailed information about relevant Federal and State programs, child welfare advocacy agencies, and nonprofit and community organizations dedicated to serving foster youth.

Adoption Opportunities

The Committee recommends \$39,332,000, the same as the budget request, for adoption opportunities. The comparable fiscal year 2010 funding level is \$26,379,000. The budget request eliminates the more narrowly focused adoption awareness program and redi-

rects that funding to the adoption opportunities program. The Committee agrees with this consolidation. Its funding recommendation for the combined program is equal to the total of the two programs in fiscal year 2010.

The adoption opportunities program funds grants that eliminate barriers to adoption and help find permanent homes for children who would benefit from adoption, particularly children with special needs. The adoption awareness program provides grants to train health center staff to inform pregnant women about adoption and to make referrals on request to adoption agencies. It also funds the planning, development, and operation of a national campaign to inform the public about the adoption of children with special needs. The adoption opportunities program has broad authority to fund these types of awareness activities, and will continue to fund them in the consolidated program.

Adoption Incentives

The Committee recommends \$42,000,000, the same as the budget request, for adoption incentives. The comparable fiscal year 2010 funding level is \$39,500,000. This program provides incentive payments to States to encourage an increase in the number of adoptions of children from the foster care system, with an emphasis on children who are the hardest to place. The recommendation will fully fund adoption incentives earned by States under current law.

Adoption Awareness

The Committee does not include funding for the Adoption Awareness program, as requested by the administration. The comparable fiscal year 2010 funding level is \$12,953,000. The budget request eliminated this program and redirected funding to the Adoption Opportunities program. The Committee agrees with this consolidation.

Social Services Research

The Committee recommends \$9,738,000 for social services research, which includes \$5,762,000 in transfers available under section 241 of the Public Health Service [PHS] Act. The comparable funding level for fiscal year 2010 is \$19,610,000, which includes \$5,762,000 in transfers available under section 241 of the PHS Act. The budget request is \$8,762,000, which also includes \$5,762,000 in transfers available under the PHS Act. These funds support research and evaluation of cost-effective programs that increase the stability and economic independence of American families, and contribute to the healthy development of children and youth.

The Committee recommendation includes \$3,000,000, as requested by the administration, for a rigorous early childhood and education evaluation. This 5-year evaluation will assess which features of early care and education programs most influence child outcomes, and how variations in such features interact with children, family, and community characteristics to produce results.

The Committee continues to support research and evaluation of evidence-based programs that are intended to strengthen families experiencing economic hardships. These projects aim to mitigate the effects of poverty on the health and well-being of children. The Committee encourages ACF to work with the Administration on Aging and other HHS agencies to evaluate intergenerational approaches aimed at improving outcomes for vulnerable populations. The Committee is aware of effective neighborhood-based programs that utilize older volunteers to foster permanency and improved outcomes for at-risk youth.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
Access to Healthcare Network, Reno, NV, for a helpline to assist residents with healthcare and social serv- ices	\$330.000
Campus Kitchen, Washington, DC, for services to the homeless community in Atlantic City, NJ	100,000
City of Mount Vernon, NY, for the Youth Development Action Plan	150,000
City of Tracy, CA, for gang-outreach, intervention, prevention, and educational assistance programs	300,000
Creative Visions, Des Moines, IA, for family reunification and support services	200,000
FAMILY, Inc., Council Bluffs, IA, for a home visitation program for young children and their families Jewish Social Service Agency, Rockville, MD, for autism outreach, education, and case management serv-	400,000
ices	450,000
Lake County Community Foundation, Waukegan, IL, for expanding access to services	250,000
North Ward Center, Inc., Newark, NJ, for comprehensive services for people with autism spectrum dis-	
orders	500,000
Northern Kentucky Community Action Commission, Covington, KY, for child care program activities Olive Crest Pacific Northwest, Bellevue, WA, for services for foster children and children in unstable home	100,000
situations	250,000
Refuge Network, Cambridge, MN, for family violence and sexual assault prevention and intervention serv-	
ices	150,000
Springfield Area Parent Child Center, North Springfield, VT, for services for teenage and expectant mo-	
thers	500,000
TLC for Children and Families, Olathe, KS, for youth transitional living programs	500,000
United Way of Capital Area, Jackson, MS, for 2–1–1 Mississippi	408,000
United Ways of California, South Pasadena, CA, for expanding 2–1–1 services	750,000
University of Medicine and Dentistry of New Jersey—The Autism Center at NJ Medical School, Newark, NJ,	200.000
for identifying and treating children with autism spectrum disorders	300,000
University of Nevada, Las Vegas, Las Vegas, NV, for expanding access to services for people with autism	F00 000
spectrum disorders	500,000
TWOA OF Greater Fortianu, Fortianu, OK, IOF Services IOF VICUINS OF HUMBAN MATTERING	600,000

Developmental Disabilities

The Committee recommends \$189,605,000 for developmental disabilities programs. The comparable fiscal year 2010 funding level is \$186,579,000 and the budget request is \$186,605,000. These programs support community-based delivery of services that promote the rights of persons of all ages with developmental disabilities. Developmental disability is defined as severe, chronic disability attributed to mental or physical impairments manifested before age 22, which causes substantial limitations in major life activities. These programs also assist people with all types of disabilities participate in political elections. Within the total for developmental disabilities programs, the Committee recommendation includes the amounts specified below.

The Committee recommendation includes \$76,066,000 for State and Territorial Councils. The comparable fiscal year 2010 funding level is \$75,066,000, the same amount as the budget request. These important entities work to develop, improve, and expand the system of services and supports for people with developmental disabilities. By engaging in activities such as training, public education, capacity-building and advocating for change in State policies, Councils on Developmental Disabilities support the inclusion and integration of individuals with developmental disabilities in all aspects of community life.

The Committee recommendation includes \$42,024,000 for protection and advocacy grants. The comparable fiscal year 2010 funding level is \$41,024,000, the same amount as the budget request. This formula grant program provides funds to States to establish protection and advocacy systems to protect the legal and human rights of persons with developmental disabilities who are receiving treatment, services, or rehabilitation.

The Committee recommendation includes \$17,410,000 for disabled voter services. This is the same amount as the comparable fiscal year 2010 funding level and the budget request. The Committee recommendation includes \$12,154,000 to promote disabled voter access and \$5,256,000 for disabled voters protection and advocacy systems. The election assistance for individuals with disabilities program was authorized in the Help America Vote Act of 2002. The program enables grantees to make polling places more accessible and increase participation in the voting process of individuals with disabilities.

The Committee recommendation includes \$14,162,000, the same amount as the budget request, for projects of national significance to assist persons with developmental disabilities. The comparable fiscal year 2010 funding level is \$14,136,000. This program funds grants and contracts that develop new technologies and demonstrate innovative methods to support the independence, productivity, and integration into the community of persons with developmental disabilities. The Committee supports the establishment of a National Autism Resource Center and includes \$2,000,000 for the continued support of these activities.

The Committee recommendation includes \$39,943,000 for the University Centers for Excellence in Developmental Disabilities [UCEDDs], a network of 67 university-based centers that provide interdisciplinary education, conduct research, and develop model services for children and adults with disabilities. The comparable fiscal year 2010 funding level is \$38,943,000 the same amount as the budget request. The centers serve as the major vehicle to translate disability-related research into community practice and to train the next cohort of future professionals who will provide services and supports to an increasingly diverse population of people with disabilities. The Committee recommendation will support training initiatives for new and emerging needs, such as developing effective services for people with autism spectrum disorder, as well as partnerships with minority-serving institutions to focus research, training and services on minority populations with disabilities.

Native American Programs

The Committee recommends \$48,773,000 for Native American programs. This is the same as the comparable fiscal year 2010 funding level and the fiscal year 2011 budget request. The Administration for Native Americans [ANA] assists tribal and village governments, Native Indian institutions and organizations to support and develop stable, diversified local economies. In promoting social and economic self-sufficiency, ANA provides financial assistance through direct grants for individual projects, training and technical assistance, and research and demonstration programs.

Within the total, the Committee recommendation includes \$12,000,000 for Native American language preservation activities, including no less than \$4,000,000 for language immersion programs authorized by 803C(b)(7)(A)-(C) of the Native American Programs Act, as amended by the Esther Martinez Native American Language Preservation Act of 2006. The Committee encourages ANA to give priority to grantees with rigorous immersion programs.

Community Services

The Committee recommends \$791,669,000 for community services programs. The comparable fiscal year 2010 funding level is \$772,551,000 and the fiscal year 2011 budget request is \$760,025,000. Within the total for community services programs, the Committee recommendation includes the amounts specified below.

The Committee recommendation includes \$700,000,000 for the community services block grant [CSBG]. This amount is the same as the comparable fiscal year 2010 funding level and the fiscal year 2011 budget request. The CSBG is used to make formula grants to States and Indian tribes to provide a wide range of services and activities to alleviate causes of poverty in communities and to assist low-income individuals in becoming self-sufficient.

The Committee recommendation includes \$55,000,000 for the community economic development program. The budget request included \$36,000,000 for this activity, the same as the comparable fiscal year 2010 funding level. This program provides grants to community development corporations to support employment and business development opportunities for low-income individuals. Within this total for community economic development, the Committee recommendation includes up to \$20,000,000 for the Healthy Foods Financing Initiative [HFFI]. A recent study by the Department of Agriculture found that over 23 million Americans, including 6.5 million children, live in low-income areas without ready access to grocery stores. The HFFI is a joint initiative with the Department of Agriculture and Department of the Treasury to provide financial and technical assistance to community development financial institutions, nonprofit organizations, and businesses to expand access to healthy foods in these low-income and underserved areas.

The Committee recommendation includes \$10,000,000, the same as the comparable fiscal year 2010 funding level, for the rural community facilities program. The budget request did not include funding for this program. The rural community facilities program provides grants to nonprofit organizations to provide training and technical assistance to low-income rural communities in developing and managing safe and affordable water and wastewater treatment facilities.

The Committee recommendation includes \$2,644,000, the same as the comparable fiscal year 2010 funding level, for the job opportunities for low-income individuals program [JOLI]. The budget request did not include funding for this program. JOLI provides grants to nonprofit organizations to support employment and business opportunities for TANF recipients and other low-income individuals, focusing on micro-enterprise and self-employment.

The Committee recommendation includes \$24,025,000, the same as the budget request, for individual development accounts. The comparable fiscal year 2010 funding level is \$23,907,000. This program funds activities to encourage and help low-income individuals and families accumulate savings for dedicated purposes, including buying a home, paying for college, or starting a business.

Domestic Violence Hotline

The Committee recommends \$4,500,000, the same as the budget request, for the national domestic violence hotline. The comparable fiscal year 2010 funding level is \$3,209,000. This activity funds the operation of a national, toll-free, 24-hours-a-day telephone hotline to provide information and assistance to victims of domestic violence. The hotline received approximately 270,000 calls in fiscal year 2009, up 14 percent from fiscal year 2007, but an estimated 50,000 calls could not be answered because of increased demand. The additional funding will increase capacity as well as support an evaluation of hotline services.

Family Violence Prevention and Services

The Committee recommends \$140,000,000, the same as the budget request, for the family violence prevention and services program, which includes battered women's shelters. The comparable fiscal year 2010 funding level is \$130,032,000. These funds support programs to prevent family violence and provide immediate shelter and related assistance for victims of domestic violence and their dependents.

Within the total, the Committee recommendation includes \$4,000,000, as requested by the administration, for a new discretionary grant program to improve services for children exposed to domestic violence. The remaining increase will be targeted to existing programs experiencing increased demand for emergency services, including services for children.

Mentoring Children of Prisoners

The Committee recommends \$49,314,000 for mentoring children of prisoners. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program provides competitive grants to community organizations to create and sustain mentoring relationships between children of prisoners and adults in their community. Research indicates that mentoring programs can help children with incarcerated parents reduce their drug and alcohol use, improve their relationships and academic performance, and reduce the likelihood that they will initiate violence.

Independent Living Training Vouchers

The Committee recommends \$45,351,000 for independent living training vouchers. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program supports vouchers of up to \$5,000 per year for postsecondary education and training for foster care youth up to 21 years of age. This

program increases the likelihood that individuals who age out of the foster care system will be better prepared to live independently and contribute productively to society.

Disaster Human Services Case Management

The Committee recommends \$2,000,000 for the disaster human services case management program. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program assists States in establishing the capacity to provide case management services in a timely manner in the event of a disaster. It ensures that States are able to meet social service needs during disasters by helping disaster victims prepare recovery plans, referring them to service providers and FEMA contacts in order to identify needed assistance, and providing ongoing support and tracking through the recovery process.

Faith-based Center

The Committee recommends \$1,376,000 for the operation of the Department's Center for Faith-Based and Community Initiatives. This amount is the same as the comparable fiscal year 2010 funding level and the budget request.

Program Administration

The Committee recommends \$222,308,000, the same as the budget request, for program administration. The comparable fiscal year 2010 funding level is \$208,398,000.

The Committee recommendation includes \$1,500,000 to be transferred to the National Commission on Children and Disasters. The Commission submitted an interim report to Congress and the President in October 2009 on its recommendations to address the needs of children as they relate to preparation for, response to, and recovery from emergencies and disasters. The continued funding will allow the Commission to follow up on its recommendations and continue coordination efforts between Federal agencies; Federal, State, and local governments; and nongovernmental organizations.

PROMOTING SAFE AND STABLE FAMILIES

Appropriations, 2010	\$408,311,000
Budget estimate, 2011	408,311,000
Committee recommendation	408.311.000

The Committee recommends \$408,311,000 for promoting safe and stable families. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. The recommendation consists of \$345,000,000 in mandatory funds authorized by the Social Security Act and \$63,311,000 in discretionary appropriations.

This program supports activities that can prevent the emergence of family crises which might require the temporary or permanent removal of a child from his or her own home. Grants allow States to operate coordinated programs of family preservation services, time-limited family reunification services, community-based family support services, and adoption promotion and support services.

PAYMENTS FOR FOSTER CARE AND PERMANENCY

Appropriations, 2010	\$5,578,000,000
Budget estimate, 2011	5,366,000,000
Committee recommendation	5,366,000,000

The Committee recommends \$5,366,000,000 in mandatory funds for payments for foster care and permanency, an appropriated entitlement that includes funding for the foster care, adoption assistance, guardianship assistance, and independent living programs. This is in addition to the \$1,850,000,000 appropriated last year as an advance appropriation for the first quarter of fiscal year 2011. The comparable funding level for fiscal year 2010 is \$5,578,000,000. In addition, the Committee recommends \$1,850,000,000, the same as the budget request, for an advance appropriation for the first quarter of fiscal year 2012. The Committee recommendation provides the full amount requested under current law and does not reflect the administration's proposal to extend enhanced Federal support under the Recovery Act that is set to expire on December 31, 2010.

The foster care program, authorized under title IV–E of the Social Security Act, provides Federal reimbursement to States and tribes for maintenance payments to families and institutions caring for eligible foster children. Funds are matched at the Federal medical assistance percentage [FMAP] rate for each State. Funding is also provided for administrative costs for the management of the foster care program, as well as training costs for foster care workers and parents.

The adoption assistance program provides funds to States for maintenance payments and the nonrecurring costs of adoption for children with special needs. The goal of this program is to facilitate the adoption of hard-to-place children in permanent homes, and thus prevent long, inappropriate stays in foster care. As in the foster care program, State administrative and training costs are eligible under this program for Federal reimbursement subject to a matching rate.

The Fostering Connections to Success and Increasing Adoptions Act of 2008 created a new IV–E guardianship assistance program. This program gives States and tribes an option under their IV–E foster care programs to provide assistance payments to relatives taking legal guardianship of eligible children who have been in foster care.

The independent living program provides services to foster children under 18 and foster youth ages 18 to 21 to help them make the transition to independent living by engaging in a variety of services including educational assistance, life skills training and health services. States are awarded grants based on their share of the number of children in foster care, subject to a matching requirement.

Administration on Aging

AGING SERVICES PROGRAMS

Appropriations, 2010	\$1,516,073,000
Budget estimate, 2011	1,624,733,000
Committee recommendation	1.659.383.000

The Committee recommends an appropriation of \$1,659,383,000 for the Administration on Aging [AoA]. The comparable fiscal year 2010 level is \$1,516,073,000. The administration requested \$1,624,733,000 for this agency. The AoA is charged with administering programs through the national aging network that promote the development of comprehensive, coordinated home and community-based care for seniors.

The Committee recommendation includes a total of \$104,582,000 for programs throughout AoA as part of the administration's Caregiver Initiative. An estimated 49 million Americans provide care for adult family members, friends or other loved ones. Caregivers help older Americans and the chronically ill with such tasks as preparing meals, helping with household chores and arranging medical care and transportation. Caregivers spend an average of 20 hours a week providing care while at the same time balancing work and other family responsibilities. This assistance allows recipients to stay out of institutional care, but it comes at a tremendous cost to caregivers' own health and emotional well-being. According to a report issued in February 2010 by the National Alliance for Caregiving, employees who care for older relatives are more likely to report poorer health than other employees and also greater rates of depression, diabetes, hypertension, and pulmonary disease. The additional funds provided to Supportive Services and Senior Centers, the Family Caregiver Support program, Native American caregivers and the Lifespan Respite Care program will relieve some of these pressures on caregivers, allowing them to better care for their loved ones while helping older Americans remain independent in their own homes and communities for as long as possible.

Supportive Services and Senior Centers

The Committee recommends an appropriation of \$416,348,000 for supportive services and senior centers. This amount is the same as the administration request. The comparable funding level for fiscal year 2010 is \$368,294,000. The supportive services program provides formula grants to States and territories to fund a wide range of social services such as multipurpose senior centers, adult day care, transportation, and in-home assistance such as personal care and homemaker assistance. State agencies on aging award funds to designated area agencies on aging that, in turn, make awards to local services providers.

The Committee recommendation includes an increase of \$48,054,000 as part of the administration's Caregiver Initiative. These funds will provide 1 million more hours of adult day care, as well as 1.3 million more hours of personal care assistance to seniors unable to perform daily activities. These vital services will relieve some of the pressures faced by caregivers who might otherwise have to provide more intensive assistance on their own to their loved ones.

Preventive Health Services

The Committee recommends \$21,026,000 for preventive health services. This amount is the same as the administration request. The comparable funding level for fiscal year 2010 is \$21,023,000 for

this activity. The preventive health services program funds activities that help seniors stay healthy and avoid chronic disease, thus reducing the need for more costly medical interventions. The Committee has included bill language that requires States to use these funds for evidence-based programs, such as enhanced fitness and wellness, depression screening, falls prevention, and chronic-disease self-management programs. These evidence-based programs have been shown through randomized-controlled trials to be effective at helping older adults adopt healthy behaviors and lower their use of healthcare services.

Protection of Vulnerable Older Americans

The Committee recommends \$24,290,000 for grants to States for protection of vulnerable older Americans. The administration request is \$23,290,000 and the comparable fiscal year 2010 funding level is \$21,880,000. Within the Committee recommendation, \$18,783,000 is for the ombudsman services program and \$5,507,000 is for the prevention of elder abuse program. Both programs provide formula grants to States to prevent the abuse, neglect, and exploitation of older individuals. The ombudsman program focuses on the needs of residents of nursing homes and other long-term care facilities, while elder abuse prevention targets its message to the elderly community at large.

National Family Caregiver Support Program

The Committee recommends \$202,220,000 for the national family caregiver support program. This amount is the same as the administration request. The comparable fiscal year 2010 level is \$154,197,000. Funds appropriated for this activity establish a multifaceted support system in each State for family caregivers, allowing them to care for their loved ones at home for as long as possible. States may use funding to include the following five components into their program: information to caregivers about available services; assistance to caregivers in gaining access to services; caregiver counseling and training; respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and limited supplemental services that fill remaining service gaps. The additional funds provided are part of the Caregiver Initiative and will allow nearly 200,000 additional caregivers to be served and 3 million more hours of respite care to be provided.

Native American Caregiver Support Program

The Committee recommendation includes \$8,389,000 to carry out the Native American caregiver support program. This amount is the same as the administration request. The comparable fiscal year 2010 funding level is \$6,388,000. The program assists tribes in providing multifaceted systems of support services for family caregivers and for grandparents or older individuals who are relative caregivers. The additional funds are provided as part of the administration's Caregiver Initiative. By providing additional counseling, outreach and respite care to caregivers, these funds will allow more Native American elders to remain in their homes and communities.

Congregate and Home-delivered Nutrition Services

For congregate nutrition services, the Committee recommends an appropriation of \$463,644,000. The administration requested \$445,644,000 for this activity and the comparable fiscal year 2010 level is \$440,718,000. For home-delivered meals, the Committee recommends a funding level of \$232,893,000. The administration requested \$220,893,000 for this activity and the comparable fiscal year 2010 level is \$217,644,000.

These programs address the nutritional needs of older individuals. Projects funded must make home-delivered and congregate meals available at least once a day, 5 days a week, and each meal must meet a minimum of one-third of daily dietary requirements. While States receive separate allotments of funds for congregate meals, home-delivered meals and supportive services, they have flexibility to transfer funds between these programs.

Nutrition Services Incentives Program

The Committee recommendation includes \$161,015,000 for the nutrition services incentives program [NSIP]. This amount is the same as the administration request. The comparable funding level for fiscal year 2010 is \$160,991,000. This program augments funding for congregate and home-delivered meals provided to older adults. Funds provided under this program are dedicated exclusively to the provision of meals. NSIP rewards effective performance by States and tribal organizations in the efficient delivery of nutritious meals to older individuals through the use of cash or commodities.

Aging Grants to Indian Tribes and Native Hawaiian Organizations

The Committee recommends \$29,708,000 for grants to Native Americans. This amount is the same as the administration request. The comparable fiscal year 2010 level is \$27,704,000. Under this program, awards are made to eligible organizations based on their share of Native Americans, Native Alaskans, and Native Hawaiians aged 60 and over. The additional funds are part of the Caregiver Initiative and will provide increased supportive services, nutrition services, information, and assistance to Native Americans.

Program Innovations

The Committee recommends \$14,699,000 for program innovations. The comparable fiscal year 2010 level is \$19,020,000. The administration requested \$13,049,000 for this activity. These funds support activities that expand public understanding of aging and the aging process, apply social research and analysis to improve access to and delivery of services for older individuals, test innovative ideas and programs to serve older individuals, and provide technical assistance to agencies that administer the Older Americans Act.

Within funding for Program Innovations, the Committee has provided \$1,000,000 to continue support for a 24-hour call center that provides Alzheimer family caregivers with professional care consultation and crisis intervention.

Civic Engagement.—The Committee is aware of new research suggesting that interventions designed to promote health and func-

tion in seniors through everyday activity may improve the brain's plasticity, or the ability to bounce back, in key regions that support executive function. The Committee urges AoA to continue its work in advancing the field of civic engagement for older Americans by partnering with organizations with proven experience in creating robust, innovative opportunities for baby boomers and other older Americans to serve their communities while helping them to maintain and improve their health.

Older Adults and Mental Health.—The Committee notes that approximately 20 to 25 percent of older adults have a mental or behavioral health problem. Older white males (age 85 and over) currently have the highest rates of suicide of any group in the United States. The Committee acknowledges the importance of addressing the mental and behavioral health needs of older adults and encourages AoA to implement the Older Americans Act provisions related to mental and behavioral health. Specifically, the Committee urges AoA to designate an officer to administer the mental health services authorized under the act, work to improve the delivery of mental health screening and treatment services for older individuals, and increase public awareness and reduce the stigma associated with mental disorders in older individuals.

Transportation.—The Committee is aware of the rapidly growing need for transportation services for older Americans. In order to expand resources to meet this need, the Committee encourages AoA to fund section 416 of the Older Americans Act. Such funding could support successful, entrepreneurial models of economically sustainable transportation that supplement publicly funded services by accessing private resources and voluntary local community support, and that do not rely on Federal or other public financial assistance after 5 years.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
Cathedral Square Corporation, South Burlington, VT, for the Seniors Aging Safely at Home pilot program	\$750,000
Jewish Family Services of Delaware, Wilmington, DE, for an aging-in-place initiative	150,000
Jewish Federation of Las Vegas, Las Vegas, NV, for the Las Vegas Senior Lifeline Program	100,000
PACE Greater New Orleans, New Orleans, LA, for the expansion of senior services	150,000
The Associated: Jewish Community Federation of Baltimore, Baltimore, MD, to address safety and commu- nity engagement issues among seniors	200,000
Vermont Association of Area Agencies on Aging, Barre, VT, to expand nutrition assistance and related pro- grams	200,000
Washoe County Senior Services, Carson City, NV, for the RSVP Home Companion Senior Respite Care Pro- gram	100,000

Aging Network Support Activities

The Committee recommends \$44,179,000 for aging network support activities. This amount is the same as the administration request. The comparable fiscal year 2010 level is \$44,276,000. The Committee recommendation includes funding at the administration request level for the Eldercare Locator, which is a toll-free, nation-wide directory assistance service for older Americans and their caregivers. Established in 1991, the service links over 100,000 callers annually to an extensive network of resources for aging Americans and their caregivers.

The Committee has included new bill language limiting the funding provided to AoA for Aging and Disability Resource Centers [ADRCs]. The Committee notes that the Patient Protection and Affordable Care Act [PPACA] provided a mandatory appropriation of \$10,000,000 to AoA in fiscal year 2011 for the ADRCs. In light of scarce discretionary resources, the Committee recommendation has reduced funding for ADRCs by the amount provided in the PPACA. The Committee believes that AoA should use the funds previously allocated to ADRCs to focus on other programs that will help seniors remain healthy and live independently in their own communities. Specifically the Committee directs AoA to prioritize evidence-based disease prevention activities, such as the chronic disease self-management program [CDSMP]. The Committee notes that Recovery Act funding provided to AoA for the CDSMP will end this year, and encourages AoA to use fiscal year 2011 funding to continue this program, which has been proven to reduce the effects of chronic conditions, improve health status and reduce unnecessary healthcare use among seniors.

Alzheimer's Disease Demonstration Grants to States

The Committee recommends a funding level of \$11,464,000 for Alzheimer's disease demonstration grants to States. This amount is the same as the administration request. The comparable funding level for fiscal year 2010 is \$11,462,000. This program provides competitively awarded matching grants to States to encourage program innovation and coordination of public and private services for individuals with Alzheimer's disease and their families. The Committee urges the AoA to continue this program's focus on expanding services to people in the early stages of dementia and providing chronic care management.

Lifespan Respite Care

The Committee recommends \$7,000,000 for the Lifespan Respite Care program. The administration requested \$5,000,000 for this activity and the comparable fiscal year 2010 level is \$2,500,000. The Lifespan Respite Care program provides grants to States to expand respite care services to family caregivers, improve the local coordination of respite care resources, and improve access and quality of respite care services, thereby reducing family caregiver strain. The Committee has provided additional funds to the Lifespan Respite Care program as part of the administration's Caregiver Initiative. In carrying out the program, the Committee urges AoA to ensure that State agencies and ADRCs serve all age groups, chronic conditions and disability categories.

Program Administration

The Committee recommends \$22,508,000 for program administration. This amount is the same as the administration request. The comparable funding level for fiscal year 2010 is \$19,976,000. These funds support salaries and related expenses for program management and oversight activities. The Committee has included bill language requested by the administration that allows AoA to continue program management activities for Recovery Act grants awarded in fiscal year 2010 under title XVII of the Public Health Service Act.

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

Appropriations, 2010	\$555,576,000
Budget estimate, 2011	609,360,000
Committee recommendation	590,908,000

The Committee recommends \$590,908,000 for general departmental management [GDM]. The comparable fiscal year 2010 funding level is \$555,576,000. The administration requested \$609,360,000 for this activity. The recommendation includes \$69,211,000 in transfers available under section 241 of the Public Health Service Act. In addition, the Committee recommends that \$30,000,000 be transferred to this account from the Prevention and Public Health Fund.

This appropriation supports activities that are associated with the Secretary's role as policy officer and general manager of the Department. It supports certain health activities performed by the Office of Public Health and Science [OPHS], including the Office of the Surgeon General. GDM funds also support the Department's centralized services carried out by several Office of the Secretary staff divisions, including personnel management, administrative and management services, information resources management, intergovernmental relations, legal services, planning and evaluation, finance and accounting, and external affairs.

The Office of the Surgeon General, in addition to its other responsibilities, provides leadership and management oversight for the U.S. Public Health Service Commissioned Corps, including the involvement of the Corps in departmental emergency preparedness and response activities.

The Committee has included \$13,513,000 for the transformation of the Commissioned Corps. This amount is the same as the administration request. The comparable fiscal year 2010 funding level is \$14,813,000. This activity provides for training and career development programs for Corps officers, as well as policies and systems that ensure the rapid response of the Corps in public health and medical emergencies.

The Committee has again included \$1,000,000 for the Secretary to implement section 399CC of the Public Health Service Act (as enacted in the Combating Autism Act, Public Law 109–416) related to administration of the Interagency Autism Coordinating Committee. These funds are to be transferred to the National Institute of Mental Health.

The Committee recommendation includes \$10,000,000, the same as the administration request, for a Federal employee health and wellness initiative. This is a new activity for fiscal year 2011. This initiative will be coordinated by the OPHS but the Committee has included bill language requested by the administration that allows a portion of funds to be transferred to other agencies in the Federal government. Funds will be used to operate model wellness programs at Federal worksites that will improve access to fitness opportunities and support nutritional food options in employee cafeterias. A rigorous evaluation will accompany this initiative to document its effectiveness on improving employee health.

The Committee has included \$800,000 for the National Academy of Sciences [NAS] to update its 2005 report titled "Assessment of the Scientific Information for the Radiation Exposure Screening and Education Program." The NAS should review new scientific data to determine whether the current Radiation Exposure Compensation Act [RECA] program should be expanded. More specifically, the study should include recommendations as to whether additional diseases or illnesses, classes of workers, and geographic areas should be compensated through RECA.

Adolescent Health.—The Committee notes that adolescents have morbidity and mortality rates twice those of younger children. Many are vulnerable to poor health outcomes as a result of risktaking behaviors and exposure to environmental risks. Despite their high rates of mental health conditions, sexually transmitted diseases, obesity, asthma, and other chronic conditions, adolescents are not receiving the care they need. The Committee strongly urges the Secretary, through the Office of Adolescent Health, to fund demonstrations of primary care models staffed by an interdisciplinary team of professionals who provide integrated preventive care, primary care, sexual health, and mental health services. These models should include care management and communication strategies for adolescents at significant risk of poor health outcomes, as well as opportunities for teen and parent involvement and linkages to community prevention efforts.

Carrier Screening.—The Committee is concerned that the Secretary is not more fully engaged in the development of policies and recommendations relative to the efficacy and appropriateness of carrier screening for genetic disorders. Ad hoc policies developed by professional societies and industry have bred inconsistencies and confusion. The Committee is aware that the Advisory Committee on Heritable Disorders in Newborns and Children and the Secretary's Advisory Committee on Genetics, Health, and Society are exploring the creation of a joint workgroup to explore carrier screening protocols. The Committee urges the Secretary to facilitate the development of the joint workgroup and to encourage broad participation by stakeholder groups, including advocacy groups and health economists.

Clinical Trial Operations.—The Committee recognizes the importance of providing strict policies and regulations that govern protections for human subjects that participate in federally funded clinical trials. At the same time, concerns have been raised that the various agencies that fund or provide oversight of clinical trials have instituted different regulations that are often inconsistent and unnecessarily burdensome, especially for multi-institutional trials. This has inhibited the initiation of new trials and access to promising treatments for patients. The Committee encourages the Secretary to bring together leading researchers with experience in the operation of clinical trials and representatives from NIH, FDA, CMS, and other agencies to determine if changes could be made to better harmonize existing policies and regulations on clinical trial operations. Healthcare Associated Infections.—The Committee notes that a recent study published in the Journal of the American Medical Association found that lapses in infection control among ambulatory surgical centers were common, with deficiencies relating to practices such as hand hygiene, injection and medication safety, and equipment reprocessing. These study results are disturbing since outpatient procedures now represent more than three-quarters of all operations performed. The Committee applauds the Secretary for expanding the Department's Action Plan to Prevent Healthcare-Associated Infections to include ambulatory surgical centers and encourages the Department to pay particular attention to injection safety.

Hearing Loss.—The Committee is concerned about the effects of noise on hearing and notes that the number one cause of preventable hearing loss is loud noise. The Committee believes the public should be educated to lower the risk of hearing loss in later years and urges the Department to produce public service announcements on noise reduction.

Hepatitis B and C.—The Committee is pleased that the Secretary has convened and established an inter-departmental task force to address the public health challenge of viral hepatitis. The Committee urges the task force to review and consider the Institute of Medicine report released in January 2010 titled "Hepatitis and Liver Cancer: A National Strategy for Prevention and Control of Hepatitis B and C," which documents the problem and highlights a course of action to address it. The Committee looks forward to an update on the task force's recommendations and actions.

Lyme Disease.—The Committee encourages the Secretary to better coordinate the Department's Lyme disease activities. A Tickborne Diseases Advisory Committee could achieve this goal by advising relevant Federal agencies on priorities related to Lyme and tick-borne diseases, minimizing overlap in efforts to address such diseases, promoting communication with constituency groups, and ensuring that a broad spectrum of scientific viewpoints is represented in public health policy decisions.

The recommendation includes bill language providing funding for the following activities in the following amounts:

Amount

Community Transportation Association of America, Washington, DC, for technical assistance to human	
services transportation providers on ADA requirements	\$950,000

Teen Pregnancy Prevention

The Committee recommendation includes \$118,455,000 for the Teenage Pregnancy Prevention [TPP] program. The recommendation includes \$8,455,000 in transfers available under section 241 of the Public Health Service Act. The administration requested \$133,673,000 for this activity. The comparable funding level for fiscal year 2010 is \$114,434,000. The Committee recommendation includes \$4,000,000 for a Federal evaluation of the projects funded by this program.

The Committee commends the Office of Adolescent Health [OAH] for successfully implementing this new program in a short amount of time and with very little staff and resources. In the report accompanying the Consolidated Appropriations Act of 2010, the Committee stated its intention that the OAH be responsible for implementing and administering the Teen Pregnancy Prevention program. The Committee reiterates this intention. While the Committee expects the OAH to collaborate with and utilize the available expertise of other operating divisions within the Department while implementing this program, it directs the Secretary to ensure that the OAH maintains administrative and programmatic control over any funding announcement issued regarding the Teen Pregnancy Prevention program.

Adolescent Family Life

The Committee provides \$12,474,000 for the Adolescent Family Life [AFL] program. The administration requested \$16,658,000, the same as the comparable fiscal year 2010 level. The AFL program evaluates integrated approaches to the delivery of comprehensive services to pregnant and parenting teens. The Committee recommendation includes funding to support continuations for existing care demonstration grants. The Committee notes that the Patient Protection and Affordable Care Act created the Support for Pregnant and Parenting Teens and Women program, and also provided this program with \$25,000,000 in mandatory funds for fiscal year 2011. The Committee believes this new program duplicates activities funded by the AFL program and, due to scarce discretionary resources, has not provided funding for new grant awards for this activity.

Minority Health

The Committee recommends \$58,180,000 for the Office of Minority Health. The comparable fiscal year 2010 funding level is \$55,989,000 and the administration requested \$57,980,000. The Office of Minority Health [OMH] focuses on strategies designed to decrease health disparities and to improve the health status of racial and ethnic minority populations in the United States. The OMH establishes goals and coordinates all departmental activity related to improving health outcomes for disadvantaged and minority individuals.

The Committee includes \$4,000,000, the same as the comparable fiscal year 2010 level, for programs focused on the improvement of geographic minority health and the reduction in health disparities for rural disadvantaged minority populations. The administration did not provide funding for this activity. Funds are available to: increase awareness of healthcare issues and effective interventions relevant to these populations; increase access to quality healthcare; increase access to quality healthcare personnel available to provide services to these populations; improve healthcare outcomes; and develop a model that can be replicated to address national policies and programs to improve the health of these rural disadvantaged minority communities. This model should include research, health services, education/awareness, and health information components, with priority given to existing programs with prior funding, that are located in areas with the most need, and that can provide recommendations on projects that benefit the health of minority and rural populations.

The Committee recommendation includes \$1,000,000 to continue the national health provider education program on lupus. The Committee remains very concerned about racial disparities in general and particularly about barriers to early medical diagnosis of lupus, a debilitating autoimmune disease that is up to three times more common among African Americans, Hispanics and Native Americans than among Caucasians. The Committee continues to support this critically important national education effort to engage health professionals and schools of health professions in working together to improve lupus diagnosis and treatment through education.

Asian and Pacific Islanders.—The Committee notes that Asian and Pacific Islanders [API] have a high incidence of stomach and liver cancers compared to Caucasians. Overall, cancer data are limited for this population. In addition, the API population experiences a higher than average rate of chronic kidney disease, with 1 person in 7 afflicted with this disease, compared to a national average of 1 person in 9. Among API population groups, Filipinos have one of the highest rates of incidence per capita. The Committee urges the OMH to focus on the unique and pressing needs of this at-risk population.

Hepatitis B.—The Committee is aware that hepatitis B and liver cancer, as caused by the hepatitis B virus, are the single greatest health disparities affecting the Asian and Pacific Islander populations in the United States. Asian Americans, Native Hawaiians, and other Pacific Islanders comprise more than one-half of the 2 million estimated hepatitis B carriers in the United States and consequently have the highest rate of liver cancer among all ethnic groups. The Committee urges the OMH to expand outreach and preventive hepatitis B programs specific to Asian and Pacific Islanders and other groups disproportionately affected by hepatitis B.

The recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
St. Francis Hospital Foundation, Wilmington, DE, for outreach and preventive services to underserved pop-	
ulations	\$200,000

Office of Women's Health

The Committee recommends \$33,746,000 for the Office of Women's Health. This amount is the same as the comparable fiscal year 2010 level and the administration request. The Office of Women's Health [OWH] develops, stimulates, and coordinates women's health research, healthcare services, and public and health professional education and training across the Department. It advances important crosscutting initiatives and develops public-private partnerships, providing leadership and policy direction, and initiating and synthesizing program activities to redress the disparities in women's health. The Committee commends the work of the OWH and its important leadership in advancing and coordinating a comprehensive women's health agenda throughout the Department.

The Committee recommendation includes \$3,375,000 to continue the violence against women's initiative. This initiative provides funding to public health programs that integrate domestic and sexual violence assessment and intervention into basic care, as well as encourages collaborations between healthcare providers, public health programs, and domestic and sexual violence programs.

HIV/AIDS in Minority Communities

To address high-priority HIV prevention and treatment needs of minority communities heavily impacted by HIV/AIDS, the Committee recommends \$53,891,000. This amount is the same as the administration request. The comparable fiscal year 2010 level is \$53,880,000. These funds are available to key operating divisions of the Department with expertise in HIV/AIDS services to assist minority communities with education, community linkages, and technical assistance.

Embryo Donation and Adoption

The Committee provides \$4,200,000 for the Department's embryo donation and adoption awareness activities. This amount is the same as the comparable fiscal year 2010 level and the administration request. The Committee again includes bill language allowing funds appropriated for embryo donation and adoption activities to be available to pay medical and administrative costs deemed necessary to facilitate embryo donations and adoptions.

Acquisition Reform

The Committee includes a new general provision proposed by the administration that transfers \$7,000,000 to the Office of the Secretary for acquisition reform activities. The funding level is the same as the administration request. These funds will allow the Secretary to invest in the civilian acquisition workforce through improved training and technology. The Committee provides these funds with the expectation that this investment will improve contracting performance and lower costs in the long term.

OFFICE OF MEDICARE HEARINGS AND APPEALS

Appropriations, 2010	\$71,147,000
Budget estimate, 2011	77,798,000
Committee recommendation	77,798,000

The Committee provides \$77,798,000 for the Office of Medicare Hearings and Appeals [OMHA]. This is the same as the administration request. The comparable fiscal year 2010 level is \$71,147,000.

The Office of Medicare Hearings and Appeals is responsible for hearing Medicare appeals at the administrative law judge level, which is the third level of Medicare claims appeals. OMHA ensures that Medicare beneficiaries who are dissatisfied with the initial decisions about their benefits or eligibility can appeal and exercise their right to a hearing in front of an Administrative Law Judge. The Committee recommendation includes funding for OMHA to increase the number of administrative law judge teams so that it can address its increasing workload.

OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY

Appropriations, 2010	\$61,336,000
Budget estimate, 2011	78,334,000
Committee recommendation	78,334,000

The Committee makes available \$78,334,000 to the Office of the National Coordinator for Health Information Technology [ONC]. This amount is the same as the administration request. The comparable fiscal year 2010 funding level is \$61,336,000. The Committee recommendation includes \$19,011,000 in transfers available under section 241 of the Public Health Service Act.

The Office of the National Coordinator for Health Information Technology is responsible for promoting the use of electronic health records in clinical practice, coordinating Federal health information systems and collaborating with the private sector to develop standards for a nationwide interoperable health information technology infrastructure. ONC was permanently established under the Health Information Technology for Economic and Clinical Health [HITECH] Act, which was intended to promote not only the adoption of health information technology, but its meaningful use. The Committee recommendation includes funding for ONC activities relating to the adoption of electronic health records, privacy and security, interoperability, and research and evaluation. The Committee recommendation also includes \$4,000,000, as requested by the administration, to integrate substance abuse and mental health prevention and treatment into the health information technology framework of the larger primary care delivery system.

OFFICE OF INSPECTOR GENERAL

Appropriations, 2010	\$50,279,000
Budget estimate, 2011	51,754,000
Committee recommendation	54,754,000

The Committee recommends an appropriation of \$54,754,000 for the Office of Inspector General [OIG]. The comparable level for fiscal year 2010 is \$50,279,000 and the administration requested \$51,754,000 for this activity. In addition to discretionary funds provided in this act, the Health Insurance Portability and Accountability Act of 1996 provides a permanent appropriation of \$177,205,000 for the Office of Inspector General.

The Office of Inspector General conducts audits, investigations, and evaluations of the programs administered by the Department's operating and staff divisions, including the recipients of the Department's grant and contract funds. In doing so, the OIG addresses issues of waste, fraud, and abuse and makes recommendations to improve the efficiency and effectiveness of the Department's programs and operations.

The Committee notes that recent GAO reports have highlighted the need for greater oversight of the Department's discretionary programs, including those that received increased funding as part of the Recovery Act. The Committee strongly believes that taxpayer resources must be used wisely, and applauds the Secretary for announcing a new Department-wide program integrity initiative to prevent waste and fraud. The Committee recommendation includes funding above the administration request so that the OIG can conduct additional investigations and audits of discretionary programs as part of this new initiative.

OFFICE FOR CIVIL RIGHTS

Appropriations, 2010	\$41,093,000
Budget estimate, 2011	44,382,000
Committee recommendation	44,382,000

The Committee recommends \$44,382,000 for the Office for Civil Rights [OCR]. This amount is the same as the administration's request. The comparable funding level for fiscal year 2010 is \$41,093,000. The Office for Civil Rights is responsible for enforcing civil rights-related statutes in healthcare and human services programs. To enforce these statutes, OCR investigates complaints of discrimination, conducts program reviews to correct discriminatory practices, and implements programs to generate voluntary compliance among providers and constituency groups of health and human services. This office also has responsibility for implementing and enforcing privacy protections under the Health Information Technology for Economic and Clinical Health [HITECH] Act.

RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS

Appropriations, 2010	\$474,557,000
Budget estimate, 2011	517,536,000
Committee recommendation	517, 536,000

The Committee provides an estimated \$517,536,000 for retirement pay and medical benefits for commissioned officers of the U.S. Public Health Service [PHS]. This amount is the same as the administration request. This account provides for retirement payments to PHS officers who are retired due to age, disability, or length of service; payments to survivors of deceased officers; and medical care to active duty and retired officers, as well as their dependents.

PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

Appropriations, 2010	\$1,346,136,000
Budget estimate, 2011	1,540,506,000
Committee recommendation	1.526.795.000

The Committee recommends \$1,526,795,000 for the Public Health and Social Services Emergency Fund. The administration requested \$1,540,506,000 and the comparable fiscal year 2010 level is \$1,346,136,000. The Committee recommendation includes \$1,196,795,000 in discretionary appropriations and \$330,000,000 in balances from Public Law 111–32, consistent with the administration request. This appropriation supports the activities of the Office of the Assistant Secretary for Preparedness and Response and other activities within the Office of the Secretary to prepare for the health consequences of bioterrorism and other public health emergencies, including pandemic influenza, and to support the Department's cyber-security efforts.

Office of the Assistant Secretary for Preparedness and Response [ASPR]

The Pandemic Preparedness and All-Hazards Preparedness Act, enacted into law in December 2006, created the new position of the Assistant Secretary for Preparedness and Response [ASPR]. The ASPR leads the Federal Government's activities regarding preventing, preparing for and responding to public health emergencies and disasters. The Committee recommendation includes \$1,045,806,000 for activities administered by ASPR. The administration requested \$1,053,734,000 and the comparable funding level for fiscal year 2010 is \$891,037,000. These funds will support the Department's efforts to prepare for and respond to public health emergencies, including acts of terrorism.

Hospital Preparedness

The Committee's recommendation includes \$426,000,000, the same as the budget request, for hospital preparedness activities. The comparable funding level for fiscal year 2010 is \$425,928,000. This program provides funding to States and localities to enhance hospital preparedness to respond to public health emergencies. It also funds a national program that helps health professionals volunteer in public health emergencies and disasters.

Advanced Research and Development

The Committee has included bill language, proposed by the ad-ministration, to transfer \$476,194,000 from the Project BioShield Special Reserve Fund advance appropriation to fund advanced research and development. This is the same as the administration request. The fiscal year 2010 comparable amount is \$340,066,000. The Committee has not included additional bill language requested by the administration allowing the Secretary, with 15 days notice to the Committee, to transfer additional amounts from Project Bio-Shield to advanced research and development activities. The Committee notes that, in addition to the funds provided in this bill, the most recent obligation reports from the Department indicate that approximately \$358,000,000 in prior-year unobligated balances remain available for advanced research and development activities. Due to the large amount of funds available to promote promising countermeasures, the Committee has not given the Secretary the authority to independently transfer BioShield balances. The Com-mittee believes that additional transfers from Project BioShield should be made with the full consideration and prior approval of Congress, following sufficient justification from the administration.

Advanced Adjuvants.—Advanced adjuvants have the potential to be dose-sparing and to increase the immunogenicity of influenza vaccine antigen in future pandemics. The Committee recognizes the need to develop these adjuvants with pandemic strains and demonstrate that potential now, before the next pandemic. The Committee encourages ASPR, along with NIH and the FDA, to facilitate the development of advanced adjuvants for influenza vaccine.

Antibacterial Resistance.—The Committee notes that antibacterial resistance and the diminishing antibacterial pipeline are complex problems. Multi-pronged solutions are required to sufficiently limit the impact of antibacterial resistance on patients and the public and to spur the development of products to address antibacterial resistant infections. The Committee encourages ASPR and the National Institute for Allergy and Infectious Diseases to create a seamless approach to the research and development of new antibacterial drugs, particularly those designed to combat gram-negative infections, which will help the transition across the spectrum of enterprise from basic research to product development and procurement.

Emergency Care.—The Committee recognizes the significant findings of the 2006 Institute of Medicine Report, titled "Hospital-Based Emergency Care: At the Breaking Point," which identified critical gaps in emergency medicine research. Therefore, the Committee urges the Secretary to submit a report on the funding information for the past 3 years with respect to emergency medicine research, including the specific HHS agencies involved.

Manufacturing Surge Capacity.—The Committee is concerned that the response to the 2009 H1N1 influenza pandemic strained the manufacturing surge capacity for products that are required for surveillance, detection, and administration of vaccine. The Committee urges ASPR to review the existing manufacturing surge capacity for these products, as well as the adequacy of the Strategic National Stockpile's current inventory of these products. The Committee believes ASPR should continue to develop advance procedures and guidance with respect to relationships with private parties in emergency situations, including establishing advance contracting logistics and developing distribution channels for nonemergency products that would be used in emergency situations.

Medical Countermeasures.—The Committee is aware of the important effort underway by the Secretary to improve the ability of the United States to respond in the event of a natural, unintentional or deliberate high-consequence public health emergency. The Committee looks forward to the administration's review of the issues and challenges facing the Public Health Emergency Medical Countermeasures Enterprise and expects a full report as soon as possible. The Committee requests that, following the medical countermeasures review, the Secretary provide to the Committee a report detailing the additional resources needed to ensure that the discovery, development, procurement, and administration of end-toend medical countermeasures is adequate to protect the American people from chemical, biological, radiological, and nuclear threats. Next Generation Ventilators.—The Committee is aware of a re-

Next Generation Ventilators.—The Committee is aware of a request for proposals solicitation made by the Biomedical Advanced Research and Development Authority [BARDA] in ASPR to support advanced development of domestically manufactured next generation portable ventilators. The Committee supports this effort and requests that the ASPR provide to the Committee an update on this solicitation and its other activities in this area in its fiscal year 2012 budget justification.

Universal Flu Vaccine.—The Committee is encouraged that a universal influenza vaccine, which could potentially provide protection from all flu strains for decades, may become a reality because of research performed by the National Institute of Allergy and Infectious Diseases [NIAID]. Due to the strain-specific nature of current flu vaccine, the Committee recognizes that Federal funds could be saved every year and the public's health could be better protected if a universal influenza vaccine were available. The Committee encourages ASPR to work with NIAID to ensure that sufficient research is being done to develop and test a safe and effective influenza vaccine that protects against all strains of the virus.

Facilities Project

The Committee recommendation includes \$10,000,000 to co-locate the majority of ASPR staff in a new facility. This amount is the same as the administration request. This is a new activity which was not funded in fiscal year 2010.

Other Activities

The Committee recommendation includes the following amounts for the following activities within the Office of the Assistant Secretary for Preparedness and Response:

-Operations-\$12,847,000;

- -Preparedness and Emergency Operations—\$38,059,000;

- —National Disaster Medical System—\$56,540,000; —Medical Countermeasures Dispensing—\$10,000,000; —Global Medicine, Science, and Public Health—\$10,000,000; and
- -Policy, Strategic Planning and Communications-\$6,166,000.

Office of the Assistant Secretary for Administration

The Committee recommendation includes \$32,040,000 for information technology cybersecurity. The administration requested \$37,040,000 and the comparable funding level for fiscal year 2010 is \$27,040,000. These funds provide for continuous monitoring and security incident response coordination for the Department's computer systems and networks.

Office of Public Health and Science

The Committee recommendation includes \$12,694,000 for the medical reserve corps program, a national network of local volunteers that work to strengthen the public health infrastructure and preparedness capabilities of their communities. This amount is the same as the administration request. The comparable level for fiscal year 2010 is \$12,581,000.

Office of the Secretary

The Committee recommendation includes \$436,255,000 for activities within the Office of the Secretary. The administration request is \$437,038,000 and the comparable fiscal year 2010 level is \$415,478,000. The recommendation includes \$106,255,000 in discretionary appropriations and \$330,000,000 in balances from Public Law 111-32, consistent with the administration request.

Pandemic Influenza Preparedness

The Committee provides \$65,578,000 in annual funding for pandemic influenza preparedness activities. This amount is the same as the administration request. The Committee notes that, in addition to the discretionary funds provided in this bill, the Department plans to use an estimated \$330,000,000 in balances from Public Law 111–32, the fiscal year 2009 emergency supplemental, for additional pandemic preparedness investments. The total program level provided for pandemic influenza preparedness activities in fiscal year 2011 is \$395,578,000. The comparable funding level for fiscal year 2010 is \$341,000,000. The funding provided will support pandemic preparedness activities including the expansion of international influenza vaccine production capacity, development of diagnostic assays, improved communications, and global planning efforts.

The Committee notes that a critical public health challenge oc-curred last year when the 2009 novel H1N1 influenza pandemic swept across our country and throughout the world. With unprecedented speed, the Federal Government completed key steps in the H1N1 influenza vaccine development process. The speed of this vaccine development was possible due to the investments made by the Department, with funding provided by this Committee, over the past few years in advanced research and development and infrastructure building. The Committee is also aware that the Department has yet to use approximately \$2,260,000,000 in unobligated funds from the fiscal year 2009 emergency supplemental. The Committee requests that the Secretary prepare a report containing an evaluation of the lessons learned from the coordinated response to the H1N1 pandemic, especially as it pertains to the vaccine development and delivery processes. This evaluation should include the specific steps the Department will take to use unobligated emergency supplemental funds to implement these lessons learned so that our nation is better prepared for future pandemics. This report to the Committee should be submitted by September 30, 2010.

The Committee is concerned that the CDC Morbidity and Mortality Weekly Report from April 2, 2010 found that less than 35 percent of health workers received recommended annual influenza vaccinations. The Committee encourages the Office of the Secretary to work with CDC, CMS, and relevant Federal departments and agencies to develop strategies to increase influenza vaccination rates among healthcare workers.

The Committee understands that the Food and Drug Administration has approved a process that could provide a cost-effective way to recover the active pharmaceutical ingredients in expiring courses of antivirals held in the Strategic National Stockpile and by States. The Committee urges the Secretary to explore this antiviral recovery process as a cost effective way to maintain their current state of preparedness to deal with an influenza pandemic.

Parklawn Replacement

The Committee has included \$35,000,000 to support build-out costs for the Parklawn Building replacement and relocation expenses, as well as repositioning HHS within the Parklawn Building under a short-term lease extension. This amount is the same as the administration request. The comparable level for fiscal year 2010 is \$69,585,000.

Office of Security and Strategic Information

The Committee has included \$5,677,000 for the Office of Security and Strategic Information to secure and strengthen the Department's critical assets. The comparable level for fiscal year 2010 is \$4,893,000 and the administration requested \$6,460,000 for this activity.

PREVENTION AND PUBLIC HEALTH FUND

The Prevention and Public Health Fund was created in section 4002 of the Patient Protection and Affordable Care Act [PPACA]. The fund provides \$15,000,000,000 in mandatory funds over the next 10 years to supplement investments in public health and prevention.

The Committee strongly believes that additional resources for prevention will improve people's health and reduce healthcare costs over the long term. Discretionary funding is needed for these purposes because many of the health promotion activities that reach the populations most in need take place outside the reimbursement system, through community- and State-based initiatives. In recognition of the Committee's responsibility to determine

In recognition of the Committee's responsibility to determine funding levels for community-based prevention and public health programs, the PPACA specifically gives the Committee authority to transfer funds into Federal programs that support the goal of making America healthier.

The PPACA provided \$500,000,000 for the fund in fiscal year 2010. In fiscal year 2011, the level for the fund is \$750,000,000. The Committee includes bill language in section 221 of this act that requires that funds be transferred within 45 days of enactment of this act to the following accounts, for the following activities, and in the following amounts:

Account	Activity	Amount
Disease Control, Research, and Training	Community Transformation Grants authorized under section 4201 of the Patient Protection and Afford- able Care Act.	\$220,000,000
Disease Control, Research, and Training	Racial and Ethnic Approaches to Community Health.	50,000,000
Disease Control, Research, and Training	Chronic Disease State grants	140,000,000
Disease Control, Research, and Training	Office of Smoking and Health for a demonstration on tobacco cessation.	20,000,000
Disease Control, Research, and Training	Office of Smoking and Health for additional resources for quitlines.	15,000,000
Disease Control, Research, and Training	Office of Smoking and Health for a media cam- paign.	55,000,000
Disease Control, Research, and Training	Epidemiology and Laboratory Capacity Grants	50,000,000
Disease Control, Research, and Training	Task Force on Community Preventive Services	7,000,000
Disease Control, Research, and Training	Prevention Research Centers	10,000,000
Disease Control, Research, and Training	Extramural grants for prevention and public health research.	20,000,000
Disease Control, Research, and Training	National Center for Health Statistics	34,000,000
Disease Control, Research, and Training	Scientific review of genetic samples from the Na- tional Birth Defects Prevention Study.	5,000,000
Disease Control, Research, and Training	Extramural grants on disability and health promo- tion.	5,000,000
Disease Control, Research, and Training	Education and outreach campaign regarding preven- tive benefits authorized under section 4004 of the Patient Protection and Affordable Care Act.	2,000,000
Disease Control, Research, and Training	Community Health Worker demonstration authorized in section 399V of the Public Health Service Act.	30,000,000
Substance Abuse and Mental Health Services	Primary and Behavioral Health Integration grants	40,000,000
Healthcare Costs, Quality and Outcomes	U.S. Preventive Services Task Force	7,000,000
Healthcare Costs, Quality and Outcomes	Clinical preventive services research	10,000,000

Account	Activity	Amount
General Departmental Management General Departmental Management	Tobacco prevention and cessation activities Public health and prevention coordination and stra- tegic planning, including media campaigns.	10,000,000 19,000,000
General Departmental Management	National Prevention, Health Promotion and Public Health Council.	1,000,000

GENERAL PROVISIONS

The Committee recommendation continues a provision placing a \$50,000 ceiling on official representation expenses (sec. 201).

The Committee recommendation continues a provision which limits the assignment of certain public health personnel (sec. 202).

The Committee recommendation continues a provision limiting the use of certain grant funds to pay individuals more than an annual rate of executive level I (sec. 203).

The Committee recommendation continues a provision restricting the Secretary's use of taps for program evaluation activities unless a report is submitted to the Appropriations Committees of the House and Senate on the proposed use of funds (sec. 204).

The Committee recommendation continues a provision authorizing the transfer of up to 2.5 percent of Public Health Service funds for evaluation activities (sec. 205).

The Committee recommendation continues a provision restricting transfers of appropriated funds and requires a 15-day notification to both the House and Senate Appropriations Committees (sec. 206).

The Committee recommendation continues a provision permitting the transfer of up to 3 percent of AIDS funds among Institutes and Centers by the Director of NIH and the Director of the Office of AIDS Research at NIH (sec. 207).

The Committee recommendation retains language which requires that the use of AIDS research funds be determined jointly by the Director of the National Institutes of Health and the Director of the Office of AIDS Research and that those funds be allocated directly to the Office of AIDS Research for distribution to the Institutes and Centers consistent with the AIDS research plan (sec. 208).

The Committee recommendation continues a provision regarding requirements for family planning applicants (sec. 209).

The Committee recommendation retains language which states that no provider services under title X of the PHS Act may be exempt from State laws regarding child abuse (sec. 210).

The Committee recommendation retains language which restricts the use of funds to carry out the Medicare Advantage Program if the Secretary denies participation to an otherwise eligible entity (sec. 211).

The Committee recommendation modifies a provision which facilitates the expenditure of funds for international health activities (sec. 212).

The Committee recommendation continues a provision authorizing the Director of the National Institutes of Health to enter into certain transactions to carry out research in support of the NIH Common Fund (sec. 213). The Committee continues a provision that permits the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry to transfer funds that are available for Individual Learning Accounts to "Disease Control, Research, and Training" (sec. 214).

The Committee recommendation includes bill language allowing use of funds to continue operating the Council on Graduate Medical Education (sec. 215).

The Committee recommendation continues a provision permitting the National Institutes of Health to use up to \$2,500,000 per project for improvements and repairs of facilities (sec. 216).

The Committee recommendation includes a provision that transfers funds from NIH to HRSA and AHRQ, to be used for National Research Service Awards (sec. 217).

The Committee recommendation modifies a provision of the Public Health Service Act which allows the Secretary to allocate appropriated funds (sec. 218).

The Committee recommendation modifies a provision of the Public Health Service Act which allows the Secretary to transfer appropriated funds (sec. 219).

The Committee recommendation includes a provision providing for an additional \$7,000,000 for General Departmental Management account and authorizes its transfer within the Department (sec. 220).

The Committee recommendation includes a provision transferring mandatory funds section 4002 of the Patient Protection and Affordable Care Act to accounts with the Department for activities outlined under the heading "Prevention and Public Health Fund" in this report (sec. 221).

TITLE III

DEPARTMENT OF EDUCATION

EDUCATION FOR THE DISADVANTAGED

 Appropriations, 2010
 \$15,914,666,000

 Budget estimate, 2011
 15,883,434,000

 Committee recommendation
 16,726,579,000

The Committee recommends an appropriation of \$16,726,579,000 for education for the disadvantaged. The budget request is \$15,883,434,000. The fiscal year 2010 appropriation is \$15,914,666,000.

The President's budget for fiscal year 2011 was based on the administration's proposal to reauthorize the Elementary and Secondary Education Act [ESEA]. While the authorizing committees have taken significant actions to reauthorize the act, legislation has not yet passed the Senate. As a result, the Committee bill is based on current law for programs authorized under the ESEA.

The programs in the Education for the Disadvantaged account help ensure that poor and low-achieving children are not left behind in the Nation's effort to raise the academic performance of all children and youth. Funds appropriated in this account primarily support activities in the 2011–2012 school year.

Grants to Local Educational Agencies

Title I grants to local educational agencies [LEAs] provide supplemental education funding, especially in high-poverty areas, for local programs that provide extra academic support to help raise the achievement of eligible students or, in the case of schoolwide programs, help all students in high-poverty schools meet challenging State academic standards.

The Committee recommends \$14,942,401,000 for this program. The budget request was \$14,492,401,000, which was the same amount as the fiscal year 2010 appropriation. Title I grants are distributed through four formulas: basic, concentration, targeted, and education finance incentive grant [EFIG].

For title I basic grants, including up to \$4,000,000 transferred to the Census Bureau for poverty updates, the Committee recommends an appropriation of \$6,597,946,000. This amount is the same as the budget request and the fiscal year 2010 appropriation.

For concentration grants, the Committee recommends \$1,365,031,000. This amount is the same as the budget request and the fiscal year 2010 level.

For grants through the targeted formula, the Committee recommends \$3,489,712,000. The budget request and the amount in the fiscal year 2010 appropriations bill are \$3,264,712,000. Finally, for grants through the EFIG formula, the Committee recommends \$3,489,712,000. The budget request and the amount in the fiscal year 2010 appropriations bill are \$3,264,712,000.

Of the funds available for title I grants to LEAs, up to \$4,000,000 shall be available on October 1, 2010, not less than \$3,145,801,000 will become available on July 1, 2011, and \$10,841,176,000 will become available on October 1, 2011. The funds that become available on July 1, 2011, and October 1, 2011, will remain available for obligation through September 30, 2012.

Early Learning Challenge Fund

The Committee recommendation includes \$300,000,000 for a new Early Learning Challenge Fund, as authorized in section 308 of this act. The budget request did not include funding for this activity. These funds are available for obligation from July 1, 2011 through September 30, 2012.

There is robust evidence that high-quality early learning programs help children develop the cognitive, social, emotional, and language skills needed to succeed in school and later in life. Lasting effects are well documented and include improved academic achievement, reduced need for special education, increased employment and earnings, and reduced instances of crime and delinquency. Yet quality varies greatly across settings, within States, and across the Nation, and the most disadvantaged children are often left behind.

The Early Learning Challenge Fund will provide competitive grants to States to develop and implement integrated systems of high-quality early learning programs. States should promote high standards of quality and focus on outcomes across early learning settings, including pre-kindergarten, child care, and Head Start programs, with the goal of increasing the number of disadvantaged children ages 0 to 5, including those who are low-income, homeless, developmentally delayed, or have limited English proficiency, in these programs.

The Secretary of Education shall jointly develop policy for and administer these grants with the Secretary of Health and Human Services. The Committee directs the Departments of Education and HHS to provide a joint briefing to the Committees on Appropriations of the Senate and House of Representatives within 30 days of issuing the grant announcement for this program.

William F. Goodling Even Start Family Literacy Program

The Committee recommends no funding for the Even Start program, as did the budget request. The fiscal year 2010 appropriation is \$66,454,000.

The Even Start program provides grants for family literacy programs that serve disadvantaged families with children under 8 years of age and adults eligible for services under the Adult Education and Family Literacy Act.

The Committee notes that three national evaluations have found that this program did not effectively increase the literacy skills of children and parents participating in the program. The Committee strongly believes that investments in early learning are critical and that's why the bill includes \$300,000,000 for the early learning challenge fund discussed previously, as well an increase of \$990,000,000 for Head Start and \$1,000,000,000 for the Child Care and Development block grant program.

School Improvement Grants

The Committee recommendation includes \$625,000,000 for the School Improvement Grants program. The budget request is \$900,000,000 and the fiscal year 2010 appropriation is \$545,633,000.

The Committee continues language from the fiscal year 2010 act that addresses several issues. First, it continues the expansion of the number of schools that may receive funds through the program. This language allows schools to be eligible if they are title I-eligible and have not made adequate yearly progress for at least 2 years or are in the State's lowest quintile of performance based on proficiency rates. Second, language also allows States to make subgrants of not more than \$2,000,000 to each participating school.

The Committee bill also includes language that specifies that each State that receives School Improvement Grants funds must spend 40 percent of its allocations on school improvement activities in middle and high schools, unless the State educational agency determines that all targeted middle and high schools can be served with a lesser amount. Preliminary indications suggest that many of the lowest-performing high schools will not be served under the current structure of the program. That is a problem because over one-half of the Nation's dropouts come from nearly 2,000 low-performing high schools, and nearly one-third of them aren't eligible for School Improvements under the current structure of the program.

The Committee requests that the Department assist States in encouraging and supporting LEAs in their use of school improvement funds, including those made available through the 4 percent set aside established in section 1003(a) of the ESEA, on those activities with evidence bases rated strong or moderate as defined in the regulations for the Investing in Innovation program. While the Committee acknowledges that the state of research on school improvement and school turnaround is not as strong as it needs to be, every effort should be made to utilize the knowledge base that does exist while additional research is conducted that will inform future activities. The Committee expects the Department to describe in the fiscal year 2012 congressional budget justification specific actions taken or planned to address this request.

Striving Readers

The Committee recommends \$250,000,000 to continue the Striving Readers initiative. This amount is the same as the fiscal year 2010 appropriation. The budget proposes to consolidate this funding within a new Effective Teaching and Learning program under its reauthorization proposal.

The Committee bill includes language that continues this program as it was established in the fiscal year 2010 appropriations act. This comprehensive literacy program will advance literacy skills, including language development, reading and writing for all students, including English language learners and students with disabilities, from birth through grade 12. Of the total amount, up to \$21,000,000 may be used to continue

Of the total amount, up to \$21,000,000 may be used to continue an adolescent literacy initiative and \$10,000,000 will be distributed by formula to States to support a State literacy team. After funds are set aside for schools funded by the Bureau of Indian Affairs and for the outlying areas, up to 5 percent of the remaining funds may be used for national activities, and the rest would be used for competitive grants to State educational agencies. States will be required to distribute not less than 95 percent of their funds as subgrants to LEAs or, in the case of early literacy, to LEAs or other entities providing early childhood care and education. State subgrants must first be prioritized to such agencies or other entities serving greater percentages or numbers of disadvantaged students and ensure that: at least 15 percent go to serve children from birth through age 5, 40 percent to serve students in kindergarten through grade 5, and 40 percent to serve students in middle and high school, through grade 12. States also must equitably distribute funds between middle and high schools.

Improving Literacy Through School Libraries

The Committee recommends \$19,145,000, the same amount as the fiscal year 2010 appropriation, for the Improving Literacy Through School Libraries program. The budget request consolidates this activity within its proposed Effective Teaching and Learning program under its reauthorization proposal.

The Improving Literacy Through School Libraries program provides competitive awards to LEAs to acquire school library media resources, including books and advanced technology; facilitate resource-sharing networks among schools and school libraries; provide professional development for school library media specialists; and provide students with access to school libraries during nonschool hours.

Migrant Education Program

The Committee recommends \$394,771,000 for the migrant education program. This amount is the same as the budget request and the fiscal year 2010 appropriation.

The title I migrant education program authorizes grants to State educational agencies for programs to meet the special educational needs of the children of migrant agricultural workers and fishermen. This appropriation also supports activities to improve interstate and intrastate coordination of migrant education programs, as well as identifying and improving services to the migrant student population.

Neglected and Delinquent

The Committee recommends \$50,427,000 for the title I neglected and delinquent program. This amount is the same as the budget request and the fiscal year 2010 appropriation.

This program provides financial assistance to State educational agencies for education services to neglected and delinquent children and youth in State-run institutions and for juveniles in adult correctional institutions. States are authorized to set aside at least 15 percent, but not more than 30 percent, of their neglected and delinquent funds to help students in State-operated institutions make the transition into locally operated programs and to support the successful re-entry of youth offenders who are age 20 or younger and have received a secondary school diploma or its recognized equivalent.

Evaluation

The Committee recommends \$8,167,000 for evaluation of title I programs. The budget request and fiscal year 2010 appropriation are \$9,167,000.

Evaluation funds are used to support large-scale national surveys that examine how the title I program is contributing to student academic achievement. Funds also are used to evaluate State assessment and accountability systems and analyze the effective-ness of educational programs supported with title I funds.

High School Graduation Initiative

The Committee recommends \$100,000,000 for the High School Graduation Initiative under title I, part H of the ESEA. The fiscal year 2010 appropriation is \$50,000,000. The budget request funds related activities through a broader College Pathways and Accelerated Learning program.

The High School Graduation Initiative provides competitive grants to LEAs or State educational agencies to implement effective high school graduation and reentry strategies in schools and districts that serve students in grades 6 through 12 and have annual school dropout rates that are above their State's average. Funds also are used for certain national activities, including evaluation, technical assistance, and dissemination of information on effective programs and best practices.

The Committee recommends a doubling of this program for several reasons. Despite the important role that high schools play in providing students with the skills they need to be successful in postsecondary education and employment, the Committee notes that only 1 in 4 receive title I funds and the total amount they receive is merely 10 percent of title I funding. The Committee also recognizes that individuals who drop out of high school have a higher likelihood of unemployment and a shorter life expectancy. The economy suffers as well, with fewer skilled workers to compete in the global economy. The Committee expects that this investment will help address the need to improve the performance of our Nation's secondary schools and stem the tide of dropouts that could hold back their individual lives, as well as our economic future.

Special Programs for Migrant Students

The Committee recommends \$36,668,000 for Special Programs for Migrant Students. This amount is the same as the fiscal year 2010 appropriation and the budget request.

The Higher Education Opportunity Act of 2008 reauthorized the High School Equivalency Program [HEP] and College Assistance Migrant Program [CAMP] within the Special Programs for Migrant Students, and added a new provision allowing the Department to reserve up to one-half of 1 percent of the funds appropriated between the two programs for outreach, technical assistance, and professional development activities. In addition, under the reauthorization, if the total amount appropriated is below \$40,000,000, the remaining funds are to be distributed between the two programs in the same proportion as the amounts available for each program the previous year.

HEP projects are 5-year grants to institutions of higher education and other nonprofit organizations to recruit migrant students ages 16 and over and provide the academic and support services needed to help them obtain a high school equivalency certificate and subsequently gain employment, win admission to a postsecondary institution or a job-training program, or join the military. Projects provide counseling, health services, stipends, and placement assistance.

CAMP projects are 5-year grants to institutions of higher education and nonprofit organizations to provide tutoring, counseling, and financial assistance to migrant students during their first year of post-secondary education.

IMPACT AID

Appropriations, 2010	\$1,276,183,000
Budget estimate, 2011	1,276,183,000
Committee recommendation	1,296,183,000

The Committee recommends \$1,296,183,000 for impact aid. The budget request proposes \$1,276,183,000, the same amount as the fiscal year 2010 appropriation, for this program.

Impact aid provides financial assistance to school districts for the costs of educating children when enrollments and the availability of revenues from local sources have been adversely affected by the presence of Federal activities. Children who reside on Federal or Indian lands generally constitute a financial burden on local school systems because these lands do not generate property taxes—a major revenue source for elementary and secondary education in most communities. In addition, realignments of U.S. military forces at bases across the country often lead to influxes of children into school districts without producing the new revenues required to maintain an appropriate level of education.

The Committee bill retains language that provides for continued eligibility for students affected by the deployment or death of their military parent, as long as these children still attend schools in the same school district.

The Committee bill also includes language that would continue heavily impacted payments in 2010 and 2011 for local educational agencies that received such payments in 2009. The bill also includes new language related to the Department's policy on demolished housing that is scheduled to be replaced.

Basic Support Payments.—The Committee recommends \$1,153,000,000 for basic support payments. The fiscal year 2010 level and the budget request are \$1,138,000,000. Under this statutory formula, payments are made on behalf of all categories of federally connected children, with a priority placed on making payments first to heavily impacted school districts and providing any remaining funds for regular basic support payments. Payments for Children With Disabilities.—The Committee bill includes \$50,602,000 for payments for children with disabilities. The fiscal year 2010 funding level and the budget request are \$48,602,000 for this purpose. Under this program, additional payments are made for certain federally connected children eligible for services under the Individuals with Disabilities Education Act.

Facilities Maintenance.—The Committee recommends \$4,864,000, the same amount as the fiscal year 2010 appropriation and the budget request, for facilities maintenance. This activity provides funding for emergency repairs and comprehensive capital improvements to certain school facilities owned by the Department of Education and used by local educational agencies to serve federally connected military dependent students. Funds appropriated for this purpose are available until expended.

Construction.—The Committee recommends \$18,509,000 for the construction program. The budget request and fiscal year 2010 appropriation are \$17,509,000 for this program. Formula and competitive grants are authorized to be awarded to eligible LEAs for emergency repairs and modernization of school facilities.

The fiscal year 2011 budget request proposes to make awards entirely under the competitive grant formula and requests that the funds be available for 2 years. The Committee recommendation includes bill language allowing these funds to be awarded entirely through a competitive process, as proposed in the budget request. Funds also are available for obligation through September 30, 2012. Last year's bill provided these funds entirely through formula allocations.

Payments for Federal Property.—The Committee recommends \$69,208,000 for payments for Federal property. The budget request and the fiscal year 2010 appropriation are \$67,208,000 for this program. These payments compensate LEAs in part for revenue lost due to the removal of Federal property from local tax rolls.

SCHOOL IMPROVEMENT PROGRAMS

Appropriations, 2010	\$5,228,444,000
Budget estimate, 2011	3,120,094,000
Committee recommendation	5.388.173.000

The Committee recommendation includes \$5,388,173,000 for school improvement The budget request programs. is \$3,120,094,000. The fiscal vear 2010appropriation is \$5,228,444,000.

The President's budget for fiscal year 2011 was based on the administration's proposal to reauthorize the Elementary and Secondary Education Act [ESEA]. While the authorizing committees have taken significant actions to reauthorize the act, legislation has not yet passed the Senate. As a result, programs in this account are based generally on current law, as authorized under the ESEA.

State Grants for Improving Teacher Quality

The Committee recommends \$2,954,673,000 for State grants for improving teacher quality. The fiscal year 2010 appropriation is \$2,947,749,000 for this program. The budget request proposes \$2,500,000,000 for a new effective teacher and leaders State grants program within the Innovation and Improvement account.

The appropriation for this program primarily supports activities associated with the 2011–2012 academic year. Of the funds provided, \$7,000,000 will become available on October 1, 2010, and remain available through September 30, 2011. Of the remainder, \$1,266,232,000 will become available on July 1, 2011, and \$1,681,441,000 will become available on October 1, 2011. These funds will remain available for obligation through September 30, 2012.

States and LEAs may use funds for a range of activities related to the certification, recruitment, professional development, and support of teachers and administrators. Activities may include reforming teacher certification and licensure requirements, addressing alternative routes to State certification of teachers, recruiting teachers and principals, and implementing teacher mentoring systems, teacher testing, merit pay, and merit-based performance systems. These funds may also be used by districts to hire teachers to reduce class sizes.

From the amount available on October 1, 2010, the Department may use up to \$7,000,000 to continue its TEACH campaign. This initiative is designed to recruit the next generation of American teachers. While the Committee strongly supports this goal, it also notes that the National Research Council [NRC] report "Preparing Teachers: Building Evidence for Sound Policy" released earlier this year found there was much we still don't know about teacher preparation and its effectiveness. The report noted that improved understanding of the relationships between characteristics of teacher preparation and student learning, and the development of a com-prehensive, coherent system for collecting data about teacher preparation are two overarching needs. The Committee believes the Department should utilize available resources to address both needs, while also continuing its efforts to attract the new teachers needed for America's classrooms. The Committee requests a report, not later than 30 days after enactment of this act, which describes the actions the Department is proposing, planning, and taking to address relevant conclusions and recommendations from the NRC report.

The Committee also directs \$5,000,000 to continue a national initiative to recruit, train, and support results-oriented, highly motivated individuals to lead high-need schools with a focus on raising the achievement of all students and closing the achievement gap in these schools. These funds shall be awarded to the New Leaders for New Schools for the organization's efforts to develop and deliver training for aspiring principals and support for principals, and conduct research to create a knowledge base to inform the recruitment, selection, and training of principals for high-need schools.

Mathematics and Science Partnerships

The Committee recommends \$180,478,000, the same amount as the fiscal year 2010 level, for the mathematics and science partnerships program. The budget proposes \$300,000,000 for a new Effective Teaching and Learning: Science, Technology, Engineering, Mathematics program. These funds will be used to improve the performance of students in the areas of math and science by bringing math and science teachers in elementary and secondary schools together with scientists, mathematicians, and engineers to increase the teachers' subject-matter knowledge and improve their teaching skills. The Department awards grants to States by a formula based on the number of children aged 5 to 17 who are from families with incomes below the poverty line. States then are required to make grants competitively to eligible partnerships, which must include an engineering, math, or science department of an institution of higher learning and a high-need LEA.

Educational Technology State Grants

The Committee recommends \$100,000,000, the same amount as the fiscal year 2010 appropriation, for educational technology State grants. The budget requests no funds for this program. Instead, the budget supports the integrated use of technology through the Effective Teaching and Learning for a Complete Education program.

The educational technology State grants program supports efforts to integrate technology into curricula to improve student learning. Funds flow by formula to States and may be used for the purchase of hardware and software, teacher training on integrating technology into the curriculum, and efforts to use technology to improve communication with parents, among other related purposes.

The Committee bill retains language allowing States to award up to 100 percent of their funds competitively.

Supplemental Education Grants

The Committee recommendation includes \$17,687,000, the same amount as the budget request and the fiscal year 2010 appropriation, for supplemental education grants to the Republic of Marshall Islands [RMI] and the Federated States of Micronesia [FSM]. This grant program was authorized by the Compact of Free Association Amendments Act of 2003. These funds will be transferred from the Department of Education to the Secretary of the Interior for grants to these entities. The Committee bill includes language that allows up to 5 percent to be used by the FSM and RMI to purchase oversight and technical assistance, which may include reimbursement to the Departments of Labor, Health and Human Services, and Education for such services.

21st Century Community Learning Centers

The Committee recommends an appropriation of \$1,266,166,000 for the 21st Century Community Learning Centers program. The budget request and the fiscal year 2010 level are both \$1,166,166,000 for this program.

Funds are allocated to States by formula, which in turn, award at least 95 percent of their allocations to LEAs, community-based organizations and other public and private entities. Grantees use these resources to establish or expand community learning centers that provide activities offering significant extended learning opportunities, such as before- and after-school programs, recreational activities, drug and violence prevention, and family literacy programs for students and related services to their families. Centers must target their services on students who attend schools that are eligible to operate a schoolwide program under title I of the ESEA or serve high percentages of students from low-income families.

The Committee recognizes the value that additional time in school can offer to students, especially students in low-performing schools who may need additional time to master academics as well as benefit from the engagement and learning of enrichment activities. In awarding grants to applicants that propose to expand learning time, the Committee intends that States consider applications proposing significant changes to the school calendar such as extended school days, Saturday classes and extended year approaches. It is the expectation of the Committee that in offering expanded learning time programs schools will ensure that students have more opportunity for academic learning, but are also offered additional enrichment activities. Enrichment activities, which are critical to a well-rounded education, include the arts and physical education.

Therefore, the Committee bill includes new language authorizing the use of these funds for subgrants that significantly increase the number of hours in a regular school schedule and comprehensively redesign the school schedule for all students in the school. The purpose of this extended learning time shall be both for instruction in the core academic and other subjects and for enrichment activities, including the arts or physical activity. This use of funds is in addition to those authorized under the ESEA.

State Assessments and Enhanced Assessment Instruments

The Committee recommends \$450,000,000, the same amount as the budget request, for State assessments and enhanced assessment instruments. The fiscal year 2010 appropriation is \$410,732,000 for this program.

This program has two components. The first provides formula grants to States to pay the cost of developing standards and assessments required by the No Child Left Behind Act. The Committee provides \$400,000,000, the same as the fiscal year 2010 level and the budget request, for this purpose.

Under the second component—grants for enhanced assessment instruments—appropriations in excess of the State assessment program are used for a competitive grant program designed to support efforts by States to improve the quality and fairness of their assessment systems. The Committee recommendation for the second component is \$50,000,000, the same as the budget request and the fiscal year 2010 appropriation.

The Committee urges the Department to continue to place a high priority on grant applications that aim to improve the quality of State assessments for students with disabilities and students with limited English proficiency, and to ensure the most accurate means of measuring their performance on these assessments.

Javits Gifted and Talented Education

The Committee concurs with the budget request in recommending no funds for the Javits Gifted and Talented Students Education Program. The fiscal year 2010 appropriation is \$7,463,000 for this purpose. Funds are used for awards to State and local educational agencies, institutions of higher education, and other public and private agencies for research, demonstration, and training activities designed to enhance the capability of elementary and secondary schools to meet the special educational needs of gifted and talented students.

The Committee has included funding within the Institute of Education Sciences that may be used to support research and development in this area. The Committee also urges the Department to provide continued attention to the needs of gifted and talented students through existing authorities including the fund for the improvement of education.

Foreign Language Assistance

The Committee recommends \$26,928,000, the same amount as the fiscal year 2010 appropriation, for the foreign language assistance program. The budget request includes no funds for this program.

Funds from this program support competitive grants to increase the quality and quantity of foreign language instruction. At least 75 percent of the appropriation must be used to expand foreign language education in the elementary grades. The Committee has included bill language that prohibits foreign language assistance program funds from being used for the foreign language incentive program. The Committee also includes bill language that allows up to \$11,500,000 for 5-year grants to LEAs, in partnership with institutions of higher education, for the establishment or expansion of articulated programs of study in critical-need languages. The amount set aside for this purpose in fiscal year 2010 is \$9,729,000.

The Committee is concerned that this program is unavailable to the poorest schools because grant recipients must provide a 50 percent match from non-Federal sources. The Committee, therefore, strongly urges the Secretary to use his ability to waive the matching requirement for qualifying schools and to increase awareness of this accommodation among the affected school population.

Education for Homeless Children and Youth

For carrying out education activities authorized by title VII, subtitle B of the Stewart B. McKinney Homeless Assistance Act, the Committee recommends \$75,427,000. The budget request and fiscal year 2010 appropriation are \$65,427,000 for this program.

This program provides assistance to each State to support an office of the coordinator of education for homeless children and youth, to develop and implement State plans for educating homeless children, and to make subgrants to LEAs to support the education of those children. Grants are made to States based on the total that each State receives in title I grants to LEAs.

Under the McKinney-Vento Homeless Children and Youths Program, State educational agencies must ensure that homeless children and youth have equal access to the same free public education, including a public preschool education, as is provided to other children and youth.

The Committee notes that the most recent data reported to the Department show that a total of 956,914 homeless students were reported enrolled in all LEAs in the 2008–2009 school year, a 20 percent increase from the 2007–2008 school year. The increases have occurred across the Nation, as 44 States reported increases in the total homeless children and youth enrolled in LEAs in the 2008–2009 school year. The Committee recommendation will help provide effective educational services to this population of students.

Training and Advisory Services

For training and advisory services authorized by title IV of the Civil Rights Act, the Committee recommends \$6,989,000, the same amount as the budget request and the fiscal year 2010 appropriation.

The funds provided will support awards to operate the 10 regional equity assistance centers [EACs]. Each EAC provides services to school districts upon request. Activities include disseminating information on successful practices and legal requirements related to nondiscrimination on the basis of race, color, sex, or national origin in education programs.

Education for Native Hawaiians

For programs for the education of Native Hawaiians, the Committee recommends \$35,315,000. The budget request is \$34,315,000, the same amount as the fiscal year 2010 appropriation. The Committee bill includes language requiring that at least \$1,500,000 of the funds be used for a grant to the Department of Education of the State of Hawaii for construction and renovation of facilities at public schools serving a predominantly Native Hawaiian student body.

The Committee bill also includes language stipulating that \$1,500,000 shall be used for a grant to the Center of Excellence at the University of Hawaii School of Law, for the Native Hawaiian Law School Center of Excellence. This repository houses a compilation of historical and cultural documents that facilitates preservation and examination of laws of great significance to Native Hawaiians.

The Committee bill also includes language stipulating that \$500,000 shall be used under title VIII, part Z of the Higher Education Act for the Henry K. Giugni Memorial Archives at the University of Hawaii.

Alaska Native Educational Equity

The Committee recommends \$33,315,000, the same amount as the fiscal year 2010 level and the budget request, for the Alaska Native educational equity assistance program.

These funds address the severe educational handicaps of Alaska Native schoolchildren. Funds are used for the development of supplemental educational programs to benefit Alaska Natives. The Committee bill includes language that allows funding provided by this program to be used for construction. The Committee expects the Department to use some of these funds to address the construction needs of rural schools.

Rural Education

The Committee recommends \$179,882,000 for rural education programs. The budget request includes \$174,882,000, the same as the fiscal year 2010 appropriation, for this purpose.

The Committee expects that rural education funding will be equally divided between the Small, Rural Schools Achievement Program, which provides funds to LEAs that serve a small number of students, and the Rural and Low-Income Schools Program, which provides funds to LEAs that serve concentrations of poor students, regardless of the number of students served.

Comprehensive Centers

The Committee recommends \$61,313,000 for the comprehensive centers program. The budget request and the fiscal year 2010 level are \$56,313,000 for the comprehensive centers program.

These funds provide support to a network of 21 comprehensive centers that are operated by research organizations, agencies, institutions of higher education or partnerships thereof, and provide training and technical assistance on various issues to States, LEAs, and schools as identified through needs assessments undertaken in each region. The system also currently includes 16 regional centers, which are charged with providing intensive technical assistance to State educational agencies to increase their capacity to assist LEAs and schools with meeting the goals of No Child Left Behind, and five content centers, which are organized by topic area.

The centers are currently operating under the 6th year of what was expected to be 5-year grants for operation. The fiscal year 2011 appropriation is expected to support the awards for the first year of funding under a competition expected early next year. The centers can play an important role in supporting State and local school improvement efforts that have been enhanced through the significant amount of Federal funding that has been made available by this Committee in recent years. Therefore, the Committee expects to be notified promptly of the Department's specific plans for a competition for the centers.

INDIAN EDUCATION

Appropriations, 2010	\$127,282,000
Budget estimate, 2011	127,282,000
Committee recommendation	129,282,000

The Committee recommends \$129,282,000 for Indian Education programs. The budget request and the fiscal year 2010 appropriation are \$127,282,000 for these programs.

Grants to Local Education Agencies

For grants to local educational agencies, the Committee recommends \$104,331,000, the same amount as the fiscal year 2010 funding level and the budget request.

These funds provide financial support to elementary and secondary school programs that serve Indian students, including preschool children. Funds are awarded on a formula basis to local educational agencies, schools supported and operated by the Department of the Interior/Bureau of Indian Education, and in some cases directly to Indian tribes.

Special Programs for Indian Children

The Committee recommends \$19,060,000, the same amount as the budget request and fiscal year 2010 appropriation, for special programs for Indian children.

Funds are used for demonstration grants to improve Indian student achievement through early childhood education and college preparation programs, and for professional development grants for training Indians who are preparing to begin careers in teaching and school administration.

National Activities

The Committee recommends \$5,891,000 for national activities. The fiscal year 2010 funding level and the budget request are \$3,891,000 for these activities.

Funds will be used to expand efforts to improve research, evaluation, and data collection on the status and effectiveness of Indian education programs. Of the amount provided, \$2,000,000 shall be used for grants to tribes for education administration and planning.

INNOVATION AND IMPROVEMENT

Appropriations, 2010	\$1,379,065,000
Budget estimate, 2011	6,332,278,000
Committee recommendation	2,224,843,000

The Committee recommendation includes \$2,224,843,000 for programs within the innovation and improvement account. The budget request is \$6,332,278,000 for related activities. The fiscal year 2010 appropriation is \$1,379,065,000 for programs in this account.

The President's budget for fiscal year 2011 is based on the administration's proposal to reauthorize the Elementary and Secondary Education Act. While the authorizing committees have taken significant actions to reauthorize the act, legislation has not yet passed the Senate. As a result, programs in this account are based generally on current law, as authorized under the Elementary and Secondary Education Act.

Race to the Top

The Committee recommends \$675,000,000 for the Race to the Top program. The budget request includes \$1,350,000,000 for this purpose. No funds were included in the fiscal year 2010 bill for this activity. These funds are available for obligation on July 1, 2011 and will remain available through September 30, 2012.

Race to the Top was established in the American Recovery and Reinvestment Act. It has incentivized reforms that are designed to reduce achievement gaps, significantly improve student achievement, graduation rates and college enrollments, and encourage the broad replication of effective practices. With funds provided in this appropriations bill, the Department may make competitive awards to State and/or local education agencies based on their commitment to and plan for innovation and reform that will improve student achievement. The Committee notes this competitive program has achieved enormous success in spurring States to change their practices for the purposes of closing the achievement gap and making other needed improvements. Tennessee and Delaware have been awarded funds already, and 36 States applied for phase 2 grants that will be awarded over the next 2 months. Grants funded by the fiscal year 2011 bill may be awarded to local school districts as well as States. While the amount provided in this bill is less than the administration's request of \$1,350,000,000, the Committee believes this funding level will sustain the education reform momentum created by the Recovery Act.

Investing in Innovation

The Committee recommends \$250,000,000 for the Investing in Innovation program. The budget request is \$500,000,000 for this purpose. No funds were included in the fiscal year 2010 bill for this activity.

Investing in Innovation was established in the American Recovery and Reinvestment Act. The program has provided a source for replicating education programs that meet the highest level of evidence; expanding those with significant levels of evidence; and supporting promising practices for which there is some level of research. The Committee supports this three-tier evidentiary model and believes that this feature of the program should continue to guide future funding opportunities and decisions.

Effective Teachers and Leaders

The Committee recommends no funding for the effective teachers and leaders State grant program. The budget request includes \$2,500,000,000 for this new program based on the administration's reauthorization proposal.

The Committee has provided \$2,954,673,000 for State grants for improving teacher quality within the School Improvement programs account. These funds may be used for similar purposes as those proposed under this new program.

Effective Teachers and Leaders Innovation Fund

The Committee recommends no funding for the effective teachers and leaders innovation fund. The budget request includes \$950,000,000 for this new program based on the administration's reauthorization proposal.

The Committee has provided \$400,000,000 for the Teacher Incentive Fund and additional funds for other current law programs that may be used for similar purposes as those proposed under this new program.

Teacher and Leader Pathways

The Committee recommends no funding for the teacher and leader pathways program. The budget request includes \$405,000,000 for this new program based on the administration's reauthorization proposal.

The Committee has provided resources under current law programs that may be used for similar purposes as those proposed under this new program.

Expanding Educational Options

The Committee recommends no funding for the expanding educational options program. The budget request includes \$490,000,000 for this new program based on the administration's reauthorization proposal.

The Committee has provided resources under current law programs that may be used for similar purposes as those proposed under this new program.

Troops-to-Teachers

The Committee recommends no appropriation, as proposed in the budget request, to support the Defense Department's Troops-to-Teachers program. The fiscal year 2010 appropriation is \$14,389,000 for this purpose.

This program helps recruit and prepare retiring and former military personnel to become highly qualified teachers serving in highpoverty school districts. The Secretary of Education transfers program funds to the Department of Defense for the Defense Activity for Non-Traditional Education Support to provide assistance, including stipends or bonuses, to eligible members of the armed forces so that they can obtain teacher certification or licensing. In addition, the program helps these individuals find employment in a school.

Transition to Teaching

The Committee recommends \$43,707,000, the same as the fiscal year 2010 appropriation, for the Transition to Teaching program. The budget request proposes excellent instructional teams programs that could support activities carried out under this program.

This program provides grants to help support efforts to recruit, train, and place nontraditional teaching candidates into teaching positions and to support them during their first years in the classroom. In particular, this program is intended to attract mid-career professionals and recent college graduates. Program participants are placed in high-need schools in high-need LEAs.

National Writing Project

The Committee recommends \$25,646,000, the same amount as the fiscal year 2010 bill, for the National Writing Project. The budget request does not include any funds for this purpose. These funds are awarded to the National Writing Project, a non-

These funds are awarded to the National Writing Project, a nonprofit organization that supports and promotes K–16 teacher training programs in the effective teaching of writing.

Teaching of Traditional American History

The Committee recommends \$118,952,000 for the teaching of traditional American history program. This is the same amount as the fiscal year 2010 level. The budget request proposes an effective teaching and learning for a well rounded education program that could support activities carried out under this program.

The teaching of traditional American history program supports competitive grants to LEAs, and funds may be used only to undertake activities that are related to American history, and cannot be used for social studies coursework. Grant awards are designed to augment the quality of American history instruction and to provide professional development activities and teacher education in the area of American history. Grants are awarded for 3 years, with 2 additional years allowed for grantees that are performing effectively.

The Committee bill retains language that allows the Department to reserve up to 3 percent of funds appropriated for this program for national activities. The Committee believes that the Department should use these funds to help grantees reach those teachers most in need of services supported by these grant funds.

School Leadership

The Committee recommends \$41,220,000 for the school leadership program. The fiscal year 2010 level is \$29,220,000 for this program. The budget request proposes a teacher and leader pathways program that could support activities funded through this program.

The program provides competitive grants to assist high-need LEAs to recruit and train principals and assistant principals through activities such as professional development and training programs. The Committee continues to recognize the critical role that principals and assistant principals play in creating an environment that fosters effective teaching and high academic achievement for students.

The Committee bill includes language directing the Secretary to establish priorities for these funds for those eligible entities that propose programs to prepare school leaders to turn around low-performing schools and to those entities that would prepare leaders for service in rural schools. The Committee intends that the Secretary shall give priority to applicants that propose to focus on providing principals and other school leaders with the skills and knowledge needed to turn around low-performing schools. The Committee expects that those applicants will offer a process to place such trained school leaders in low-performing schools and that low-performing schools should include those schools eligible for funds under section 1003(g) of ESEA that have been identified by States and districts as being in the bottom 5 percent of schools statewide or have otherwise demonstrated persistent low performance.

Advanced Credentialing

The Committee recommends \$10,649,000 for the advanced credentialing program. This is the same amount as the fiscal year 2010 appropriation for this program. The budget request includes no funds for this purpose.

The Committee includes bill language directing all of the funding for this program to the National Board for Professional Teaching Standards. Funds available assist the board's work in providing financial support to States for teachers applying for certification, increasing the number of minority teachers seeking certification and developing outreach programs about the advanced certification program.

Teach for America

The Committee recommends \$22,000,000 for Teach for America [TFA], a nonprofit organization that recruits outstanding recent

college graduates who commit to teach for 2 years in underserved communities. The budget request includes no funds for this program. Teach for America received \$18,000,000 through the fiscal year 2010 bill.

In 2008, the Higher Education Opportunity Act amended the Higher Education Act of 1965 to include authority for the Teach for America program. The purpose of the program is to enable TFA to implement and expand its program for recruiting, selecting, training, and supporting new teachers. With these funds, the grantee is required to: (1) provide highly qualified teachers to serve in high-need local educational agencies in urban and rural communities; (2) pay the costs of recruiting, selecting, training, and supporting new teachers; and (3) serve a substantial number and percentage of underserved students.

Charter Schools

The Committee recommends a total of \$256,031,000 for the support of charter schools. This amount is the same as the fiscal year 2010 appropriation. The budget request proposes no dedicated funding for the charter schools program, instead providing support for such activities through a broader expanding educational options program.

The Committee allocates the recommended funding as follows: not less than \$223,000,000 for charter school grants, up to \$23,031,000 for the State facilities, and credit enhancement for charter schools facilities programs, and up to \$10,000,000 for national activities designed to support local, State, and national efforts to increase the number of high-quality charter schools.

The Charter Schools grants program supports the planning, development, and initial implementation of charter schools. State educational agencies [SEA] that have the authority under State law to approve charter schools are eligible to compete for grants. If an eligible SEA does not participate, charter schools from the State may apply directly to the Secretary.

Under the State facilities program, the Department awards 5year competitive grants to States that operate per-pupil facilities aid programs for charters schools. Federal funds are used to match State-funded programs in order to provide charter schools with additional resources for charter school facilities financing.

The credit enhancement program provides assistance to help charter schools meet their facility needs. Funds are provided on a competitive basis to public and nonprofit entities, to leverage non-Federal funds that help charter schools obtain school facilities through purchase, lease, renovation, and construction.

The Committee continues language from the fiscal year 2010 bill that allows the Secretary to reserve up to \$55,000,000 of the charter school grant funds to make multiple awards to charter management organizations and other entities for the replication and expansion of successful charter school models.

Voluntary Public School Choice

The Committee recommends \$25,819,000, the same amount as the fiscal year 2010 appropriation, for the voluntary public school choice program. The budget request proposes no funds for this program.

This program supports efforts by States and school districts to establish or expand State- or district-wide public school choice programs, especially for parents whose children attend low-performing public schools.

Magnet Schools Assistance

The Committee recommends \$100,000,000, the same amount as the fiscal year 2010 appropriation, for the magnet schools assistance program. The budget request includes \$110,000,000 for this purpose.

This program supports grants to local educational agencies to establish and operate magnet schools that are part of a court-ordered or federally approved voluntary desegregation plan. Magnet schools are designed to attract substantial numbers of students from different social, economic, ethnic, and racial backgrounds. Grantees may use funds for planning and promotional materials, teacher salaries, and the purchase of computers and other educational materials and equipment.

Fund for the Improvement of Education

The Committee recommends an appropriation of \$178,987,000 for the Fund for the Improvement of Education [FIE]. The fiscal year 2010 appropriation is \$261,570,000, and the budget request is \$27,278,000 for this purpose.

Within programs of national significance, the Committee includes \$1,250,000 to continue the educational facilities clearinghouse that provides information on planning, designing, financing, building, maintaining, and operating safe, healthy, high-performance educational facilities, including early learning centers. The Committee also provides \$6,000,000 for Reach Out and Read, a literacy program; \$4,000,000 for Communities in Schools, a dropout prevention program; and additional funding for data quality and evaluation initiatives and peer review.

The Committee also includes \$7,601,000 for other activities that the Secretary may use at his discretion. The budget request includes \$19,750,000 for special studies, conferences, and grant awards that the Secretary may use at his discretion. The Committee encourages the Secretary to consider using these funds for continued support of financial literacy activities.

Within the total amount for FIE, the Committee recommendation also includes funding for several separately authorized programs.

The Committee recommends \$24,803,000, the same amount as the fiscal year 2010 appropriation, for the contract to Reading Is Fundamental Inc. [RIF] to provide reading-motivation activities. RIF, a private nonprofit organization, helps prepare young children and motivate older children to read, through activities including the distribution of books. The budget request proposes no funds for RIF.

The Committee concurs with the budget proposal in providing no funds for the Ready to Teach program. Ready to Teach encompasses funding for competitive awards to one or more nonprofit entities, for the purpose of continuing to develop telecommunicationsbased programs to improve teacher quality in core areas. It also includes digital educational programming grants, which encourage community partnerships among local public television stations, State and local educational agencies, and other institutions to develop and distribute digital instructional content based on State and local standards.

The Committee recommends \$8,754,000, the same amount as the fiscal year 2010 appropriation, for the Education through Cultural and Historical Organizations [ECHO] Act of 2001. The budget request proposes no funds for this program. Programs authorized under ECHO provide a broad range of educational, cultural, and job training opportunities for students from communities in Alaska, Hawaii, Massachusetts, and Mississippi.

The Committee has included \$42,000,000 for arts in education. The budget request includes no funds for this purpose. The fiscal year 2010 appropriation is \$40,000,000 for authorized activities. The recommendation includes \$10,060,000 for VSA, an international nonprofit organization that supports the involvement of persons with disabilities in arts programs, and \$7,000,000 for the John F. Kennedy Center for the Performing Arts. Remaining funds are provided for professional development, model arts programs and evaluation activities.

From such funds remaining for the arts in education program, the Committee urges the Department to support the evaluation and national public dissemination of information regarding model programs and professional development projects funded through the Arts in Education section, including dissemination of information regarding the results of projects which received awards in fiscal years 2001 and 2002, and subsequent years. The Committee expects such information to be available and disseminated not later than 30 days after enactment of this act and to include, where available, information regarding project outcomes, training methods, and the self-evaluation results of funded model arts programs and professional development programs. The Committee urges the Department to focus first on dissemination activities related to funded programs before using these resources for other purposes.

The Committee recommends \$39,254,000, the same amount as the fiscal year 2010 appropriation, for parental information and resource centers. The budget request includes no funds for this purpose. Centers provide training, information, and support to parents, State and local education agencies, and other organizations that carry out parent education and family involvement programs.

The Committee includes \$2,278,000, the same amount as the budget request, for the women's educational equity program. The fiscal year 2010 appropriation is \$2,423,000. This program supports projects that assist in the local implementation of gender equity policies and practices.

The Committee concurs with the budget request in recommending no funds for activities authorized by the Excellence in Economic Education Act. The fiscal year 2010 appropriation includes \$1,447,000 for this purpose. Funds support a grant to a nonprofit educational organization to promote economic and financial literacy among kindergarten through 12th grade students. The Committee bill includes no funds to continue the mental health integration in schools program. The fiscal year 2010 appropriation is \$5,913,000 for this program. The budget proposes no funds for this purpose. This program supports grants to or contracts with State educational agencies, local educational agencies or Indian tribes to increase student access to mental healthcare by linking schools with their local mental health systems. The Committee bill includes additional resources within safe and drug free national activities to address student mental health issues.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
3–D School, Petal, MS, for a model dyslexia intervention program	\$200,000
Appalachian State University, Boone, NC, for college preparation and access programs for high school students	200,000
Avant-Garde Learning Foundation, Anchorage, AK, to improve educational outcomes for children in low- performing school districts	100,000
Baltimore City Public Schools, Baltimore City, MD, for support of alternative education programs for	
academically challenged students, which may include equipment and technology Big Brothers Big Sisters, Anchorage, AK, for youth mentoring programs for underserved, at-risk popu-	1,000,000
lations in Alaska	100,000
Big Thought, Dallas, TX, for afterschool programs Boys & Girls Club of Greater Milwaukee, Milwaukee, WI, for support of early literacy and related pro-	110,000
gramming	300,000
Catamount Arts, St. Johnsbury, VT, for support of arts education Chaddock, Quincy, IL, for support of special education activities	200,000 200,000
Challenger Learning Center, Bangor, ME, for science technology engineering and mathematics pro-	,
grams	250,000
Chicago Public Schools, Chicago, IL, for a youth violence prevention initiative Chicago School of Professional Psychology, Chicago, IL, for support of afterschool programming	500,000 300.000
Churchill County School District, Fallon, NV, for STEM Curriculum and technology Improvements	25,000
City University of New York-York College, Jamaica, NY, for support of science and aerospace-based edu-	
cation, which may include acquisition of technology	150,000
Clark County School District, Las Vegas, NV, for support of a school for highly gifted students Clark County School District, Las Vegas, NV, for support of the Family Leadership Initiative	750,000 300,000
Cleveland Metropolitan School District, Cleveland, OH, for science education programs, including the	000,000
purchase of equipment	150,000
Cleveland Metropolitan School District, Cleveland, OH, to improve math, science, technology, and lan-	100.000
guage skills through music education Communities In Schools of Spokane County, Spokane, WA, for support of mentoring programs	100,000 150.000
Connect Arkansas, Little Rock, AR, to purchase and equip mobile broadband labs	200,000
Cook Inlet Tribal Council, Anchorage, AK, to increase literacy and math skills of Alaskan students	250,000
Cristo Rey, Chicago, IL, for educational programming, which may include evaluation activities Cuyahoga County Office of Early Childhood/Invest in Children, Cleveland, OH, for an early childhood edu-	250,000
cation initiative, including scholarships	100,000
Delta Arts Alliance, Inc., Drew, MS, for arts education programs	150,000
Delta State University, Cleveland, MS, for a training program for early childhood educators	300,000
Delta State University, Cleveland, MS, for science and environmental education and outreach activities Des Moines Independent Community School District, Des Moines, IA, to increase access to and quality of	300,000
early childhood education programs Drueding Center, Philadelphia, PA, to support educational programs, including staff, technology up-	750,000
grades, and the purchase of equipment	100,000
Eastern Maine Development Corporation, Bangor, ME, for youth career pathway programs	225,000
Eden Housing, Hayward, CA, for support of an after school program	450,000
Educare Central Maine, Waterville, ME, to support early childhood education activities, including the purchase of equipment	250,000
Educating Young Minds, Los Angeles, CA, for educational programming, which may include the acquisi-	,
tion of technology	175,000
Education Alliance of Washoe County, Reno, NV, for support of an afterschool tutoring program El Centro de la Raza, Seattle, WA, for support of counseling, tutoring, and educational programming	150,000 100,000
Elev8 New Mexico, New Mexico Community Foundation, Albuquerque, NM, for support of extended day	
learning programs in New Mexico ENLACE New Mexico, Albuquerque, NM, for support of academic engagement and completion programs	200,000
in New Mexico	150,000

	Amount
verybody Wins! USA, Boston, MA, for child literacy programs across the country alcon School District 49, Falcon, CO, to support a science, technology, engineering, and math edu-	500,0
cation program	100,0
riends of E Prep Schools, Cleveland, OH, for technology including the purchase of equipment	150,0
live Every Child A Chance, Manteca, CA, for the expansion of the Give Every Child A Chance program	300,0
Slenwood School for Boys and Girls, St. Charles, IL, for training and development costs associated with	000,0
the Life Stabilization project, which may include software and technology	200,0
eartland Foundation, St. Joseph, MO, to support youth empowerment programs, including the purchase	200,0
of equipment	450,0
istory Colorado, Denver, CO, for support of the Student to Citizen Initiative	100,0
umboldt County School District, Winnemucca, NV, for support of technology-based instruction	150.0
diana State University, Terre Haute, IN, for curriculum development and teacher training	100.0
ner-City Arts, Los Angeles, CA, for the core arts and language project for at-risk youth	300,0
wa Department of Education, Des Moines, IA, to continue the Harkin Grant program	6,000,0
wa State Education Association, Des Moines, IA, for professional development for teachers on 21st	
century skills	300,0
zz at Lincoln Center, New York, NY, for music education programs	400,0
bs for Ohio's Graduates, Inc., Columbus, OH, for dropout prevention programs for at-risk youth	150,0
inior Achievement of Delaware, Inc., Wilmington, DE, for computer-based programming and related	
science, technology, and engineering education activities	50,0
auai Economic Development Board, Lihue, HI, for science, technology, engineering, and math educa-	
tion	700,0
nder County School District, Battle Mountain, NV, for acquisition of technology and equipment	150,0
ncoln County School District, Panaca, NV, for support of afterschool programming	50,0
wer Brule Sioux Tribe, Lower Brule, SD, for support of afterschool programming, which may include	100
the acquisition of equipment	100,0
on County School District, Yerington, NV, for support of early education services	150,0
adison Metropolitan School District, Madison, WI, for educational programming	500,0
arketplace of Ideas/Marketplace for Kids, Inc., Bismarck, ND, for entrepreneurship education	200,0
aryland Bio Foundation, Rockville, MD, for support of science, technology, engineering, and mathe- matics education through a mobile laboratory outreach program, which may include purchase of	
equipment	800,0
aui Economic Development Board, Kihei, HI, for engaging girls and historically underrepresented stu-	000,0
dents in science, technology, engineering, and math education	800,0
entoring Partnership of Southwestern PA, Pittsburgh, PA, for support of mentoring programs, which	000,0
may include equipment and technology acquisitions	100,0
eskwaki Nation, The—Sac & Fox Tribe of the Mississippi in Iowa, Tama, IA, for a culturally based	100,
education curriculum	400,0
id-lowa Community Action, Inc., Marshalltown, IA, for literacy activities for pre-school aged children	100,0
ississippi Band of Choctaw Indians, Choctaw, MS, for academic support, tutoring, mentoring, and	
afterschool programs	100,0
ssissippi Building Blocks, Ridgeland, MS, for a state-wide early childhood education program	500,0
ssissippi Council on Economic Education, Jackson, MS, for teacher training for economics, financial	
literacy and entrepreneurial education	500,
ssissippi Historical Society, Jackson, MS, to develop educational materials for history instruction	100,0
ississippi Museum of Natural Science Foundation, Jackson, MS, for science education exhibits and out-	200
reach programs	200,0
ssissippi State University, Mississippi State, MS, for a dropout prevention program, including the pur- chase of equipment	850,0
ssissippi State University, Mississippi State, MS, for an early childhood teacher education program,	000,
including the purchase of equipment and materials	500,0
ssissippi University for Women, Columbus, MS, for development of at-risk youth programs	250,0
ssissippi University for Women, Columbus, MS, for science and math programs for K-12 students	200,0
ontana Digital Academy, Missoula, MT, for support of online learning activities	100,0
tional Center for Parents as Teachers, St. Louis, MO, to support home visitation programs, including	,
the purchase of equipment	850,
STEM Community Collaborative, Ft. Bragg Region, Research Triangle Park, NC, for science, tech-	
nology, engineering, and math programs, including the purchase of equipment	150,0
evada Department of Education, Carson City, NV, for a demonstration of public school facilities repair	, .
and construction, which may include subgrants	2,000,0
evada Parents Empowering Parents, Las Vegas, NV, to provide educational workshops to parents of	
students with disabilities	125,0
ye County School District, Pahrump, NV, to support instructional/intervention specialists and the pur-	
chase of instructional materials	350,0
akland Unified School District, Oakland, CA, for the Oakland Truancy Intervention and Educational Sup-	
and the second s	300,

	Amount
Operation Shoestring, Jackson, MS, for afterschool and summer community outreach and education pro-	
grams	100,000
Orchestra lowa, Cedar Rapids, IA, to support a music education program	300,000
Pacific Islands Center for Educational Development, Pago Pago, American Samoa, for program develop-	
ment	400,000
Parents for Public Schools of Jackson, Inc., Jackson, MS, for professional development, development of materials, and programs to increase student achievement and graduation rates in low performing schools	250.000
Polynesian Voyaging Society, Honolulu, HI, for educational programs	300.000
Project HOME, Philadelphia, PA, for afterschool programs	100,000
Providence Community Library, Providence, RI, for support of the Out-of-School Learning Opportunities	100,000
program	250.000
Public Education Foundation, Las Vegas, NV, for support of a clearinghouse for classroom supplies and	230,000
materials	100.000
Saint Mary's College, Notre Dame, IN, for tutoring and mentoring programs for at-risk youth	100,000
San Francisco Redevelopment Agency, San Francisco, CA, for a college preparatory program, in partner-	100,000
ship with College Track	250.000
Save the Children, Washington, DC, for a rural literacy program in Mississippi	100,000
Save the Children, Westport, CT, for support of the Louisiana Early Child Development program	200.000
SEED Foundation, Washington, DC, for the SEED School of Louisiana Exploratory project	250.000
Seton Hall University, South Orange, NJ, for an urban school improvement program	350,000
Southeastern Louisiana University, Hammond, LA, to increase the number of certified teachers and sup-	,
port other activities designed to improve student achievement	100,000
Southwest Washington Workforce Development Council, Vancouver, WA, for support of professional devel-	
opment in science and mathematics education	100,00
Syracuse University, Syracuse, NY, for support of afterschool programming	500,000
Technology Assessment for Basic Skills, Inc., Des Moines, IA, for continuation and expansion of the	
SKILLS lowa program	2,000,00
The Tibetan Community of New York and New Jersey, Inc., New York, NY, for the Tibetan Community	
Center Youth Education and Empowerment Program	100,00
Thrive By Five Washington, Seattle, WA, for support of early childhood education programming	300,00
Uintah School District, Vernal, UT, for academic achievement and credit recovery programs, including	
the purchase of equipment	106,00
University of Mississippi, University, MS, for teacher training for elementary mathematics education	300,00
University of Southern Mississippi, Hattiesburg, MS, for teacher training in the science, technology, engi-	
neering, math, language, and creative arts fields	400,00
Utah State Office of Education, Salt Lake City, UT, for teacher development programs	300,00
Utah Symphony, Salt Lake City, UT, for music education programs	106,00
Washoe County School District, Reno, NV, for support of educational activities	500,00
World Science Festival, New York, NY, for science and environmental education and outreach activities	200,000
Young Writers Project, Inc., Winooski, VT, for support educational programming and teaching training	175,000

Teacher Incentive Fund

The Committee recommendation includes \$400,000,000, the same amount as the fiscal year 2010 appropriation, for the Teacher Incentive Fund [TIF] program. The budget proposal supports the program through a broader teacher and leader innovation fund based on the administration's reauthorization proposal.

The goals of TIF are to improve student achievement by increasing teacher and principal effectiveness; reform compensation systems to reward gains in student achievement; increase the number of effective teachers teaching low-income, minority, and disadvantaged students, and students in hard-to-staff subjects; and create sustainable performance-based compensation systems.

The Committee urges the Department to award grants for shortterm planning for the development of performance-based compensation systems as well as for implementation. Recognizing that such systems should be aligned with other educational improvement efforts, in awarding grants the Committee urges the Department to give priority to those applications that demonstrate a link between proposed projects and the instructional strategy or other key reforms undertaken by the relevant schools or LEAs.

Ready-to-Learn Television

The Committee recommendation includes \$29,050,000 for the Ready-to-Learn Television program. The budget request includes no funds for this program. The fiscal year 2010 appropriation is \$27,300,000.

The Ready to Learn program was created by Congress in 1992 to use the power and reach of public television to help prepare children, especially disadvantaged children, to enter and succeed in school. The Elementary and Secondary Education Act requires that all programming and digital content created under Ready to Learn be specifically designed for nationwide distribution over public television stations' digital broadcasting channels and the Internet. The act also requires funds to be made available to public telecommunications entities to ensure that these programs, and related educational materials, are disseminated and distributed to the widest possible audience and are made accessible to all Americans.

The Committee intends for funds to be used in accordance with the Ready to Learn statute and believes recipients of these funds should have a demonstrated track record in educational television production for preschool and/or elementary school students.

Close Up Fellowships

The Committee recommendation includes \$1,942,000, the same as the fiscal year 2010 appropriation, for Close Up Fellowships. The budget request does not include any funds for this purpose.

These funds are provided to the Close Up Foundation of Washington, DC, which offers fellowships to students from low-income families and their teachers to enable them to spend 1 week in Washington attending seminars and meeting with representatives of the three branches of the Federal Government.

Advanced Placement

The Committee recommends \$45,840,000, the same amount as the fiscal year 2010 appropriation, for AP programs. The budget request does not include any funds for this purpose. ______These funds support two programs, the Advanced Placement Test

These funds support two programs, the Advanced Placement Test Fee program and the Advanced Placement Incentive [API] program, the purpose of both of which is to aid State and local efforts to increase access to AP and International Baccalaureate [IB] classes and tests for low-income students. Under the test fee program, the Department makes awards to State educational agencies to enable them to cover part or all of the cost of test fees of low-income students who are enrolled in an AP or IB class and plan to take an AP or IB test. Under the API program, the Department makes 3-year competitive awards to State educational agencies, LEAs, or national nonprofit educational entities to expand access for low-income individuals to AP programs through activities including teacher training, development of pre-Advanced Placement courses, coordination and articulation between grade levels to prepare students for academic achievement in AP or IB courses, books and supplies, and participation in online AP or IB courses. Under statute, the Department must give priority to funding the test fee program. Approximately \$20,000,000 will be needed to fund that program; the remaining funds will support continuations for API grants.

SAFE SCHOOLS AND CITIZENSHIP EDUCATION

Appropriations, 2010	\$403,053,000
Budget estimate, 2011	620,000,000
Committee recommendation	426,053,000

The Committee recommends a total of \$426,053,000 for activities to promote safe schools, healthy students, and citizenship education. The fiscal year 2010 appropriation is \$403,053,000 for such activities. The budget request includes \$620,000,000 for similar purposes.

The President's budget for fiscal year 2011 is based on the administration's proposal to reauthorize the Elementary and Secondary Education Act. While the authorizing committees have taken significant actions to reauthorize the act, legislation has not yet passed the Senate. As a result, programs in this account are based generally on current law, as authorized under the Elementary and Secondary Education Act.

Promise Neighborhoods

The Committee recommends \$20,000,000 for the Promise Neighborhoods program. The budget request includes \$210,000,000 for this purpose. The fiscal year 2010 appropriation is \$10,000,000 for Promise Neighborhoods.

Competitive grants will be awarded to nonprofit, communitybased organizations for the development of comprehensive neighborhood programs designed to combat the effects of poverty and improve educational and life outcomes for children and youth, from birth through college. Each Promise Neighborhood grantee will serve a high-poverty urban neighborhood or rural community.

Two types of awards will be made under this program, 1-year planning grants and implementation grants. Funds for planning grants are used by communities to develop a plan for providing a continuum of services and supports for the children and youth in a particular neighborhood. Implementation grants are awarded to organizations with feasible plans for achieving the goals of the program. Awards from the fiscal year 2010 appropriation have not yet been made and the Committee intends to re-examine the need for additional funds upon reviewing the plans of the winners of the current grant competition.

Successful, Safe, and Healthy Students

The Committee recommends no funds for this program, which is based on the administration's reauthorization proposal. The Committee has allocated funds for related current law programs, as described under the individual headings in this account.

Under this proposed program, the Department would award grants to State educational agencies, title I-eligible LEAs, and their partners for programs designed to improve the school culture and climate; improve students' physical health and well-being; and improve students' mental health and well-being.

Safe and Drug-free National Activities

The Committee recommendation includes \$196,341,000 for the national activities portion of the Safe and Drug-Free Schools and Communities program. The fiscal year 2010 appropriation is \$191,341,000 for this purpose. The budget request proposes to fund related activities within the proposed successful, safe and healthy students program.

The Committee has a particular interest in funding for the coordination and integration of mental health services within these comprehensive approaches. Therefore, the Committee requests that the Department report to the Committees on Appropriations of the Senate and House of Representatives, not later than 30 days after enactment of this act, on how resources available within this account will be used to address this interest.

The Committee recommends no funds for Project SERV (School Emergency Response to Violence), which provides education-related services to LEAs and institutions of higher education in which the learning environment has been disrupted due to a violent or traumatic crisis. Project SERV funds are available until expended. The budget request includes \$5,000,000 for this purpose. No funds were appropriated for Project SERV in fiscal year 2010. The Committee believes that no additional funds are required in fiscal year 2011, given the amount of unobligated funds that have been carried over from previous years.

The Committee recommendation includes \$830,000, the same amount as the fiscal year 2010 appropriation, for a program to identify, and provide recognition of, promising and model alcohol and drug abuse prevention and education programs in higher education. The budget request proposes to fund related activities within its new successful, safe and healthy students program.

The Committee recommendation also includes funds for school emergency preparedness, Safe Schools/Healthy Students, postsecondary education drug and violence prevention, and other activities.

Alcohol Abuse Reduction

The Committee recommends \$32,712,000, the same amount as the fiscal year 2010 appropriation, for grants to LEAs to develop and implement programs to reduce underage drinking in secondary schools. Instead of requesting funds for this program, the budget proposes a successful, safe and healthy students program which could support related activities.

Elementary and Secondary School Counseling

The Committee recommends \$57,000,000 to establish or expand counseling programs in elementary and secondary schools. The fiscal year 2010 funding level is \$55,000,000. As currently authorized, at least \$40,000,000 must be used to support elementary school counseling programs.

Carol M. White Physical Education for Progress Program

The Committee recommendation includes \$80,000,000 to help LEAs and community-based organizations initiate, expand and improve physical education programs for students in grades K-12.

The fiscal year 2010 appropriation is \$79,000,000 for this purpose. The budget request proposes a successful, safe and healthy students program that could support related activities. This funding will help schools and communities improve their structured physical education programs for students and help children develop healthy lifestyles to combat the national epidemic of obesity.

Civic Education

The Committee recommends \$40,000,000 to improve the quality of civics and government education, to foster civic competence and responsibility, and to improve the quality of civic and economic education through exchange programs with emerging democracies. The fiscal year 2010 appropriation is \$35,000,000 for this purpose. The budget request proposes to eliminate this program and instead provide competitive awards for history, civics, and government grants within the Fund for the Improvement of Education.

The Committee recommends \$20,617,000 for the We the People programs, including \$2,957,000 to continue the comprehensive program to improve public knowledge, understanding, and support of American democratic institutions, which is a cooperative project among the Center for Civic Education, the Center on Congress at Indiana University, and the Trust for Representative Democracy at the National Conference of State Legislatures. The bill also includes \$13,383,000 for the Cooperative Education Exchange program.

The Committee bill also recommends \$6,000,000 and necessary bill language for establishing a grant competition and related activities for nonprofit organizations with demonstrated effectiveness for the development and implementation of civic learning programs. National, State, or local nonprofits and educational institutions, individually or in partnership, shall be eligible to receive awards under this competition. The Committee intends for these funds to support programs that address relevant State and national educational standards; provide free or low-cost curriculum; and provide cost-effective models for teacher professional development. The Secretary shall establish a priority for applications that demonstrate innovation, scaleability, program accountability, and a focus on underserved populations, including those in urban and rural areas. The Committee also intends for a portion of the funds to be available for independent research and evaluation to help assess the effects of civic education programs on students' development of the knowledge, skills, and traits of character essential for the preservation and improvement of constitutional democracy. The Committee requests a briefing on how the Department intends to implement this directive not later than 30 days prior to the announcement of the availability of funds for this initiative.

ENGLISH LANGUAGE ACQUISITION

Appropriations, 2010	\$750,000,000
Budget estimate, 2011	800,000,000
Committee recommendation	800,000,000

The Committee recommends an appropriation of \$800,000,000, the same amount as the budget request, for English language acquisition. The fiscal year 2010 appropriation is \$750,000,000 for this program.

The President's budget for fiscal year 2011 is based on the administration's proposal to reauthorize the Elementary and Secondary Education Act. While the authorizing committees have taken significant actions to reauthorize the act, legislation has not yet passed the Senate. As a result, programs in this account are based generally on current law, as authorized under the Elementary and Secondary Education Act.

The Department makes formula grants to States based on each State's share of the Nation's limited-English-proficient and recent immigrant student population. The program is designed to increase the capacity of States and school districts to address the needs of these students. The Committee includes bill language requiring that 6.5 percent of the appropriation be used to support national activities, which include professional development activities designed to increase the number of highly qualified teachers serving limited English proficient students; a National Clearinghouse for English Language Acquisition and Language Instructional Programs; and evaluation activities. National activities funds shall be available for 2 years.

The Committee bill includes language that allows the Secretary to use the annual 3-year estimates provided by the Census Bureau in order to determine the State allocations. The fiscal year 2010 appropriations language requires the Secretary to use a 3-year average of the most recent data available from the American Community Survey for calculating allocations to all States under the English Language Acquisition State Grants program. Under the authorizing statute, the Department would use 1-year estimates, which are not as reliable and produce more volatility in the allocations from year to year. The Committee directs the Department to consult with the authorizing and appropriations committees of the Senate and House of Representatives prior to any announcement of allocations made for this program from the 2011 appropriation.

SPECIAL EDUCATION

Appropriations, 2010	\$12,587,035,000
Budget estimate, 2011	12,846,190,000
Committee recommendation	13,035,490,000

The Committee recommends \$13,035,490,000 for special education programs authorized by the Individuals with Disabilities Education Act [IDEA] and the Special Olympics Sport and Empowerment Act of 2004. The fiscal year 2010 funding level is \$12,587,035,000. The budget request includes \$12,846,190,000 for such programs and proposed legislation.

Grants to States

The Committee recommends \$11,925,211,000 for special education grants to States, as authorized under section 611 of part B of the IDEA. The budget request proposes \$11,755,211,000 under this authority. The fiscal year 2010 level is \$11,505,211,000 for this program.

This program provides formula grants to assist States, outlying areas, and other entities in meeting the costs of providing special education and related services for children with disabilities. States pass along most of these funds to local educational agencies, but may reserve some for program monitoring, enforcement, technical assistance, and other activities.

The appropriation for this program primarily supports activities associated with the 2011–2012 academic year. Of the funds available for this program, \$3,332,828,000 will become available on July 1, 2011, and \$8,592,383,000 will become available on October 1, 2011. These funds will remain available for obligation until September 30, 2012.

The budget request proposes language capping the Department of the Interior set-aside at the prior year level, adjusted by the lower of the increase in inflation or the change in the appropriation for grants to States. This provision also would prevent a decrease in the amount to be transferred in case the funding for this program decreases or does not change. The Committee bill includes the requested language.

Preschool Grants

The Committee recommends \$374,099,000, the same amount as the budget request and fiscal year 2010 level, for preschool grants. The preschool grants program provides formula grants to States to assist them in making available special education and related services for children with disabilities aged 3 through 5. States distribute the bulk of the funds to local educational agencies. States must serve all eligible children with disabilities aged 3 through 5 and have an approved application under the IDEA.

Grants for Infants and Families

The Committee recommends \$459,427,000 for the grants for infants and families program under part C of the IDEA. The fiscal year 2010 funding level and the budget request are \$439,427,000 for this program. Part C of the IDEA authorizes formula grants to States, outlying areas and other entities to implement statewide systems of coordinated, comprehensive, multidisciplinary interagency programs to make available early intervention services to all children with disabilities, ages 2 and under, and their families.

State Personnel Development

The Committee recommends \$49,223,000 for the State personnel development program. The fiscal year 2010 funding level and the budget request are \$48,000,000 for this purpose. This program focuses on the professional development needs in States by requiring that 90 percent of funds be used for professional development activities. The program supports grants to State educational agencies to help them reform and improve their personnel preparation and professional development related to early intervention, educational and transition services that improve outcomes for students with disabilities.

Technical Assistance and Dissemination

The Committee recommends \$49,549,000, the same amount as the fiscal year 2010 funding level and the budget request, for technical assistance and dissemination. This program supports awards for technical assistance, model demonstration projects, the dissemination of useful information and other activities. Funding supports activities that are designed to improve the services provided under IDEA.

The Committee continues to support activities that address the need for high-quality, evidence-based technical assistance activities that improve the services to and outcomes for students with disabilities.

Personnel Preparation

The Committee recommends \$90,653,000, the same amount as the fiscal year 2010 funding level and the budget request, for the personnel preparation program. Funds support competitive awards to help address State-identified needs for personnel who are qualified to work with children with disabilities, including special education teachers and related services personnel. The program has requirements to fund several other broad areas including training for leadership personnel and personnel who work with children with low incidence disabilities, and providing enhanced support for beginning special educators.

Parent Information Centers

The Committee recommends \$30,028,000 for parent information centers. The comparable fiscal year 2010 funding level and the budget request are \$28,028,000 for the centers. This program makes awards to parent organizations to support parent training and information centers, including community parent resource centers. These centers provide training and information to meet the needs of parents of children with disabilities living in the areas served by the centers, particularly underserved parents, and parents of children who may be inappropriately identified.

The Committee believes that the additional funds should be used to support the work of all centers, balanced by the importance of targeting additional resources to centers that are serving areas with growing populations. The Committee further believes that there should be more transparency with regard to the allocation formula being used to allocate these funds and requests the annual congressional budget justification include a description of the Department's methodology for allocating funds available for this program.

Technology and Media Services

The Committee recommends \$47,300,000 for technology and media services. The comparable fiscal year 2010 funding level is \$43,973,000 for this purpose, while the budget request proposes \$41,223,000 for authorized activities. This program makes competitive awards to support the development, demonstration, and use of technology, and educational media activities of value to children with disabilities.

The Committee recommendation includes \$13,250,000 for Recording for the Blind and Dyslexic, Inc. These funds support the continued development, production, and circulation of accessible educational materials. The Committee recommendation also includes \$737,000 for the Reading Rockets program, administered by the Greater Washington Education Television Association.

Mentoring for Individuals With Intellectual Disabilities

The Committee recommendation defers action on the request for \$10,000,000 to support this proposed program. The budget proposes support for grants or contracts to expand the Best Buddies organization, as well as support activities to increase the participation of people with intellectual disabilities in social relationships and other aspects of community life, including education and employment. Legislation is pending in Congress that would authorize similar activities.

Special Olympics

The Committee recommendation includes \$10,000,000, the same amount as the budget request, for Special Olympics education activities. The fiscal year 2010 funding level is \$8,095,000 for authorized activities. Under the Special Olympics Sport and Empowerment Act of 2004, the Secretary is authorized to provide financial assistance to Special Olympics for activities that promote the expansion of Special Olympics and for the design and implementation of education activities that can be integrated into classroom instruction and are consistent with academic content standards.

The Committee bill continues to allow funds to be used to support Special Olympics National and World Games, authorized in the fiscal year 2010 appropriations act and proposed in the budget request.

REHABILITATION SERVICES AND DISABILITY RESEARCH

Appropriations, 2010	\$3,506,861,000
Budget estimate, 2011	3,565,326,000
Committee recommendation	3,542,510,000

The Committee recommends \$3,542,510,000 for rehabilitation services and disability research. The fiscal year 2010 funding level is \$3,506,861,000. The budget request includes \$3,565,326,000 for programs in this account.

Vocational Rehabilitation State Grants

The Committee recommends \$3,084,696,000, the same as the comparable fiscal year 2010 level, for vocational rehabilitation grants to States. The Committee recommends the full amount authorized by the Rehabilitation Act of 1973 for this mandatory funding stream. The fiscal year 2011 budget request is \$3,141,529,000 and assumes several program consolidations and eliminations as part of a proposal to reauthorize the Workforce Investment Act [WIA]. Since Congress has not yet acted on a WIA reauthorization, the Committee recommendation follows current law.

Basic State grant funds assist States in providing a range of services to help persons with physical and mental disabilities prepare for and engage in meaningful employment. Authorizing legislation requires States to give priority to persons with the most significant disabilities. Funds are allotted to States based on a formula that takes into account population and per capita income. States must provide a 21.3 percent match of Federal funds with the exception of construction costs for the development of a facility for community rehabilitation programs, for which States must provide a 50 percent match.

The Rehabilitation Act requires that not less than 1 percent and not more than 1.5 percent of the appropriation in fiscal year 2011 for vocational rehabilitation State grants be set aside for grants for Indians. Service grants are awarded to Indian tribes on a competitive basis to help tribes develop the capacity to provide vocational rehabilitation services to American Indians with disabilities living on or near reservations.

Workforce Innovation Funds

The Committee provides \$27,000,000 to create a workforce innovation fund. The budget request provides \$30,000,000 for this initiative. This program will test innovative strategies or replicate proven practices that support systemic reform of the workforce investment system and substantially improve employment and education outcomes for people with disabilities.

To support alignment at the Federal level, the Committee expects the Secretary to make such awards in cooperation with the Secretary of Labor. Priority should be given to applicants that demonstrate significant alignment across education, workforce development, and supportive services at the State, regional, or local level, and that support economic development goals and improved employment and education outcomes for participants with disabilities, including those with the most significant disabilities. Awards should prioritize applicants that demonstrate comprehensive strategic planning and coordination at the State, regional, or local level and continuation of promising practices and infrastructure developed through disability program navigator programs. The Committee not less than 30 days prior to the release of a solicitation of grant applications for this program.

Client Assistance State Grants

The Committee recommends \$14,288,000 for the client assistance State grants program. The comparable fiscal year 2010 funding amount and the budget request are \$12,288,000.

The client assistance program funds State formula grants to assist vocational rehabilitation clients or client applicants in understanding the benefits available to them and in their relationships with service providers. Funds are distributed to States according to a population-based formula, except that increases in minimum grants are guaranteed to each of the 50 States, the District of Columbia, and Puerto Rico, and guaranteed to each of the outlying areas, by a percentage not to exceed the percentage increase in the appropriation. States must operate client assistance programs in order to receive vocational rehabilitation State grant funds.

Training

The Committee recommends \$37,766,000, the same as the comparable fiscal year 2010 level, for training rehabilitation personnel. The budget request provides \$33,251,000. The purpose of this program is to ensure that skilled personnel are available to serve the rehabilitation needs of individuals with disabilities. It supports training, traineeships, and related activities designed to increase the numbers of qualified personnel providing rehabilitation services. The program awards grants and contracts to States and public or nonprofit agencies and organizations, including institutions of higher education, to pay all or part of the cost of conducting training programs. Long-term, in-service, shortterm, experimental and innovative, and continuing education programs are funded, as well as special training programs and programs to train interpreters for persons who are deaf, hard of hearing, and deaf-blind.

Demonstration and Training Programs

The Committee recommends \$13,151,000 for this program. The comparable fiscal year 2010 funding level is \$11,601,000. The budget request eliminates funding for this program as part of the administration's proposed program consolidations.

This program awards grants to States and nonprofit agencies and organizations to develop innovative methods and comprehensive services to help individuals with disabilities achieve satisfactory vocational outcomes. Demonstration programs support projects for individuals with a wide array of disabilities.

The Committee recommends continued support for parent training and information centers. The Committee expects the Rehabilitation Services Administration to coordinate with the Office of Special Education Programs in carrying out this activity.

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

Amount

	Amount
American Academy of Orthotists and Prosthetists, Washington, DC, to improve the quality of applied orthotic and prosthetic research and to help meet the demand for provider services	\$500,000
ARC of Madison County, Huntsville, AL, for a disability program initiative, which may include equipment Holy Angels Residential Facility, Caddo Parish, LA, for vocational training for developmental disabled indi-	100,000
viduals	100,000
Spurwink Services, Portland, ME, for education programs for students with autism	400,000
remote areas	400,000
Utah State Office of Rehabilitation, Salt Lake City, UT, for assistive technology equipment	150,000

Migrant and Seasonal Farmworkers

The Committee recommends \$2,239,000, the same as the comparable fiscal year 2010 amount, for migrant and seasonal farmworkers. The budget request proposes consolidation of this program into the State Grants program.

This program provides grants for comprehensive rehabilitation services to migrant and seasonal farm workers with disabilities and their families. The size of the grants is limited to 90 percent of the costs of the projects. Projects also develop innovative methods for reaching and serving this population. The program emphasizes outreach, specialized bilingual rehabilitation counseling, and coordination of vocational rehabilitation services with services from other sources.

Recreational Programs

The Committee provides \$2,474,000 for recreational programs. This amount is the same as the comparable fiscal year 2010 funding level and the budget request.

Recreational programs help finance activities such as sports, music, dancing, handicrafts, and art to aid in the employment, mobility, and socialization of individuals with disabilities. Grants are awarded to States, public agencies, and nonprofit private organizations, including institutions of higher education. Grants are awarded for a 3-year period, with the Federal share at 100 percent for the first year, 75 percent for the second year, and 50 percent for the third year. Programs must maintain the same level of services over the 3-year period.

Protection and Advocacy of Individual Rights

The Committee recommends \$19,101,000 for protection and advocacy of individual rights. The comparable fiscal year 2010 funding level and the budget request provide \$18,101,000 for this purpose.

This program provides grants to agencies to protect and advocate for the legal and human rights of persons with disabilities who are not eligible for protection and advocacy services available through the Developmental Disabilities Assistance and Bill of Rights Act or the Protection and Advocacy for Individuals with Mental Illness Act.

Projects With Industry

The Committee recommends \$19,197,000, the same as the comparable fiscal year 2010 amount, for projects with industry. The budget request does not include funding for this program.

The projects with industry [PWI] program promotes greater participation of business and industry in the rehabilitation process. It provides training and experience in realistic work settings to prepare individuals with disabilities for employment in the competitive job market. Post-employment support services are also provided. The program supports grants to a variety of agencies and organizations, including corporations, community rehabilitation programs, labor and trade associations, and foundations.

Supported Employment State Grants

The Committee recommends \$29,181,000, the same as the comparable fiscal year 2010 amount, for the supported employment State grant program. The budget request does not include funding for this program.

This program assists the most severely disabled individuals by providing the ongoing support needed to obtain competitive employment. Short-term vocational rehabilitation services are augmented with extended services provided by State and local organizations. Federal funds are distributed on the basis of population.

Supported Employment Extended Services for Youth

The budget request includes \$25,000,000 for this new program as part of its proposed WIA reauthorization. The Committee does not include any funds for this program which the administration proposes as part of their plans for reauthorizing the Rehabilitation Act.

Grants for Independent Living

The budget request includes \$110,000,000 for this new program as part of its proposed WIA reauthorization. The Committee does not include any funds for this program which the administration proposes as part of their plans for reauthorizing the Rehabilitation Act.

Independent Living State Grants

The Committee recommends \$23,450,000, the same as the comparable fiscal year 2010 amount, for independent living State grants. The budget request does not include funding for this program.

The independent living State formula grants program provides funding to improve independent living services, support the operation of centers for independent living, conduct studies and analysis, and provide training and outreach.

Independent Living Centers

The Committee recommends \$83,656,000 for independent living centers. The comparable fiscal year 2010 amount is \$80,266,000. The budget request does not include funding for this program.

These funds support consumer-controlled, cross-disability, nonresidential, community-based centers that are designed and operated within local communities by individuals with disabilities. These centers provide an array of independent living services.

Independent Living Services for Older Blind Individuals

The Committee provides \$34,151,000 for independent living services to other blind individuals. This is the same level as the comparable fiscal year 2010 amount and budget request.

Through this program, assistance is provided to persons aged 55 or older to adjust to their blindness, continue living independently and avoid societal costs associated with dependent care. Services may include the provision of eyeglasses and other visual aids, mobility training, Braille instruction and other communication services, community integration, and information and referral. These services help older individuals age with dignity, continue to live independently, and avoid significant societal costs associated with dependent care. The services most commonly provided by this program are daily living skills training, counseling, the provision of low-vision devices, community integration, information and referral, communication devices, and low-vision screening.

Program Improvement Activities

The Committee concurs in the budget request to eliminate funding for this program. The comparable fiscal year 2010 funding level is \$852,000. These activities are designed to improve the operation of the Vocational Rehabilitation State Grants program and the provision of services to individuals with disabilities. Funds are awarded through grants and contracts to provide technical assistance and support activities that increase program effectiveness and improve accountability.

Evaluation

The Committee concurs in the budget request to eliminate funding for this program. The comparable fiscal year 2010 funding level is \$1,217,000. Funds for this program are used to evaluate the impact and efficacy of programs authorized under the Rehabilitation Act of 1973.

Helen Keller National Center

The Committee recommends \$9,181,000 for the Helen Keller National Center for Deaf-Blind Youth and Adults. This is the same amount as the comparable fiscal year 2010 funding level and the budget request.

The Helen Keller National Center consists of a national headquarters in Sands Point, New York, with a residential training and rehabilitation facility where deaf-blind persons receive intensive specialized services; a network of 10 regional field offices that provide referral and counseling assistance to deaf-blind persons; and an affiliate network of agencies. The center serves approximately 120 persons with deaf-blindness at its headquarters facility and provides field services to approximately 2,000 individuals and families and 1,000 organizations.

National Institute on Disability and Rehabilitation Research

The Committee recommends \$111,919,000, the same as the budget request, for the National Institute on Disability and Rehabilitation Research [NIDRR]. The comparable fiscal year 2010 funding level is \$109,241,000.

NIDRR develops and implements a comprehensive and coordinated approach to the conduct of research, demonstration projects, and related activities that enable persons with disabilities to better function at work and in the community, including the training of persons who provide rehabilitation services or conduct rehabilitation research. The Institute awards competitive grants to support research in federally designated priority areas, including rehabilitation research and training centers, rehabilitation engineering research centers, research and demonstration projects, and dissemination and utilization projects. NIDRR also supports field-initiated research projects, research training, and fellowships.

The Committee strongly supports the mission of NIDRR, which includes research in the interrelated domains of health and function, employment, and participation and community living. NIDRR's resources should focus on each of these statutory research priorities to ensure the advancement of economic and social selfsufficiency and full community inclusion and participation. Future Rehabilitation Research Training Centers' priorities should advance knowledge of effective strategies to reduce the impact of poverty, promote affordable housing and independent living with improved access to long-term supports, and facilitate greater individual choice and control of individualized plans under the Rehabilitation and Social Security Laws.

The Committee believes the Interagency Committee on Disability Research, currently led by NIDRR, needs to more effectively carry out its mission, including coordinating research and assessing research gaps as well as meeting required reporting requirements in a timely manner. Therefore, the Committee urges the administration, through the Interagency Committee on Disability Research [ICDR], to facilitate the development and implementation of a comprehensive Government-wide long-term strategic plan for disability and rehabilitation research by the spring of 2011. The strategic plan should reflect the active involvement of disability senior policy advisors, program directors and other staff from NIDRR and the Department of Health and Human Services, in partnership with stakeholders conducting disability and rehabilitation research. The plan should be submitted to the Committee by April 1, 2011. The Committee further requests that the annual report prepared by ICDR should include an accounting of the progress made in implementing the long-term strategic plan.

The Committee notes that the Americans with Disabilities Act Amendments Act of 2008 and related regulations will require sustained training and technical resources from the disability and business technical assistance center program. The Committee believes the additional funds it provides will help meet the information and training needs related to the legislation.

Assistive Technology

The Committee recommends \$30,960,000 for assistive technology. This amount is the same as the comparable fiscal year 2010 funding level and the budget request.

The Assistive Technology program is designed to improve occupational and educational opportunities and the quality of life for people of all ages with disabilities through increased access to assistive technology services and devices. The program supports various activities that help States develop comprehensive, consumer-responsive statewide programs that increase access to, and the availability of, assistive technology devices and services.

The Committee recommendation includes \$25,660,000 for State grant activities authorized under section 4 the Rehabilitation Act of 1973, \$4,300,000 for protection and advocacy systems authorized by section 5, and \$1,000,000 for technical assistance activities authorized under section 6.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

AMERICAN PRINTING HOUSE FOR THE BLIND

Appropriations, 2010	\$24,600,000
Budget estimate, 2011	24,600,000
Committee recommendation	$24,\!600,\!000$

The Committee recommends \$24,600,000 to help support the American Printing House for the Blind [APH]. This amount is the same as the comparable fiscal year 2010 funding level and the budget request.

The APH provides educational materials to students who are legally blind and enrolled in programs below the college level. The Federal subsidy provides approximately 70 percent of APH's total sales income. Materials are distributed free of charge to schools and States through per capita allotments based on the total number of students who are blind. Materials provided include textbooks and other educational aids in braille, large type, and recorded form and computer applications. Appropriated funds may be used for staff salaries and expenses, as well as equipment purchases and other acquisitions consistent with the purpose of the Act to Promote the Education of the Blind.

In addition to its ongoing activities, the Individuals with Disabilities Education Improvement Act assigned to the APH the responsibility of establishing and maintaining a National Instructional Materials Access Center.

NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

Appropriations, 2010	\$68,437,000
Budget estimate, 2011	64,677,000
Committee recommendation	64,677,000

The Committee recommends \$64,677,000, the same as the budget request, for the National Technical Institute for the Deaf [NTID]. The comparable fiscal year 2010 funding level is \$68,437,000. Within the Committee recommendation, \$1,640,000 is available for improvements to the campus infrastructure of the NTID.

The Institute, located on the campus of the Rochester Institute of Technology in Rochester, New York, was created by Congress in 1965 to provide a residential facility for postsecondary technical training and education for persons who are deaf. The NTID also provides support services for students who are deaf, trains professionals in the field of deafness, and conducts applied research. At the discretion of the Institute, funds may be used for the Endowment Grant program.

GALLAUDET UNIVERSITY

Appropriations, 2010	\$123,000,000
Budget estimate, 2011	118,000,000
Committee recommendation	128,000,000

The Committee recommends \$128,000,000 for Gallaudet University. The comparable fiscal year 2010 funding level is \$123,000,000 and the budget request includes \$118,000,000 for the university.

Gallaudet University is a private, nonprofit institution offering undergraduate and continuing education programs for students who are deaf, as well as graduate programs in fields related to deafness for students who are hearing and deaf. The university conducts basic and applied research related to hearing impairments and provides public service programs for the deaf community.

The Model Secondary School for the Deaf serves as a laboratory for educational experimentation and development, disseminates curricula, materials, and models of instruction for students who are deaf, and prepares adolescents who are deaf for postsecondary academic or vocational education or the workplace. The Kendall Demonstration Elementary School develops and provides instruction for children from infancy through age 15. The Committee bill includes \$10,000,000 for construction-related activities at Gallaudet University. The administration did not request funds for this purpose.

CAREER, TECHNICAL, AND ADULT EDUCATION

Appropriations, 2010	\$2,016,447,000
Budget estimate, 2011	1,942,707,000
Committee recommendation	1,942,541,000

The Committee recommends a total of \$1,942,541,000 for career, technical, and adult education. The comparable funding level in fiscal year 2010 is \$2,016,447,000 and the budget request provides \$1,942,707,000 for this program. The recommendation consists of \$1,271,694,000 for career and technical education, \$653,661,000 for adult education and \$17,186,000 for other activities.

Career and Technical Education

The Committee recommends \$1,271,694,000, the same as the comparable fiscal year 2010 level, for career and technical education. The fiscal year 2011 request provides \$1,271,860,000.

State Grants.—The Committee recommends \$1,160,911,000, the same as the comparable fiscal year 2010 level, for Career and Technical Education [CTE] State grants. The fiscal year 2011 request level is \$1,264,000,000 and includes a consolidation of funding for the Tech Prep State Grants program into CTE State Grants. The Committee recommendation is based on current law.

Funds provided under the State grant program assist States, localities, and outlying areas expand and improve their programs of career and technical education and provide equal access to career and technical education for populations with special needs. Persons assisted range from secondary students in prevocational courses through adults who need retraining to adapt to changing technological and labor market conditions. Funds are distributed according to a formula based on State population and State per capita income, with special provisions for small States and a fiscal year 1998 base guarantee.

Under the Indian and Hawaiian Natives programs, competitive grants are awarded to federally recognized Indian tribes or tribal organizations and to organizations primarily serving and representing Hawaiian Natives for services that are additional to services received by these groups under other provisions of the Perkins Act.

Of the funds available for this program, \$369,911,000 will become available on July 1, 2011, and \$791,000,000 will become available on October 1, 2011. These funds will remain available for obligation until September 30, 2012.

Tech-prep Education State Grants.—The Committee recommends \$102,923,000, the same as the comparable fiscal year 2010 level, for this program. The fiscal year 2011 request consolidates funding for this program into CTE State Grants. This program is designed to link academic and career and technical education and to provide a structural link between secondary schools and postsecondary education institutions. Funds are distributed to the States through the same formula as the State grant program. States then make planning and demonstration grants to consortia of local educational agencies and postsecondary institutions to develop and operate model 4-year programs that begin in high school and provide students with the mathematical, science, communication, and technological skills needed to earn a 2-year associate degree or 2-year certificate in a given occupational field.

National Programs.—The Committee recommends \$7,860,000 for national research programs and other national activities. This is the same amount as the comparable fiscal year 2010 funding level and the budget request.

Funds will be used to support the national research center on career and technical education, as well as activities designed to improve the quality of performance data States collect and report to the Department.

Adult Education

The Committee recommends \$653,661,000, the same as the request, for adult education. The comparable fiscal year 2010 funding level is \$639,567,000.

Adult Education State Programs.—For adult education State programs, the Committee recommends \$612,315,000, the same as the requested level. The comparable fiscal year 2010 funding level is \$628,221,000. These funds are used by States for programs to enable adults to acquire basic literacy skills, to enable those who so desire to complete a secondary education, and to make available to adults the means to become more employable, productive, and responsible citizens.

The fiscal year 2010 appropriation for this program included \$45,906,000 to distribute to States that did not receive their full allocations in fiscal years 2003 through 2008 due to an administrative error. Not counting that amount, the Committee recommendation is \$30,000,000 above the base fiscal year 2010 level.

The Committee recommendation continues the English literacy and civics education State grants set-aside within the adult education State grants appropriation. Within the total, \$75,000,000 is available to help States or localities affected significantly by immigration and large limited-English populations to implement programs that help immigrants acquire English literacy skills, gain knowledge about the rights and responsibilities of citizenship, and develop skills that will enable them to navigate key institutions of American life. This set-aside was proposed in the budget request.

National Leadership Activities.—The Committee recommends \$41,346,000, the same amount as the budget request, for national leadership activities. The comparable funding level for fiscal year 2010 is \$11,346,000.

As requested by the administration, the Committee recommends designating a portion of the appropriations for adult education to create a workforce innovation fund to make competitive awards for workforce innovation activities under the program's national leadership activities authority. These activities are intended to test innovative strategies or replicate proven practices including strategies or practices that support systemic reform of the workforce investment system to substantially improve education and employment outcomes for participants. The Committee recommendation includes bill language designating \$30,000,000, the same as the request level, for this new fund.

To support alignment at the Federal level, the Committee expects the Secretary to make such awards in cooperation with the Secretary of Labor. Priority should be given to applicants that demonstrate significant alignment across education, workforce development, and supportive services at the State, regional, or local level, and that support economic development goals and improved education and employment outcomes for participants. Awards should also prioritize applicants that demonstrate comprehensive strategic planning and coordination at the State, regional, or local level. The Committee directs that the Department provide a briefing to the Committee not less than 30 days prior to the release of a solicitation of grant applications for this program.

Under national leadership activities, the Department supports applied research, development, dissemination, evaluation, and program improvement activities to assist States in their efforts to improve the quality of adult education programs. The Committee strongly encourages the Department to identify and disseminate successful strategies and best practices that will assist communitybased organizations that utilize adult literacy volunteers to support the Department's career pathways initiatives. This further encourages the Department to implement strategies to increase participation by community-based organizations that utilize trained volunteers in State and national training and technical assistance programs. The Committee requests a report on the success of those strategies by April 1, 2012.

Smaller Learning Communities

The Committee concurs in the budget request to eliminate funding for this program. The administration proposed consolidating Smaller Learning Communities and four other programs into a new Expanding Educational Options program as part of its plan to reauthorize the ESEA. The comparable fiscal year 2010 level is \$88,000,000.

This program supports planning and implementation grants for redesigning large high schools into smaller learning communities. The Committee recognizes the need to invest in and reform secondary schools, particularly the lowest-performing high schools in the Nation. That's why the Committee bill includes a doubling, to \$100,000,000, of the funding for the high school graduation initiative and requires that 40 percent of the \$625,000,000 available for school improvement grants be used to help turn around low-performing high schools and their feeder middle schools.

State Grants for Workplace and Community Transition Training for Incarcerated Individuals

The Committee recommends \$17,186,000 for education and training for incarcerated individuals. This amount is the same as the comparable fiscal year 2010 amount and the budget request. This program provides grants to State correctional education agencies to assist and encourage incarcerated individuals to acquire functional literacy, life and job skills through the pursuit of a postsecondary education certificate or an associate of arts or bachelor's degree. Grants also assist State correctional education agencies in providing employment counseling and other related services that start during incarceration and continue through prerelease and while on parole. Under current law, each student is eligible for a grant of not more than \$3,000 annually for tuition, books, and essential materials, and not more than \$300 annually for related services such as career development, substance abuse counseling, parenting skills training, and health education. In order to participate in a program, an incarcerated individual must be no more than 35 years of age and eligible to be released or paroled from prison within 7 years. An individual may receive support for a period not to exceed 7 years, of which 2 years may be devoted to study in remedial or graduate education.

STUDENT FINANCIAL ASSISTANCE

Appropriations, 2010	\$19,296,809,000
Budget estimate, 2011	19,389,957,000
Committee recommendation	19,453,809,000

The Committee recommends an appropriation of \$19,453,809,000 for programs under the student financial assistance account. The fiscal year 2010 comparable amount is \$19,296,809,000. The budget request provides \$19,389,957,000 for this purpose, but most of these funds were part of the administration's proposal to make Pell Grants a mandatory program. Congress, through the Health Care and Education Reconciliation Act of 2010, continued the mix of discretionary and mandatory funding that existed prior to the enactment of that legislation.

Federal Pell Grant Program

For Pell Grant awards in the 2011–2012 academic year, the Committee recommends \$17,652,000,000 to fund the maximum discretionary Pell Grant award level of \$4,860. This is the same discretionary award level as fiscal year 2010. Additional mandatory funding provided in the Health Care and Education Reconciliation Act of 2010 would support a total maximum award of \$5,550, the same level as the current academic year. The President's budget proposal for a mandatory Pell Grant program supports a maximum award level of \$5,710.

Pell Grants provide need-based financial assistance that helps low- and middle-income undergraduate students and their families defray a portion of the costs of postsecondary education and vocational training. Awards are determined according to a statutory need analysis formula that takes into account a student's family income and assets, household size, and the number of family members, excluding parents, attending postsecondary institutions. Pell Grants are considered the foundation of Federal postsecondary student aid.

This fiscal year 2011 appropriation for the Pell Grant program, combined with resources in other legislation being considered in Congress, will fully support the discretionary base resources needed for this important program. Accordingly, the bill includes language specifying that new budget authority scored against this act will equal the \$17,652,000,000 appropriation provided by the Committee.

Federal Supplemental Educational Opportunity Grants

The Committee recommends \$757,465,000 for Federal supplemental educational opportunity grants [SEOG]. This is the same amount as the fiscal year 2010 level and the budget request. This program provides funds to postsecondary institutions for needbased grants to undergraduate students. Institutions must contribute 25 percent toward SEOG awards, which are subject to a maximum grant level of \$4,000. School financial aid officers have flexibility to determine student awards, though they must give priority to Pell Grant recipients with exceptional need.

Federal Work-study Programs

The Committee bill provides \$980,492,000 for the Federal workstudy program. This is the same amount as the comparable fiscal year 2010 level and the budget request.

This program provides grants to about 3,400 institutions to help an estimated 770,000 undergraduate, graduate, and professional students meet the costs of postsecondary education through parttime employment. Work-study jobs must pay at least the Federal minimum wage and institutions must provide at least 25 percent of student earnings. Institutions also must use at least 7 percent of their grants for community service jobs.

The Committee expects the Department to provide the same funding from the Federal Work-Study Program appropriation in fiscal year 2011 as in the prior year for the Work Colleges program authorized under section 448 of the Higher Education Act.

Federal Perkins Loans

The Federal Perkins loan program supports student loan revolving funds built up with capital contributions to nearly 1,700 participating institutions. Institutions use these revolving funds, which also include Federal capital contributions [FCC], institutional contributions equal to one-third of the FCC, and student repayments, to provide low-interest (5 percent) loans that help financially needy students pay the costs of post-secondary education.

The Committee recommends no funds for the Perkins Loans program, as is the case in fiscal year 2010. The administration has proposed to restructure the Perkins Loan program as a mandatory credit program, with nearly \$6,000,000,000 a year in new loan volum—six times the current Perkins volume. Congress has not acted on that proposal.

Leveraging Educational Assistance Partnership Program [LEAP]

For the LEAP program, the Committee recommends \$63,852,000, the same amount as the comparable fiscal year 2010 level. The administration proposes eliminating this program. The LEAP program provides a Federal match to States as an incentive for providing need-based grant and work-study assistance to eligible post-secondary students.

STUDENT AID ADMINISTRATION

Appropriations, 2010	\$870,402,000
Budget estimate, 2011	1,170,231,000
Committee recommendation	1,048,078,000

The Committee recommends \$1,048,078,000 for the Student Aid Administration account. The comparable fiscal year 2010 level is \$870,402,000. The budget request includes \$1,170,231,000. These funds are available until expended.

Funds appropriated for the Student Aid Administration account will support the Department's student aid management expenses. The Office of Federal Student Aid and Office of Postsecondary Education have primary responsibility for administering Federal student financial assistance programs. The Health Care and Education Reconciliation Act of 2010 termi-

The Health Care and Education Reconciliation Act of 2010 terminates the authority under the Higher Education Act of 1965 to make loans under the Federal Family Education Loan Program as of June 2010. Beginning July 1, 2010, 100 percent of student loans will be made through the William D. Ford Direct Loan [DL] Program. DL program loans will be serviced by private for-profit and not-for-profit servicers under contract with the Department.

The Committee recommendation includes \$661,852,000 for administrative costs and \$386,226,000 for loan servicing activities. The Committee recommendation for these two activities represents a \$177,676,000 increase over the fiscal year 2010 level. The Committee recommendation reflects the increased application, origination, and servicing costs associated with the legislative changes. These increases are necessary to manage the higher loan volume, ensure the operational integrity of Federal Student Aid systems and provide high-quality service to student and parent borrowers. The budget request provides \$673,404,000 for administrative costs and \$496,827,000 for servicing. The Committee is able to recommend a lower level of funding than the request due in part to funds made available through the Student Aid and Fiscal Responsibility Act for administrative costs of servicing contracts with notfor-profit loan servicers.

HIGHER EDUCATION

Appropriations, 2010	2,255,665,000
Budget estimate, 2011	2,094,825,000
Committee recommendation	2,243,895,000

The Committee recommends an appropriation of \$2,243,895,000 for higher education programs. The fiscal year 2010 level is \$2,255,665,000 and the fiscal year 2011 requested level is \$2,094,825,000 for programs in this account.

Aid for Institutional Development

The Committee recommends \$616,336,000 for Aid for Institutional Development. The comparable fiscal year 2010 level is \$603,194,000 and the fiscal year 2011 requested level is \$632,827,000.

Strengthening Institutions.—The Committee bill recommends \$88,200,000, the same as the budget request, for this program. The comparable fiscal year 2010 funding level is \$84,000,000. The part A program supports competitive, 1-year planning and 5-year development grants for institutions with a significant percentage of financially needy students and low educational and general expenditures per student in comparison with similar institutions. Applicants may use part A funds to develop faculty, strengthen academic programs, improve institutional management, and expand student services. Institutions awarded funding under this program are not eligible to receive grants under other sections of parts A or B.

Hispanic-serving Institutions.—The Committee recommends \$123,300,000, the same as the request level, for competitive grants to institutions at which Hispanic students make up at least 25 percent of enrollment. The comparable fiscal year 2010 funding level is \$117,429,000. Institutions applying for title V funds must meet the regular part A requirements. Funds may be used for acquisition, rental or lease of scientific or laboratory equipment, renovation of instructional facilities, development of faculty, support for academic programs, institutional management, and purchase of educational materials. Title V recipients are not eligible for other awards provided under title III, parts A and B.

Strengthening Historically Black Colleges and Universities [HBCUs].—The Committee recommends \$266,586,000, the same as the comparable fiscal year 2010 level, for the part B strengthening HBCUs program. The budget request is \$279,915,000 for part B grants. The program makes formula grants to HBCUs that may be used to purchase equipment, construct and renovate facilities, develop faculty, support academic programs, strengthen institutional management, enhance fundraising activities, provide tutoring and counseling services to students, and conduct outreach to elementary and secondary school students. The minimum allotment is \$500,000 for each eligible institution. Part B recipients are not eligible for awards under part A. In addition to the Committee-recommended level, this program received \$85,000,000 of mandatory funding in each fiscal year from 2010 to 2019 through the Student Aid and Fiscal Responsibility Act [SAFRA]. Strengthening Historically Black Graduate Institutions

Strengthening Historically Black Graduate Institutions [HBGIs].—The Committee recommends \$64,496,000, the same as the requested level, for the part B, section 326 program. The section 326 program provides 5-year grants to strengthen HBGIs. Grants may be used for any part B purpose and to establish an endowment. The comparable fiscal year 2010 funding level is \$61,425,000.

Strengthening Predominately Black Institutions [PBIs].—The Committee recommends \$10,801,000, the same as the comparable fiscal year 2010 level, for this part A program. The fiscal year 2011 budget request is \$11,341,000. This section 318 program provides 5-year grants to PBIs to plan and implement programs to enhance the institutions' capacity to serve more low- and middle-income Black American students. Funding is allocated among PBIs based on the number of Pell Grant recipients enrolled, the number of graduates, and the percentage of graduate who are attending a baccalaureate degree-granting institution or a graduate or professional school in degree programs in which Black American students are underrepresented. In addition to the Committee-recommended level, this program received \$15,000,000 of mandatory funding in each fiscal year from 2010 to 2019 through the SAFRA Act.

Strengthening Asian American and Native American Pacific Islander-serving Institutions [AANAPISIs].—The Committee recommends \$3,600,000, the same as the comparable fiscal year 2010 level, for this part A program. The budget request level is \$3,780,000. This section 320 program provides competitive grants to AANAPISIs that have an enrollment of undergraduate students that is at least 10 percent Asian American or Native American Pacific Islander students. Grants may be used to improve their capacity to serve Asian American and Native American Pacific Islander students and low-income individuals. In addition to the Committee recommended level, this program received \$5,000,000 of mandatory funding in each fiscal year from 2010 to 2019 through the SAFRA Act.

Strengthening Alaska Native and Native Hawaiian-serving Institutions.—The Committee recommends \$15,084,000, the same as the comparable fiscal year 2010 level, for this program. The budget request level is \$15,838,000. In addition to the Committee-recommended level, this program received \$15,000,000 of mandatory funding in each fiscal year from 2010 to 2019 through SAFRA.

The purpose of this program is to improve and expand the capacity of institutions serving Alaska Native and Native Hawaiian students and low-income individuals. Funds may be used to plan, develop, and implement activities that encourage: faculty and curriculum development; better fund administrative management; renovation and improvement of educational facilities; enhanced student services; and the purchase of library and other educational materials.

Strengthening Native American Nontribal-serving Institutions.— The Committee recommends \$3,600,000, the same as the comparable fiscal year 2010 level, for this program. The fiscal year 2011 budget request is \$3,780,000. In addition to the Committeerecommended level, this program received \$5,000,000 of mandatory funding in each fiscal year from 2010 to 2019 through SAFRA.

Strengthening Tribally Controlled Colleges and Universities.— The Committee recommends \$30,169,000, the same as the comparable fiscal year 2010 level, for this program. The fiscal year 2011 budget request is \$31,677,000. Tribal colleges and universities rely on a portion of the funds provided to address developmental needs, including faculty development, curriculum, and student services. In addition to the Committee-recommended level, this program received \$30,000,000 of mandatory funding in each fiscal year from 2010 to 2019 through SAFRA.

Funds provided for this program are to be used to support the formula distribution of development grants. However, the Committee expects that up to 30 percent of appropriated funds, as authorized in section 316 of the Higher Education Act [HEA], shall be available for competitive grants for renovation and construction of facilities to continue to address urgently needed facilities repair and expansion. The Committee requests that a report on the competitive process be provided in the fiscal year 2012 congressional budget justification.

International Education and Foreign Language Studies

The bill includes a total of \$127,881,000 for international education and foreign language programs. The comparable fiscal year 2010 funding level and the budget request are \$125,881,000 for this program. The Committee bill includes language allowing funds to be used to support visits and study in foreign countries by individuals who plan to utilize their language skills in world areas vital to the U.S. national security in the fields of government, international development, and the professions. Bill language also allows up to 1 percent of the funds provided to be used for program evaluation, national outreach, and information dissemination activities. This language is continued from last year's bill and was proposed in the budget request.

Domestic Programs.—The Committee recommends \$110,360,000 for domestic program activities related to international education and foreign language studies, including international business education, under title VI of the HEA. This amount is the same as the fiscal year 2010 level and the request. Domestic programs include national resource centers, undergraduate international studies and foreign language programs, international research and studies projects, international business education projects and centers, American overseas research centers, language resource centers, foreign language and area studies fellowships, and technological innovation and cooperation for foreign information access.

The Committee funding level includes \$2,000,000 to be made available under section 604(b) of the HEA to expand access to study abroad, with the goals of increasing study abroad opportunities among underserved student populations and expanding study abroad to nontraditional destinations, particularly in developing countries. Awards under this new program will be made available on a competitive basis to institutions of higher education individually or as part of a consortium and consistent with the recommendations of the Commission on the Abraham Lincoln Study Abroad Fellowship Program.

Overseas Programs.—The bill includes \$15,576,000 for overseas programs authorized under the Mutual Educational and Cultural Exchange Act of 1961, popularly known as the Fulbright-Hays Act. The comparable fiscal year 2010 funding level and budget request are \$15,576,000. Under these overseas programs, grants are provided for group, faculty, or doctoral dissertation research abroad as well as special bilateral projects. Unlike other programs authorized by the Fulbright-Hays Act and administered by the Department of State, these Department of Education programs focus on training American instructors and students in order to improve foreign language and area studies education in the United States.

Institute for International Public Policy.—The Committee provides \$1,945,000 for the Institute for International Public Policy. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program is designed to increase the number of minority individuals in foreign service and related careers by providing a grant to a consortium of institutions for undergraduate and graduate level foreign language and international studies. An institutional match of 50 percent is required.

Fund for the Improvement of Postsecondary Education

The Committee recommends \$105,597,000 for the Fund for the Improvement of Postsecondary Education [FIPSE]. The comparable fiscal year 2010 funding level is \$159,403,000 and the budget re-

quest is \$64,036,000. FIPSE stimulates improvements in education beyond high school by supporting exemplary, locally developed projects that have potential for addressing problems and recommending improvements in postsecondary education.

Within the funds provided, the Committee has included sufficient funds to create a consortium of institutions of higher learning that offer interdisciplinary programs that focus on poverty. This activity was authorized in the recent reauthorization of the HEA.

Erma Byrd Scholarships.—The Committee recommendation does not include fiscal year 2011 funds for this program, as sufficient carryover funds exist to make continuation awards and new grants in fiscal year 2011.

The Committee does not include funding for the College Textbook Rental Pilot Initiative, funded at \$10,000,000 in fiscal year 2010, or for the Centers of Excellence for Veteran Student Success, funded at \$6,000,000 in fiscal year 2010.

Training for Realtime Writers.-Within the total for FIPSE, the Committee recommendation includes \$1,000,000 for the Training for Realtime Writers program authorized by section 872 of the Higher Education Act. The budget request did not provide funding for this program. This program provides grants to institutions of higher education to establish programs to train realtime writers. Eligible activities include curriculum development, student recruitment, distance learning, mentoring, and scholarships. The program places a priority on encouraging individuals with disabilities to pursue careers in realtime writing. More than 30 million Americans are considered deaf or hard of hearing, and many require captioning services to participate in mainstream activities and gain access to emergency broadcasts. Federal law requires that all television broadcasts be closed captioned, yet the Committee has been informed that a shortage of trained captioners is creating a barrier to full-quality captioning of realtime television programming such as news, weather and emergency messaging.

Off-campus Community Service Program.—Within the total for FIPSE, the Committee recommendation includes \$750,000, the same amount as the fiscal year 2010 level, for the off-campus community service program authorized under section 447 of the Higher Education Act. The budget request does not include funds for this purpose.

The Committee recommendation also includes bill language requiring that funds be provided to the following organizations in the amounts specified:

	Amount
Alcorn State University, Alcorn State, MS, for curriculum development and the purchase of equipment re- lated to graduate technical programs	\$250,000
Arkansas Baptist College, Little Rock, AR, for the Center for Entrepreneurship	150,000
Armstrong Atlantic State University Cyber Security Research Foundation, Savannah, GA, for the Cyber Intel-	
ligence and Counter Terrorism Program, including the purchase of equipment	200,000
Baylor University, Waco, TX, for technology upgrades at the Baylor Research and Innovation Collaborative,	
including the purchase of equipment	200,000
Black Hills State University, Spearfish, SD, for equipment to enhance education programs	450,000
California Community Colleges Chancellor's Office, Sacramento, CA, to expand a program providing aca-	
demic support to veterans	500,000
California State University, Bakersfield, Bakersfield, CA, for support of the nursing program	150,000
California State University, Long Beach, CA, for staff resources for the Metro Academies Initiative	350,000

	Amount
California State University, Sacramento, Sacramento, CA, for the Veterans Education Transitional Supports program	150,00
Castleton State College, Castleton, VT, to expand the Principal Training and School Leadership Program	300.00
	,
Cazenovia College, Cazenovia, NY, for curriculum development and job training	200,00
Central Maine Community College, Auburn, ME, for job training programs for healthcare providers Central Washington University, Ellensburg, WA, to launch the state's first bachelor's degree program in	285,00
clean energy Cincinnati State Technical and Community College, Cincinnati, OH, for GED and transition to college pro-	1,000,00
grams and job placement	150,00
Coe College, Cedar Rapids, IA, for the Digital Media Technology Project	300,00
College of Idaho, Caldwell, ID, for technology upgrades and the purchase of equipment	100,00
College of Southern Nevada, Las Vegas, NV, for the expansion of online courses	400,00
College Success Foundation, Washington, DC, for mentoring and scholarships	500,00
Commonwealth Medical College, Scranton, PA, for the Community Quality Initiative curriculum development program	250.00
Community College of Allegheny County, Pittsburgh, PA, to support basic education and GED programs	100,00
Community College of Rhode Island, Warwick, RI, for the development of a biotech program, including	
equipment	500,00
Connecticut State University System, Hartford, CT, to expand Latin American and Caribbean studies	500,00
Dakota Wesleyan University, Mitchell, SD, for health care training programs	150,00
Deaf West, North Hollywood, CA, for educational programming	250,00
Delaware Technical and Community College, Dover, DE, for distance learning technology	150,00
Delta College, University Center, MI, for chemical process and lithium battery Lab Equipment	250,00
Dickinson State University, Dickinson, ND, for its Theodore Roosevelt Center Drake University Law School, Des Moines, IA, to create the Drake Institute for Legislation and Agriculture	300,00
Policy Eastern Washington University, Spokane, WA, to educate, conduct research, and disseminate vital informa-	300,00
tion on regional water issues Edward M. Kennedy Institute for the United States Senate, Boston, MA, for educational program develop-	300,00
ment, including an endowment	500,00
internships and social service programs	250,00
Francis Marion University, Florence, SC, for early childhood education initiatives Future Generations, Franklin, WV, to develop a higher education degree in the field of substance abuse	150,00
prevention. Grambling State University, Grambling, LA, for the Project Lifelines program for vocational or higher edu-	1,000,00
cation training	100,00
education programs in alternative/renewable energy Hawaii Community College, Hilo, HI, to promote Native Hawaiian and other secondary education pro-	100,00
grams	400,00
Hazard Community and Technical College, Hazard, KY, for science technology engineering and math edu- cation programs	100,00
funtingdon College, Montgomery, AL, for purchase of equipment and technology upgrades to support dis-	100.00
tance learning initiatives	100,00
llinois State University—Normal, Normal, IL, for minority student recruitment and retention mperial Valley Community College District, Imperial, CA, for an English Language Immersion program	400,00 200,00
owa Valley Community College District, Iowa Falls, IA, for a training program in agricultural and renew- able energy technology, including the purchase of equipment	300,00
ackson Community College/Bay de Noc College/Lake Michigan College, Jackson, MI, to develop and imple- ment assessment tools and curriculum to serve low skilled adults	100,00
ackson State University, Jackson, MS, for teacher training to improve literacy and mathematics instruc- tion	500,00
ohnson State College, Johnson, VT, to expand the teacher preparation program unior College District of Newton and McDonald Counties, Missouri, Neosho, MO, for the purchase of equip-	200,00
ment to support allied health education unior College District of Sedalia, Missouri, Sedalia, MO, for curriculum development and the purchase of	500,00
equipment related to advanced energy systems	500,00
(auai Community College, Lihue, HI, for planning and implementation of a 4-year degree program (eene State College, Keene, NH, for curriculum development and educational equipment for the Monadnock	200,00
Biodiesel Collaborative	150,00
ing	200,00
ake Erie College of Osteopathic Medicine, Erie, PA, to training dental students in patient centered care	100,00
eeward Community College, Pearl City, HI, to provide college preparatory education for Filipino students	400,0

	Amount
Macomb Community College, Warren, MI, to develop assessment and curriculum materials to make dis- placed workers college ready	250,000
Manhattan Area Technical College, Manhattan, KS, for curriculum development and technology upgrades, including the purchase of equipment	450,000
Maryland Association of Community Colleges, Annapolis, MD, for the purchase of equipment to develop science and engineering labs	1,250,000
Medaille College, Buffalo, NY, for equipment related to science education Methodist University, Fayetteville, NC, for curriculum development and education equipment related to first	150,000
responder training	150,000 1.500.000
cation, including the purchase of equipment Midway College, Inc., Midway, KY, for education equipment related to nursing and health sciences Minot State University, Minot, ND, for salaries and operating expense for the Center for Community Re-	1,500,000
search and Service Mississippi State University, Mississippi State, MS, for technology upgrades and the purchase of equip-	450,000
ment to support the Delta Council Papers Project	100,000
opment for the Institute for Renewable and Sustainable Energy Nevada State College, Henderson, NV, for curriculum development and for the purchase of technology New College Institute, Martinsville, VA, for curriculum development for the development of bachelor's de- gree programs in Renewable Energy, Advanced Manufacturing, Technology Integration, and Entrepre-	250,000 200,000
neurship New Hampshire Institute of Politics at Saint Anselm College, Manchester, NH, for education programs,	100,000
technology upgrades and purchase of equipment New School - Institute for Urban Education, New York, NY, for an educational mentoring and outreach pro- gram for low-income, at-risk students	2,650,000 725,000
Nagara County Community College, Sanborn, NY, for educational equipment	100,000
North Iowa Area Community College, Mason City, IA, to make state-of-the-art training, technology, and equipment available for health professionals	200,000
Northeast Community College, Norfolk, NE, for the purchase of equipment for a renewable energy pro- gram	500,000
Northeast lowa Community College, Calmar, IA, For Dairy Science Technology program Northeastern State University, Tahlequah, OK, for professional development, including the purchase of	300,000
equipment Northern Illinois University, DeKalb, IL, to create a pilot study abroad program	100,000 200,000
Northern Kentucky University, Highland Heights, KY, for the purchase of equipment and technology Northern Maine Community College, Presque Isle, ME, for equipment related to wind power technology pro-	2,000,000
grams Northwest Arkansas Community College, Bentonville, AR, for the purchase of distance learning equip- ment	200,000
Northwest Indian College, Bellingham, WA, to expand financial literacy education opportunities	150,000
Ohio Dominican University, Columbus, OH, for science programs, including the purchase of equipment	150,000
Oklahoma State University, Stillwater, OK, to develop a veteran entrepreneurial training program Orange County Community College, Middletown, NY, for support of the Science, Engineering & Technology Center, which may include equipment and wiring	100,000 500,000
Pennsylvania Commission for Community Colleges, Harrisburg, PA, to design, create, and implement open- source educational materials	100,000
Pittsburg State University, Pittsburg, KS, to expand education programs	400,000
Providence College, Providence, RI, for technology improvements related to education Redlands Community College, El Reno, OK, for nursing education and training including the purchase of	300,000
equipment	100,000
Roger Williams University, Bristol, RI, for college access and school-to-work programs Saint Joseph College, West Hartford, CT, for personnel, equipment and technology at the new Institute for Autism and Behavioral Studies	400,000
Saint Michael's College, Colchester, VT, for curriculum development and academic programming at the Center for Intercultural and Global Learning	250,000
San Juan College, Farmington, NM, for the creation of online and certificate programs to expand the Re- newable Energy Program	150,000
Security on Campus, Inc., King of Prussia, PA, to support peer education programs	100.000
Simpson College, Indianola, IA, for the John C. Culver Public Policy Center	400,000
nology Operator Program	200,000
tation program, including the purchase of equipment	625,00

	Amount
SUNY Upstate Medical University, Syracuse, NY, for curriculum development	200,000
Texas State Technical College, Georgetown, TX, for the purchase of equipment and technology	110,000
Texas Wesleyan University, Ft. Worth, TX, to develop a distance education initiative, including the purchase of equipment	110,000
Three Rivers Community College, Poplar Bluff, MO, for the purchase of equipment	250,000
Towson University, Towson, MD, for equipment and program development for the Center for Adults with Autism	150,000
Trident Technical College, North Charleston, SC, for curriculum development and education equipment for an aeronautical training program	100,000
Truckee Meadows Community College, Reno, NV, to support the Success First program	200,000
Turtle Mountain Community College, Belcourt, ND, for education technology equipment	200,00
University of Arizona, Tucson, AZ, for the Integrative Medicine in Residency program	600,000
University of Cincinnati, Cincinnati, OH, for the Diversity and Access Initiative	350,000
University of Colorado at Colorado Springs, Colorado Springs, CO, for the Southern Colorado Higher Edu- cation Consortium Veterans Educational Assistance Program	100,000
University of Connecticut School of Law, Hartford, CT, for a Human Rights and International Law fellow-	
ship program	250,00
University of Hawaii School of Law, Honolulu, HI, for the health policy center	350,00
University of Iowa, Iowa City, IA, for the National Institute for Twice-Exceptionality University of Maine at Fort Kent, Fort Kent, ME, for curriculum development for nursing education pro-	275,000
grams	600,000
University of Mississippi, University, MS, to support interdisciplinary research and education related to public policy and economic education	250,00
University of Northern Colorado, Greeley, CO, for The Education Innovation Institute	100,00
University of Northern Iowa, Cedar Falls, IA, to support the Center for Disability Studies in Literacy, Lan- guage and Learning	550,00
University of South Dakota, Vermillion, SD, to identify and address the educational needs of veterans with disabilities	400,00
University of Southern Maine, Portland, ME, for curriculum development, including the purchase of equip- ment	500,00
University of Southern Mississippi, Hattiesburg, MS, for professional and curriculum development, and dis- tance learning at the Gulf Coast Campuses	250,00
University of Vermont, Burlington, VT, to modernize the College of Nursing curriculum	475,00
University of Wisconsin-Stevens Point, Stevens Point, WI, to support non-traditional and veteran students with disabilities in higher education and career development	400,00
Urban College of Boston, Boston, MA, to support higher education program serving low-income and minor- ity students	500,00
Utah State University, Logan, UT, to develop a land-grant education and research network	106,00
Valley City State University, Valley City, ND, for the Great Plains STEM Education Center	350,00
Western Nebraska Community College, Scottsbluff, NE, for the Western Nebraska Wind Energy Training Center	500,00
Western Technical College, La Crosse, WI, to establish a veteran's center on campus	150,00
Westminster College, Salt Lake City, UT, to purchase equipment to support nursing and health science education	150,00

Model Comprehensive Transition and Postsecondary Programs for Students with Intellectual Disabilities

The Committee recommendation includes \$13,000,000 for the Comprehensive Transition and Postsecondary Education Model Demonstration Grants as authorized by section 769 of the Higher Education Act. The comparable funding level for fiscal year 2010 is \$11,000,000, the same as the budget request. These funds are used to award competitive grants to postsecondary institutions to establish model programs to help students

These funds are used to award competitive grants to postsecondary institutions to establish model programs to help students with intellectual disabilities transition to and complete college. The programs will focus on academic enrichment; socialization; independent living; and integrated work experiences and career skills that lead to gainful employment for individuals with intellectual disabilities.

Legal Assistance Loan Repayment Program

The Committee recommends \$5,000,000 for the Legal Assistance Loan Repayment Program, as authorized by section 428L of the Higher Education Act, which authorizes student loan repayment assistance for civil legal assistance lawyers. This amount is the same as the comparable fiscal year 2010 funding level. The budget request proposes to eliminate this program. The Legal Assistance Loan Repayment Program addresses the serious problem facing legal services across the country in recruitment and retention of qualified attorneys who provide invaluable legal assistance to our Nation's neediest citizens, including the elderly, persons with disabilities, persons impacted by natural disaster victims, and victims of domestic violence.

Minority Science and Engineering Improvement

The Committee recommends \$9,503,000 for the Minority Science and Engineering Improvement program [MSEIP]. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. Funds are used to provide discretionary grants to institutions with minority enrollments greater than 50 percent to purchase equipment, develop curricula, and support advanced faculty training. Grants are intended to improve science and engineering education programs and increase the number of minority students in the fields of science, mathematics, and engineering.

Tribally Controlled Postsecondary Career and Technical Institutions

The Committee recommends \$8,162,000 for tribally controlled postsecondary vocational institutions. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program provides grants for the operation and improvement of two tribally controlled postsecondary vocational institutions to ensure continued and expanding opportunities for Indian students.

Federal TRIO Programs

The Committee recommends \$868,089,000 for Federal TRIO Programs. The comparable fiscal year 2010 funding level and budget request are \$853,089,000.

TRIO programs provide a variety of services to improve postsecondary education opportunities for low-income individuals and first-generation college students: Upward Bound offers disadvantaged high school students academic services to develop the skills and motivation needed to pursue and complete a postsecondary education; Student Support Services provides remedial instruction, counseling, summer programs and grant aid to disadvantaged college students to help them complete their postsecondary education; Talent Search identifies and counsels individuals between ages 11 and 27 regarding opportunities for completing high school and enrolling in postsecondary education; Educational Opportunity Centers provide information and counseling on available financial and academic assistance to low-income adults who are first-generation college students; and the Ronald E. McNair Postbaccalaureate Achievement Program supports research internships, seminars, tutoring, and other activities to encourage disadvantaged college students to enroll in doctoral programs.

The Committee recognizes that supportive services aimed at increasing retention and graduation of low-income students in college are an important complement to student financial aid, particularly the Pell Grant program. Many such retention services are supported by the Federal TRIO Program's Student Support Services effort. The Committee intends that the funds provided will maintain the number of Student Support Services programs.

Gaining Early Awareness and Readiness for Undergraduate Programs [GEAR UP]

The Committee recommends \$323,212,000 for GEAR UP. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. Under this program, funds are used by States and partnerships of colleges, middle and high schools, and community organizations to assist cohorts or students in middle and high schools serving a high percentage of low-income students. Services provided help students prepare for and pursue a postsecondary education.

Byrd Honors Scholarships

The Committee recommends \$42,000,000 for the Byrd Honors scholarship program. This amount is the same as the comparable fiscal year 2010 funding level. The budget did not request funds for this program. The Byrd Honors scholarship program is designed to promote student excellence and achievement and recognize exceptionally able students who show promise of continued excellence. Funds are allocated to State education agencies based on each State's school-aged population. The State education agencies select the recipients of the scholarships in consultation with school administrators, teachers, counselors, and parents. The funds provided will support a new cohort of first-year students in 2011, and continue support for the 2008, 2009, and 2010 cohorts of students in their fourth, third and second years of study, respectively.

Javits Fellowships

The Committee recommends \$9,687,000 for the Javits Fellowships program. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. The Javits Fellowships program provides fellowships of up to 4 years to students of superior ability who are pursuing doctoral degrees in the arts, humanities, and social sciences at any institution of their choice. Each fellowship consists of a student stipend to cover living costs and an institutional payment to cover each fellow's tuition and other expenses. The Committee bill includes language proposed in the budget request that stipulates that funds provided in the fiscal year 2011 appropriation support fellowships for the 2012–2013 academic year.

Graduate Assistance in Areas of National Need

The Committee recommends \$31,030,000 for graduate assistance in areas of national need. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program awards competitive grants to graduate academic departments and programs for fellowship support in areas of national need as determined by the Secretary. The Secretary designated the following areas of national need: biology, chemistry, computer and information sciences, engineering, mathematics, physics, and nursing. Recipients must demonstrate financial need and academic excellence, and be seeking the highest degree in their fields.

Teacher Quality Partnership Program

The Committee recommends \$58,000,000 for the teacher quality partnership program. The comparable fiscal year 2010 funding level is \$43,000,000. The budget request would eliminate this program and consolidate it into a proposed new Teacher and Leader Pathways authority as part of the administration's plan for reauthorizing the ESEA. This program helps improve the quality of teachers working in high-need schools and early childhood education programs by creating model teacher preparation and residency programs.

Child Care Access Means Parents in Schools

The Committee recommends an appropriation of \$16,034,000 for the Child Care Access Means Parents in School [CCAMPIS] program. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. CCAMPIS supports the efforts of a growing number of nontraditional students who are struggling to complete their college degrees at the same time that they take care of their children. Discretionary grants of up to 4 years are made to institutions of higher education to support or establish a campus-based childcare program primarily serving the needs of low-income students enrolled at the institution.

Demonstration Projects To Ensure Quality Higher Education for Students With Disabilities

The Committee recommends \$6,755,000 for this program. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. This program's purpose is to ensure that students with disabilities receive a high-quality postsecondary education. Grants are made to support model demonstration projects that provide technical assistance and professional development activities for faculty and administrators in institutions of higher education.

Underground Railroad Program

The Committee concurs in the budget request to eliminate funding for the Underground Railroad Program as Federal support for this program was not meant to be permanent. Federal funding was intended to seed private support by using a public private partnership to create an endowment. The Federal Government has been funding this program since fiscal year 1999. The comparable fiscal year 2010 level is \$1,945,000. Grants are provided to research, display, interpret, and collect artifacts related to the history of the underground railroad. Educational organizations receiving funds must demonstrate substantial private support through a public-private partnership, create an endowment fund that provides for ongoing operation of the facility, and establish a network of satellite centers throughout the United States to share information and teach people about the significance of the Underground Railroad in American history.

GPRA/Higher Education Act Program Evaluation

The Committee recommends \$609,000 to collect data associated with the Government Performance and Results Act [GPRA] and to evaluate programs authorized by the HEA. This amount is the same as the comparable fiscal year 2010 funding level and the budget request.

B.J. Stupak Olympic Scholarships

The Committee concurs in the budget request to eliminate funding for this program as the program is duplicative of efforts of other Federal, State and local initiatives that increase college access. The comparable fiscal year 2010 level is \$977,000. The program provides financial assistance to Olympic-aspiring student athletes.

Thurgood Marshall Legal Educational Opportunity Program

The Committee recommendation includes \$3,000,000 for the Thurgood Marshall Legal Educational Opportunity Program. This amount is the same as the comparable fiscal year 2010 funding level and the budget request. Under this program, funds help lowincome, minority, or disadvantaged college students with the information, preparation, and financial assistance to enter and complete law school study. The HEA stipulates that the Secretary make an award to or contract with the Council on Legal Education Opportunity to carry out authorized activities. The bill includes language to authorize the competitive awarding of these grants, as requested by the administration.

BA Degrees in STEM and Critical Foreign Languages

The Committee concurs in the budget request to eliminate funding for this program. The comparable fiscal year 2010 level is \$1,092,000. Under this program, grants are awarded on a competitive basis to eligible recipients to implement teacher education programs that promote effective teaching skills and lead to a baccalaureate degree in science, technology, engineering, mathematics, or a critical foreign language with concurrent teacher certification. This program duplicates the efforts of other initiatives such as the Department of Education's Teacher Quality Partnerships grants and the National Science Foundation's Transforming Undergraduate Education in STEM.

MA Degrees in STEM and Critical Foreign Languages

The Committee concurs in the budget request to eliminate funding for this program. The comparable fiscal year 2010 level is \$1,092,000. Under this program grants are awarded, on a competitive basis, to eligible recipients to develop and implement part-time master's degree programs in science, technology, engineering, mathematics, or critical foreign language education for teachers in order to enhance the teacher's content knowledge and teaching skill. This program duplicates the efforts of other initiatives such as the Department of Education's Teacher Quality Partnerships.

HOWARD UNIVERSITY

Appropriations, 2010	\$234,977,000
Budget estimate, 2011	234,977,000
Committee recommendation	234,977,000

The Committee recommends an appropriation of \$234,977,000 for Howard University. This is the same amount as the comparable fiscal year 2010 funding level and the budget request. Howard University is located in the District of Columbia and offers undergraduate, graduate, and professional degrees through 12 schools and colleges. The university also administers the Howard University Hospital. Federal funds from this account support approximately 48 percent of the university's projected educational and general expenditures, excluding the hospital. The Committee recommends, within the funds provided, not less than \$3,600,000 for the endowment program.

Howard University Hospital.—Within the funds provided, the Committee recommends \$28,946,000 for the Howard University Hospital. This is the same amount as the fiscal year 2010 funding level and the budget request. The hospital provides inpatient and outpatient care, as well as training in the health professions. It also serves as a major acute and ambulatory care center for the District of Columbia and functions as a major teaching facility attached to the university. The Federal appropriation provides partial funding for the hospital's operations.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS

Appropriations, 2010	\$461,000
Budget estimate, 2011	461,000
Committee recommendation	461,000

Federal Administration.—The Committee bill includes \$461,000 for Federal administration of the College Housing and Academic Facilities Loans [CHAFL] program. This is the same amount as the comparable fiscal year 2010 level and the budget request. These funds will be used to reimburse the Department for expenses incurred in managing the existing CHAFL loan portfolio during fiscal year 2011. These expenses include salaries and benefits, travel, printing, contracts (including contracted loan servicing activities), and other expenses directly related to the administration of the CHAFL program.

HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL FINANCING PROGRAM ACCOUNT

Appropriations, 2010	\$20,582,000
Budget estimate, 2011	20,582,000
Committee recommendation	20.582.000

The Committee recommends \$20,582,000 for the Historically Black College and University [HBCU] Capital Financing Program. This is the same amount as the comparable fiscal year 2010 level and the budget request for this activity. The budget proposes \$20,228,000 to pay for the subsidy costs of up to \$279,393,000 in guaranteed loan authority under this program. The HBCU Capital Financing Program makes capital available to HBCUs for construction, renovation, and repair of academic facilities by providing a Federal guarantee for private sector construction bonds. Construction loans will be made from the proceeds of the sale of the bonds.

INSTITUTE OF EDUCATION SCIENCES

Appropriations, 2010	\$659,006,000
Budget estimate, 2011	738,756,000
Committee recommendation	722,756,000

The Committee recommends \$722,756,000 for the Institute of Education Sciences [IES]. The comparable fiscal year 2010 funding level is \$659,006,000. The budget request includes \$738,756,000 for authorized activities. This account supports education research, data collection and analysis activities, and the assessment of student progress.

RESEARCH, DEVELOPMENT, AND DISSEMINATION

The Committee recommends \$240,696,000 for education research, development and national dissemination activities. The comparable fiscal year 2010 amount is \$200,196,000 and the budget request includes \$260,696,000 for these activities. Funds are available for obligation for 2 fiscal years. These funds support research, development, and dissemination activities that are aimed at expanding fundamental knowledge of education and promoting the use of research and development findings in the design of efforts to improve education.

The Committee notes that the National Research Council report "Preparing Teachers: Building Evidence for Sound Policy" released earlier this year found there was much we still don't know about teacher preparation and its effectiveness. The report noted that improved understanding of the relationships between characteristics of teacher preparation and student learning, and the development of a comprehensive, coherent system for collecting data about teacher preparation are two overarching needs. The Committee believes IES should utilize available resources to help address the knowledge that the report identified. The Committee requests a letter report, not later than 30 days after enactment of this act, which describes the funding opportunities IES is proposing, planning and taking to address relevant conclusions and recommendations from the NRC report.

The Committee believes additional steps need to be taken to promote information dissemination and provide assistance for States, districts and schools to use in applying evidence for what works in education. The What Works Clearinghouse was designed to be such a source. However, the Committee has noted concerns previously about the extent to which it was achieving this mission. Most recently, in a report requested by the Committee, the Government Accountability Office [GAO] noted that only 34 percent of school districts have accessed the WWC Web site and only 11 percent of school districts visited the Web site at least seven times per year. The GAO report included recommendations related to improving the timeliness of WWC reports and gauging product usefulness and relevance for WWC target audiences. The Committee looks forward to IES implementing the recommended changes and requests an update on planned and implemented actions.

In addition to the WWC, the Department and IES support other technical assistance and research-related resources to assist States, districts, and schools. These include the regional educational laboratories discussed later in the IES account as well as the Doing What Works resource administered by the Office of Planning, Evaluation and Policy Development. The Committee believes the Department and IES should expand their efforts to provide the support that States and school districts need to use funding in ways that are supported by scientifically based research. The Committee requests that the Department describe in its fiscal year 2012 budget justification the specific actions that it has taken or will take to address this issue.

The Committee encourages the IES to use available resources to continue support for research and development activities related to gifted and talented education. Previously, the Department used funds available from other sources to support a National Research Center on the Gifted and Talented.

STATISTICS

The Committee recommends \$118,021,000 for data gathering and statistical analysis activities of the National Center for Education Statistics [NCES]. The comparable fiscal year 2010 funding level is \$108,521,000 and the budget request includes \$117,021,000 for these activities.

The NCES collects, analyzes, and reports statistics on education in the United States. Activities are carried out directly and through grants and contracts. The Center collects data on educational institutions at all levels, longitudinal data on student progress, and data relevant to public policy. The NCES also provides technical assistance to State and local education agencies and postsecondary institutions.

The Committee recommendation includes sufficient resources for NCES to update the report, Condition of America's Public School Facilities: 1999.

REGIONAL EDUCATIONAL LABORATORIES

The Committee recommends \$72,650,000 to continue support for the regional educational laboratories. The comparable fiscal year 2010 funding level is \$70,650,000 for this activity. The budget request includes \$69,650,000 and necessary bill language required to continue, for an additional year, the contracts of the current laboratories. Program funds support a network of 10 laboratories that are responsible for promoting the use of broad-based systemic strategies to improve student achievement. The Committee recommends additional funds for the laboratories to increase their capacity to provide timely responses to requests for assistance on issues of urgent regional need.

The Committee is pleased that the research, development, dissemination, and technical assistance activities carried out by the regional educational laboratories will continue to be consistent with the standards for scientifically based research prescribed in the Education Sciences Reform Act of 2002. The Committee notes that the current contracts of the laboratories requires them to coordinate with other federally funded education technical assistance providers to coordinate the provision of services, including school improvement activities that are responsive to State and local needs. The Committee encourages the regional laboratories and comprehensive centers to strengthen their relationship, particularly in providing products and services that help States and school districts utilize the school improvement funds available in the Education for the Disadvantaged account to support school improvement activities that are supported by scientifically based research.

RESEARCH AND INNOVATION IN SPECIAL EDUCATION

The Committee recommends \$71,085,000, the same amount as the fiscal year 2010 funding level and budget request, for research and innovation in special education. The National Center for Special Education Research addresses gaps in scientific knowledge in order to improve special education and early intervention services and outcomes for infants, toddlers, and children with disabilities. Funds provided to the center are available for obligation for 2 fiscal years.

SPECIAL EDUCATION STUDIES AND EVALUATIONS

The Committee recommends \$11,460,000, the same amount as the fiscal year 2010 funding level and the budget request, for special education studies and evaluations.

This program supports competitive grants, contracts, and cooperative agreements to assess the implementation of the Individuals with Disabilities Education Act. Funds also will be used to evaluate the effectiveness of State and local efforts to deliver special education services and early intervention programs. Funds are available for obligation for 2 fiscal years.

STATEWIDE DATA SYSTEMS

The Committee recommendation includes \$65,000,000, the same amount as the budget request, for statewide data systems. The fiscal year 2010 level is \$58,250,000 for these systems.

This program supports competitive grants to State educational agencies to enable such agencies to design, develop, and implement statewide, longitudinal data systems to manage, analyze, disaggregate, and use individual data for students of all ages. These systems may incorporate workforce and postsecondary education information. Funds are available for obligation for 2 fiscal years.

The Committee bill allows \$10,000,000 to be used for statewide data coordinators, and other technical assistance activities to improve States' capability to use, report and maintain high-quality data in their systems. The bill also allows the Department to use funds to coordinate data collection and reporting with private sector initiatives, in order to help reduce the reporting burden on States and schools, while improving data accuracy and maintaining access to the data for research purposes.

ASSESSMENT

The Committee recommends \$143,844,000, the same as the request, for assessment. The comparable fiscal year 2010 funding level is \$138,844,000.

These funds provide support for the National Assessment of Educational Progress [NAEP], a congressionally mandated assessment created to measure the educational achievement of American students. The primary goal of NAEP is to determine and report the status and trends over time in educational achievement, subject by subject. In 2002, the Department began paying for State participation in biennial reading and mathematics assessments in grades 4 and 8.

Within the funds appropriated, the Committee recommends \$8,723,000 for the National Assessment Governing Board [NAGB], the same amount as the comparable fiscal year 2010 and request levels. The NAGB is responsible for formulating policy for NAEP.

DEPARTMENTAL MANAGEMENT

PROGRAM ADMINISTRATION

Appropriations, 2010	\$456,200,000
Budget estimate, 2011	492,488,000
Committee recommendation	492,488,000

The Committee recommends \$492,488,000, the same amount as the budget request, for program administration. The comparable fiscal year 2010 funding level is \$456,200,000 for this purpose. This amount includes \$2,696,100, the same amount as the budget request, available under section 306 of this act to increase the Department's acquisition workforce capacity and capabilities.

Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, automated data processing, and other services required to award, administer, and monitor approximately 180 Federal education programs. Support for program evaluation and studies and advisory councils is also provided under this activity.

The Committee recommendation includes \$19,275,000, the same amount as the budget request, for building modernization activities for the Department of Education. These activities include renovations of the Mary E. Switzer building and other buildings, consolidation of staff from other locations, and improvements to the Department's headquarters. These funds are available until expended, as proposed in the budget request.

The Committee recommendation is \$2,696,100 pursuant to section 306 of this act. These funds will supplement the Department's acquisition workforce activities.

OFFICE FOR CIVIL RIGHTS

Appropriations, 2010	\$103,024,000
Budget estimate, 2011	105,700,000
Committee recommendation	105,700,000

The Committee recommends \$105,700,000, the same amount as the budget request, for the Office for Civil Rights [OCR]. The comparable fiscal year 2010 amount is \$103,024,000 for the OCR.

The Office for Civil Rights is responsible for the enforcement of laws that prohibit discrimination on the basis of race, color, national origin, sex, disability, and age in all programs and institutions funded by the Department of Education. To carry out this responsibility, OCR investigates and resolves discrimination complaints, monitors desegregation and equal educational opportunity plans, reviews possible discriminatory practices by recipients of Federal education funds, and provides technical assistance to recipients of funds to help them meet civil rights requirements.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2010	\$60,053,000
Budget estimate, 2011	65,238,000
Committee recommendation	65,238,000

The Committee recommends \$65,238,000, the same amount as the budget request, for the Office of the Inspector General. The fiscal year 2010 amount is \$60,053,000 for the office.

The Office of the Inspector General has the authority to investigate all departmental programs and administrative activities, including those under contract or grant, to prevent and detect fraud and abuse, and to ensure the quality and integrity of those programs. The Office investigates alleged misuse of Federal funds and conducts audits to determine compliance with laws and regulations, efficiency of operations, and effectiveness in achieving program goals.

GENERAL PROVISIONS

The Committee bill contains language which has been included in the bill since 1974, prohibiting the use of funds for the transportation of students or teachers in order to overcome racial imbalance (sec. 301).

The Committee bill contains language included in the bill since 1977, prohibiting the involuntary transportation of students other than to the school nearest to the student's home (sec. 302).

The Committee bill contains language which has been included in the bill since 1980, prohibiting the use of funds to prevent the implementation of programs of voluntary prayer and meditation in public schools (sec. 303).

The Committee bill includes a provision giving the Secretary of Education authority to transfer up to 1 percent of any discretionary funds between appropriations (sec. 304).

The Committee continues a provision that allows the outlying areas to consolidate funds under title V of the Elementary and Secondary Education Act (sec. 305).

The Committee bill includes a provision providing \$2,696,100 for acquisition workforce activities. These funds may be transferred to any other account in the Department, subject to notification of the Committees on Appropriations of the Senate and House of Representatives (sec. 306). The Committee bill contains a provision to transfer the Health Education Assistance Loan [HEAL] program to the Department of Education from the Department of Health and Human Services. The Department of Education will assume responsibility for the program and the authority to administer, service, collect, and enforce the program as well as the functions, assets, and liabilities of the Secretary of Health and Human Services will be permanently transferred to the Secretary of Education (sec. 307).

nently transferred to the Secretary of Education (sec. 307). The Committee bill includes language establishing an Early Learning Challenge Fund (sec. 308).

The Committee bill changes the name of the Office of Vocational and Adult Education to the Office of Career, Technical, and Adult Education (sec. 309).

TITLE IV

RELATED AGENCIES

Committee for Purchase From People Who Are Blind or Severely Disabled

SALARIES AND EXPENSES

Appropriations, 2010	\$5,396,000
Budget estimate, 2011	5,771,000
Committee recommendation	5,771,000

The Committee recommends \$5,771,000 for fiscal year 2011 for the Committee for Purchase from People Who Are Blind or Severely Disabled. This amount is the same as the fiscal year 2011 budget request. The fiscal year 2010 comparable level is \$5,396,000.

The Committee for Purchase from People Who Are Blind or Severely Disabled was established by the Javits-Wagner-O'Day Act of 1938 as amended. Its primary objective is to increase the employment opportunities for people who are blind or have other severe disabilities and, whenever possible, to prepare them to engage in competitive employment.

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

Appropriations, 2010	\$1,149,721,000
Budget estimate, 2011	1,415,586,000
Committee recommendation	1,365,586,000

The Committee recommends \$1,365,586,000 for the Corporation for National and Community Service in fiscal year 2011. The administration request for fiscal year 2011 was \$1,415,586,000. The fiscal year 2010 comparable level was \$1,149,721,000.

The Committee recommendation is sufficient to increase the number of AmeriCorps members from 87,000 in fiscal year 2010 to more than 97,000 in fiscal year 2011.

The Corporation for National and Community Service, a corporation owned by the Federal Government, was established by the National and Community Service Trust Act of 1993 to enhance opportunities for national and community service and provide national service education awards. The Corporation makes grants to States, institutions of higher education, public and private nonprofit organizations, and others to create service opportunities for students, out-of-school youth, and adults.

The Corporation administers programs authorized under the Domestic Volunteer Service Act, the National and Community Service Trust Act and the SERVE America Act. The Committee recommends \$111,000,000 for the Volunteers in Service to America [VISTA] Program. The comparable funding level for fiscal year 2010 was \$99,074,000. The budget request for fiscal year 2011 was \$98,000,000.

VISTA, created in 1964 under the Economic Opportunity Act, provides capacity building for small, community-based organizations. VISTA volunteers raise resources for local projects, recruit and organize volunteers, and establish and expand local community-based programs in housing, employment, health, and economic development activities.

The Committee strongly supports VISTA's anti-poverty mission, particularly in the midst of an economic recession. In addition, the Committee views it as a great asset that VISTA volunteers can serve in small, nonprofit organizations with little to no capacity to manage a Federal grant. For that reason, the Committee urges the Corporation to make VISTA part of the growth plan for national service.

The Committee remains concerned that the current training program for VISTA volunteers requires too much travel and does not adequately correlate to the actual tasks that VISTA members are required to complete in their service. The Committee urges the Corporation to consider State-based training and devoting a higher percentage of training time to core skill development.

NATIONAL SENIOR VOLUNTEER CORPS

The Committee recommends \$229,100,000 for the National Senior Volunteer Corps programs. The comparable level in fiscal year 2010 was \$220,900,000. The fiscal year 2011 budget request was \$221,100,000.

The Committee has included the following activities in the following amounts:

	Fiscal year—		Committee
Programs	2010 comparable	2011 President's request	recommendation
Retired Senior Volunteer Program	63,000 110,996 46,904	63,000 111,100 47,000	64,000 115,600 49,500

[In thousands of dollars]

The Committee has included sufficient funding to increase the stipend for Foster Grandparents and Senior Companion members by 10 cents, for a total of \$2.75 per hour. The Committee is grateful for the service provided by these elderly individuals.

The maximum total dollars that may be used in fiscal year 2011 for Grants.gov/eGrants support, Training and Technical Assistance, and Recruitment and Retention activities shall not exceed the amount enacted for these activities in fiscal year 2010.

AMERICORPS GRANTS

The Committee recommends \$440,000,000 for AmeriCorps grants in fiscal year 2011. The fiscal year 2010 level was \$372,547,000 and the budget request for fiscal year 2011 was \$488,033,000. The Committee notes that, despite a 37 percent increase in funding in fiscal year 2010, some States experienced a reduction in their participation in the AmeriCorps grant program. The Committee is concerned that small organizations and organizations in rural areas of the country are less able to compete with well-known national organizations. The Committee has not reinstated the cap on national direct grants; however, the Committee requests a report within 90 days of enactment of this act on the steps the Corporation is taking to ensure that small organizations and entities in rural America have equal opportunities for funding.

The Committee directs the Corporation to include a 5-year detail of member service in the annual congressional budget justification. The detail should include the number of members, grant cost, and Trust cost broken out both by program (e.g., VISTA, NCCC, State, and national) and by level of service (e.g., full time, part time, quarter time). In addition, the justification should include a 5-year detail on the number of members serving in each State, excluding NCCC.

The Committee is pleased with the participation of the Corporation in the Let's Move! campaign and encourages the Corporation to expand its efforts around childhood nutrition and hunger. In particular, the Committee urges the Corporation to give priority to applications that support increasing healthy food choices in antihunger programs, assisting local farm-to-school initiatives, and increasing access to food assistance programs. The Committee is aware that the recent economic downturn has dramatically increased the number of Americans seeking out food assistance programs, and hopes that AmeriCorps members can increase the capacity of local organizations to meet this pressing national need.

DISABILITY PLACEMENT FUNDS

The Committee recommendation includes \$6,000,000 for Disability Placement funds. The comparable fiscal year 2010 level was \$5,000,000 and the budget request for fiscal year 2011 was \$6,000,000.

Grant funds are for the placement of, reasonable accommodation of, and auxiliary services for members and potential members with disabilities serving in AmeriCorps programs.

The Committee is deeply concerned by the high rate of unemployment among people with disabilities and believes that the programs of the Corporation are well-suited to help people with disabilities gain important job skills without jeopardizing their medical benefits. In addition, the service of AmeriCorps members with disabilities helps to educate potential employers about reasonable accommodation options, which may lead to reduced stigma and discrimination. The Committee encourages the Corporation to help grantees incorporate people with disabilities in AmeriCorps projects whenever possible.

In addition, the Committee is sensitive to the increased costs involved in running an AmeriCorps program in which a significant proportion of the members have disabilities. The Committee urges the Corporation to consider ways to provide additional support to programs in which 25 percent or more of the members have disabilities, either through the disability grants, the CEO's waiver authority or other cooperative agreements.

INNOVATION, DEMONSTRATION, AND ASSISTANCE ACTIVITIES

The Committee has included \$84,509,000 for Innovation, Demonstration, and Assistance Activities. The comparable fiscal year 2010 level was \$60,500,000 and the budget request for fiscal year 2011 was \$77,000,000.

Within the funds provided for the Innovation account, the Committee has included \$60,000,000 for the Social Innovation fund authorized under section 1807 of the SERVE America Act. The Committee recommendation also includes \$10,000,000 for the nonprofit capacity-building program authorized under section 1809 of the SERVE America Act.

In addition, \$10,000,000 is included for the Volunteer Generation Fund authorized under section 198P of the SERVE America Act. The Committee has not included bill language requested by the administration to waive the statutorily required allocation of these funds.

The Committee recommendation also includes \$1,000,000 for the highly successful MLK Day of Service and \$1,000,000 for the Serve America Fellowships.

EVALUATION

The Committee recommendation includes \$8,000,000 for evaluation activities. The comparable fiscal year 2010 level was \$6,000,000 and the budget request for fiscal year 2011 was \$8,000,000.

NATIONAL CIVILIAN COMMUNITY CORPS

The Committee recommendation includes \$35,593,000 for the National Civilian Community Corps. The comparable fiscal year 2010 level was \$29,000,000 and the budget request for fiscal year 2011 was \$34,593,000.

The National Civilian Community Corps is a full-time, teambased residential program for men and women ages 18 to 24. Members are assigned to 1 of 5 campuses for a 10-month service commitment.

LEARN AND SERVE AMERICA

The Committee has included \$40,198,000 for Learn and Serve America. The fiscal year 2010 comparable level was \$39,500,000 and the budget request for fiscal year 2011 was \$40,198,000.

Learn and Serve America provides direct and indirect support to K–12 schools, community groups and higher education institutions to facilitate service-learning projects.

The Committee has included sufficient funding to continue the Summer of Service activities within the Learn and Serve program.

STATE COMMISSION ADMINISTRATION GRANTS

The Committee has included \$18,000,000 for State Commission Administration grants. This is the same amount as the budget request for fiscal year 2011. The comparable fiscal year 2010 level was \$17,000,000.

TRAINING AND TECHNICAL ASSISTANCE

The Committee recommendation includes \$11,000,000 for Training and Technical Assistance. The budget request for fiscal year 2011 was \$13,000,000. The comparable fiscal year 2010 level was \$7,500,000.

NATIONAL SERVICE TRUST

The Committee recommends an appropriation of \$271,186,000 for the National Service Trust. The comparable level for fiscal year 2010 was \$197,000,000. The administration request for fiscal year 2011 was \$293,662,000.

The Committee notes that the funding level recommended is sufficient to support more than 97,000 members in fiscal year 2011, an increase of more than 10,000 members from fiscal year 2010.

SALARIES AND EXPENSES

The Committee recommends an appropriation of \$103,000,000 for the Corporation's salaries and expenses. The budget request for fiscal year 2011 was \$109,000,000. The comparable level for fiscal year 2010 was \$88,000,000. The Committee directs that the Corporation must fund all staffing needs from the salaries and expenses account.

The salaries and expenses appropriation provides funds for staff salaries, benefits, travel, training, rent, advisory and assistance services, communications and utilities expenses, supplies, equipment, and other operating expenses necessary for management of the Corporation's activities under the National and Community Service Act of 1990 and the Domestic Volunteer Service Act of 1973.

OFFICE OF INSPECTOR GENERAL

The Committee recommends an appropriation of \$9,000,000 for the Office of Inspector General [OIG]. The comparable level for fiscal year 2010 was \$7,700,000 and the administration request for fiscal year 2011 was \$9,000,000.

The goals of the OIG are to increase organizational efficiency and effectiveness and to prevent fraud, waste, and abuse.

ADMINISTRATIVE PROVISIONS

The Committee has included three administrative provisions: language requiring the Corporation to make any significant changes to program requirements or policy through rule-making (sec. 401), language requiring that donations supplement and not supplant operations (sec. 402) and language aligning requirements regarding the use of Education Awards at GI Bill-eligible institutions (sec. 403).

CORPORATION FOR PUBLIC BROADCASTING

Appropriations, 2011	\$430,000,000
Appropriations, 2012	445,000,000
Budget estimate, 2013	460,000,000
Committee recommendation	460,000,000

The Committee recommends \$460,000,000, the same as the budget request, for the Corporation for Public Broadcasting [CPB] as an advance appropriation for fiscal year 2013. The comparable funding level provided as an advance appropriation for fiscal year 2012 was \$445,000,000.

The majority of these funds go directly to local public television and radio stations. Funds also support the creation of content for radio, television, and other platforms; system support activities that benefit the entire public broadcasting community; and the administration of the CPB. The CPB will have \$430,000,000 available for these activities in fiscal year 2011. The advance appropriation made available in fiscal year 2010 was \$420,000,000.

In addition, the Committee recommends \$36,000,000 be made available in fiscal year 2011 for the conversion to digital broadcasting. This is the same as the fiscal year 2010 funding level and the fiscal year 2011 budget request.

The Committee recommendation does not include funding for fiscal stabilization grants, as proposed by the administration. The comparable fiscal year 2010 funding level is \$25,000,000.

The Committee recommendation also does not include funding for interconnection grants, as proposed by the administration. The comparable fiscal year 2010 funding level is \$25,000,000, which represented the third and final installment of the radio interconnection system replacement project.

FEDERAL MEDIATION AND CONCILIATION SERVICE

SALARIES AND EXPENSES

Appropriations, 2010	\$46,652,000
Budget estimate, 2011	48,025,000
Committee recommendation	48,025,000

The Committee recommends \$48,025,000, the same as the fiscal year 2011 budget request, for the Federal Mediation and Conciliation Service [FMCS]. The comparable fiscal year 2010 funding level is \$46,652,000.

The FMCS was established by Congress in 1947 to provide mediation, conciliation, and arbitration services to labor and management. FMCS is authorized to provide dispute resolution consultation and training to all Federal agencies.

Within the total, the Committee recommendation includes \$750,000 to remain available through September 30, 2012, for labor-managements partnership grants, as requested by the administration. These grants support innovative approaches to collaborative labor-management relationships to resolve potential problems, explore ways to improve productivity, and avert serious work stoppages.

FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

SALARIES AND EXPENSES

Appropriations, 2010	\$10,358,000
Budget estimate, 2011	13,105,000
Committee recommendation	15,755,000

The Committee recommends \$15,755,000 for fiscal year 2011 for the Federal Mine Safety and Health Review Commission. The comparable funding level for fiscal year 2010 is \$10,358,000 and the budget request is \$13,105,000.

The Commission provides administrative trial and appellate review of legal disputes under the Federal Mine Safety and Health Act of 1977. Most cases involve civil penalties proposes by the Department of Labor's Mine Safety and Health Administration. The Commission's Administrative Law Judges [ALJs] decide cases at the trial level and the five-member Commission provides review of the ALJ decisions.

The Committee provides additional funding for the Commission to reduce the backlog of cases in the Office of Administrative Law Judges. The rate of contested MSHA citations has more than quadrupled since the passage of the MINER Act of 2006, resulting in a more than fourfold increase in the number of new cases at the Commission from an average of 2,300 in fiscal years 2000 to 2005 to over 9,200 in fiscal year 2009. The corresponding backlog has increased from 1,300 at the beginning of fiscal year 2005 to over 14,000 at the beginning of fiscal year 2010. The Committee is concerned that mine operators with poor safety and health records could avoid heightened enforcement actions because of this backlog. It now takes an average of over 400 days to dispose of a case, up from 120 days in fiscal year 2005. This could provide a dangerous incentive for mine operators with a pattern of serious and substantial safety violations to contest violations simply to delay enforcement. The delayed review of these cases at the Commission can hinder the establishment of a pattern of violations, undermining mine safety efforts, and putting miners at risk.

If the Commission were funded at the level of the budget request, the number of backlogged cases would continue to grow through fiscal year 2011. The Committee recommendation would enable the Commission to begin reducing the backlog in fiscal year 2011 by hiring additional judges and support staff and continuing the transition to an electronic case management system. The Committee directs the Commission to brief the Committees on Appropriations of the House of Representatives and the Senate within 90 days of enactment on a detailed plan to eliminate the backlog, including an evaluation of ideal case processing times and pending levels and the resources needed to achieve these levels within a reasonable time period.

The Committee further expects the Department of Labor and the Commission to continue to implement activities that will reduce incentives for mine operators to challenge cases and improve the efficiency by which challenges are heard. The Committee requests that the Department of Labor and the Commission submit such a plan not later than 30 days after enactment of this act, and provide quarterly progress reports thereafter on the status of activities identified in the plan, including an explanation for any activity that is not completed within the timeframe identified in the operating plan.

INSTITUTE OF MUSEUM AND LIBRARY SERVICES

OFFICE OF MUSEUM AND LIBRARIES: GRANTS AND ADMINISTRATION

Appropriations, 2010	\$282,251,000
Budget estimate, 2011	265,869,000
Committee recommendation	270,619,000

The Committee recommends \$270,619,000 for fiscal year 2011 for the Institute of Museum and Library Services. The comparable funding level for fiscal year 2010 is \$282,251,000 and the budget request is \$265,869,000. Within the total for IMLS, the Committee recommendation in-

cludes the following amounts:

[In thousands of dollars]

Budget activity	Fiscal year 2010 comparable	Fiscal year 2011 budget request	Fiscal year 2011 Committee recommendation
Library Services Technology Act:			
Grants to States	172,561	172,561	172,56
Native American Library Services	4,000	4,000	4,10
National Leadership: Libraries	12,437	14,000	13,90
Laura Bush 21st Century Librarian	24,525	22,962	22,96
Museum Services Act:			
Museums for America	19,176	19,176	19,17
Museum Assessment Program	460	460	46
21st Century Museum Professionals	1,280	2,280	2,23
Conservation Project Support	3,052	3,052	3,05
Conservation Assessment Program	803	803	80
Native American/Hawaiian Museum Services	975	975	1,02
National Leadership: Museums	7,981	6,981	6,98
African American History & Culture Act:			
Museum Grants for African American History & Culture	1,485	1,485	1,48
Administration	15,053	15,053	15,05
Policy, Research, Program Evaluation, and Statistics	2,081	2,081	2,08

The Committee recommendation includes bill language providing funding for the following activities in the following amounts:

	Amount
Bishop Museum, Honolulu, HI, for conservation and other projects, including arts education for youth and the study and preservation of the history of Kalaupapa	\$800,000
City of Cedar Rapids, IA, Cedar Rapids, IA, for automating the circulation system at the Cedar Rapids	300,000
Library City of Hagerstown, Hagerstown, MD, for educational programming and displaying the Doleman collec-	500,000
tion	100,000
Delta State University, Cleveland, MS, for library technology upgrades, including the purchase of equip-	
ment	100,000
Dubuque Historical Society, Dubuque, IA, for exhibits relating to the Mississippi River	400,000
Greenville Public Library, Smithfield, RI, for library technology and programs	300,000
Mississippi Children's Museum, Jackson, MS, for exhibits and educational programming	400,000
Mississippi Gulf Coast Community College, Perkinston, MS, for collecting, cataloging, and archiving of	
newspaper and digital media	100,000
Ohr-O'Keefe Museum of Art, Biloxi, MS, for design and exhibits	250,000
Oxford Lafayette County Heritage Foundation, Oxford, MS, for exhibits and design	100,000
Science Center of Iowa, Des Moines, IA, for educational exhibits	400,000
South Dakota School of Mines and Technology, Rapid City, SD, for preservation activities and storage	100,000
Southern Utah University, Cedar City, UT, for exhibits, installations and equipment	400,000

	Amount
Tennessee-Tombigbee Waterway Transportation Museum, Columbus, MS, for exhibit design and digitization of documents	100,000
University of Mississippi, University, MS, for documentation, preservation, restoration, and programming	150.000
related to the American Music Archives	150,000
University of Mississippi, University, MS, for museum education and outreach programs	150,000
Walter Anderson Museum of Art, Ocean Springs, MS, for archive and digitization of collections	150,000
World Food Prize, Des Moines, IA, for exhibits at the Dr. Norman E. Borlaug Hall of Laureates Museum \dots	450,000

MEDICARE PAYMENT ADVISORY COMMISSION

SALARIES AND EXPENSES

Appropriations, 2010	\$11,800,000
Budget estimate, 2011	13,100,000
Committee recommendation	12,700,000

The Committee recommends \$12,700,000 for fiscal year 2011 for the Medicare Payment Advisory Commission [MedPAC]. The comparable funding level for fiscal year 2010 is \$11,800,000 and the budget request is \$13,100,000.

MedPAC was established by Congress as part of the Balanced Budget Act of 1997 (Public Law 105–933) to provide independent policy and technical advice on issues affecting the Medicare program. The budget request included \$400,000 for anticipated provisions in the healthcare reform legislation that were not included in the enacted Patient Protection and Affordable Care Act and these funds are therefore not included in the Committee recommendation.

NATIONAL COUNCIL ON DISABILITY

SALARIES AND EXPENSES

Appropriations, 2010	\$3,271,000
Budget estimate, 2011	3,337,000
Committee recommendation	3,337,000

The Committee recommends \$3,337,000, the same as the fiscal year 2011 budget request, for the National Council on Disability. The comparable fiscal year 2010 funding level is \$3,271,000.

The Council is mandated to make recommendations to the President, the Congress, the Rehabilitation Services Administration, and the National Institute on Disability and Rehabilitation Research on the public issues of concern to individuals with disabilities. The Council gathers information on the implementation, effectiveness, and impact of the Americans with Disabilities Act and looks at emerging policy issues as they affect persons with disabilities and their ability to enter or re-enter the Nation's workforce and to live independently.

NATIONAL HEALTH CARE WORKFORCE COMMISSION

SALARIES AND EXPENSES

Appropriations, 2010	
Budget estimate, 2011	
Committee recommendation	\$3,000,000

The Committee recommendation includes \$3,000,000 for a new National Health Care Workforce Commission, as authorized by section 5101 of the Patient Protection and Affordable Care Act. The budget request did not include funding for this commission.

This commission will serve as a resource to Congress, the President, and State and local entities in evaluating healthcare workforce needs, including assessing education and training activities to determine to what extent the demand for health workers is being met and identifying barriers to improved coordination at the Federal, State, and local levels and recommending changes to address those barriers.

NATIONAL LABOR RELATIONS BOARD

SALARIES AND EXPENSES

Appropriations, 2010	\$283,400,000
Budget estimate, 2011	287,100,000
Committee recommendation	287.100.000

The Committee recommends \$287,100,000, the same as the fiscal year 2011 budget request, for the National Labor Relations Board [NLRB]. The comparable fiscal year 2010 funding level is \$283,400,000.

The NLRB is a law enforcement agency that adjudicates disputes under the National Labor Relations Act. The mission of the NLRB is to carry out the statutory responsibilities of the National Labor Relations Act as efficiently as possible and in a manner that gives full effect to the rights afforded to employees, unions, and employers under the act.

NATIONAL MEDIATION BOARD

SALARIES AND EXPENSES

Appropriations, 2010	\$13,463,000
Budget estimate, 2011	13,772,000
Committee recommendation	13,772,000

The Committee recommends \$13,772,000, the same as the fiscal year 2011 budget request, for the National Mediation Board [NMB]. The comparable fiscal year 2010 funding level is \$13,463,000.

The NMB protects interstate commerce as it mediates labor-management relations in the railroad and airline industries under the Railway Labor Act. It mediates collective bargaining disputes, determines the choice of employee bargaining representatives through elections, and administers arbitration of employee grievances.

OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

SALARIES AND EXPENSES

Appropriations, 2010	\$11,712,000
Budget estimate, 2011	12,051,000
Committee recommendation	12,051,000

The Committee recommends \$12,051,000, the same as the fiscal year 2011 budget request, for the Occupational Safety and Health

Review Commission. The comparable fiscal year 2010 funding level is \$11,712,000.

The Commission serves as a court to justly and expeditiously resolve disputes between the Occupational Safety and Health Administration [OSHA] and employers charged with violations of health and safety standards enforced by OSHA.

RAILROAD RETIREMENT BOARD

DUAL BENEFITS PAYMENTS ACCOUNT

Appropriations, 2010	\$64,000,000
Budget estimate, 2011	57,000,000
Committee recommendation	57,000,000

The Committee recommends \$57,000,000, the same as the fiscal year 2011 budget request, for the Dual Benefits Payments Account. Of these funds, an estimated \$3,000,000 is from income taxes on vested dual benefits. The comparable fiscal year 2010 funding level is \$64,000,000.

This appropriation provides for vested dual benefit payments to beneficiaries covered under both the railroad retirement and Social Security systems. This separate account, established for the payment of dual benefits, is funded by general fund appropriations and income tax receipts of vested dual benefits.

FEDERAL PAYMENTS TO THE RAILROAD RETIREMENT ACCOUNT

Appropriations, 2010	\$150,000
Budget estimate, 2011	150,000
Committee recommendation	150,000

The Committee recommends \$150,000 for fiscal year 2011 for interest earned on nonnegotiated checks. This is the same as the comparable fiscal year 2010 funding level and the fiscal year 2011 budget request.

LIMITATION ON ADMINISTRATION

Appropriations, 2010	\$109,073,000
Budget estimate, 2011	110,573,000
Committee recommendation	110,573,000

The Committee recommends \$110,573,000, the same as the fiscal year 2011 budget request, for the administration of railroad retirement/survivor and unemployment/sickness benefit programs. The comparable fiscal year 2010 funding level is \$109,073,000.

The Board administers comprehensive retirement-survivor and unemployment-sickness insurance benefit programs for the Nation's railroad workers and their families. This account limits the amount of funds in the railroad retirement and railroad unemployment insurance trust funds that may be used by the Board for administrative expenses.

LIMITATION ON THE OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2010	\$8,186,000
Budget estimate, 2011	8,936,000
Committee recommendation	8,936,000

The Committee recommends \$8,936,000, the same as the fiscal year 2011 budget request, for the Office of the Inspector General. The comparable fiscal year 2010 funding is \$8,186,000.

SOCIAL SECURITY ADMINISTRATION

PAYMENTS TO SOCIAL SECURITY TRUST FUNDS

Appropriations, 2010	\$20,404,000
Budget estimate, 2011	21,404,000
Committee recommendation	21,404,000

The Committee recommends \$21,404,000, the same as the fiscal year 2011 budget request, in mandatory funds for payments to Social Security trust funds. The comparable fiscal year 2010 funding level is \$20,404,000. This amount reimburses the old age and survivors and disability insurance trust funds for special payments to certain uninsured persons, costs incurred administering pension reform activities, and the value of the interest for benefit checks issued but not negotiated. This appropriation restores the trust funds to the same financial position they would have been in had they not borne these costs and were properly charged to the general funds.

SUPPLEMENTAL SECURITY INCOME PROGRAM

Appropriations, 2010	\$34,742,000,000
Budget estimate, 2011	40,513,000,000
Committee recommendation	40,513,000,000

The Committee recommends an appropriation of \$40,513,000,000, the same as the fiscal year 2011 budget request, for the supplemental security income [SSI] program. This is in addition to the \$16,000,000,000 appropriated last year as an advance for the first quarter of fiscal year 2011. The fiscal year 2010 funding level is \$34,742,000,000. The Committee also recommends an advance appropriation of \$13,400,000,000 for the first quarter of fiscal year 2012 to ensure uninterrupted benefits payments. The program supported by level $_{\mathrm{the}}$ Committee recommendation is \$56,513,000,000, the same amount proposed in the budget request. The comparable fiscal year 2010 program level is \$50,142,000,000. The majority of the increase is due to the timing of monthly benefit payments that will result in 13 monthly benefit payments in fiscal year 2011, compared to the normal 12 in fiscal year 2010. Except for resources needed for program administration, this appropriation represents mandatory funding.

The SSI program guarantees a minimum level of income to financially needy individuals who are aged, blind, or disabled. In fiscal year 2011, the SSI program will provide an average benefit payment of just over \$500 to almost 8 million such individuals allowing them to meet basic needs. In addition to benefit payments, these funds support beneficiary services including vocational rehabilitation and return-to-work activities; research and demonstration projects; and costs to administer the program.

Beneficiary Services

The Committee recommends \$60,000,000, the same as the budget request, in mandatory funds for beneficiary services. The com-

parable fiscal year 2010 funding level is \$49,000,000. These funds reimburse Vocational Rehabilitation [VR] agencies for successfully rehabilitating disabled SSI recipients by helping them achieve and sustain productive, self-supporting, work activity. Funds also support the Ticket to Work program that provides SSI recipients with a ticket to offer employment networks [EN], including VR agencies, in exchange for employment and support services. Instead of reimbursing ENs for specific services, the Ticket to Work program pays ENs based on recipients achieving certain milestones and outcomes.

Research and Demonstration Projects

The Committee recommendation includes \$43,000,000, the same as the budget request, in mandatory funds for research and demonstration projects conducted under sections 1110, 1115, and 1144 of the Social Security Act. The comparable fiscal year 2010 funding level is \$49,000,000. Because of the availability of unobligated balances, these funds will support a fiscal year 2011 program level of \$71,900,000 compared to \$54,300,000 in fiscal year 2010.

These funds support a variety of research and demonstration projects designed to improve the disability process; promote selfsufficiency and assist individuals in returning to work; encourage savings and retirement planning through financial literacy; and generally provide analytical and data resources for use in preparing and reviewing policy proposals.

Administration

The Committee recommendation includes \$3,775,000,000, the same as the budget request, for SSI administrative expenses. The comparable fiscal year 2010 funding level is \$3,442,000,000. This appropriation funds the SSI program's share of administrative expenses incurred through the Limitation on Administrative Expenses account and includes \$545,000,000 in program integrity funding.

LIMITATION ON ADMINISTRATIVE EXPENSES

Appropriations, 2010	\$11,446,500,000
Budget estimate, 2011	12,378,863,000
Committee recommendation	12,378,863,280

The Committee recommends \$12,378,863,280, the same as the fiscal year 2011 budget request, for the Social Security Administration's limitation on administrative expenses [LAE]. The comparable fiscal year 2010 funding level is \$11,446,500,000. The Recovery Act includes an additional \$500,000,000 for SSA's limitation on administrative expenses available through fiscal year 2010.

This account provides resources for SSA to administer the old age and survivors insurance [OASI], the disability insurance [DI], and the supplemental security income programs [SSI], and to support the Center for Medicare and Medicaid Services in administering its programs. Funds also support automation and information technology investments. The LAE account is funded by the Social Security and Medicare trust funds for their share of administrative expenses, the general fund for the SSI program's share of administrative expenses, and applicable user fees. The increase in funding over fiscal year 2011 will allow SSA to continue to work toward eliminating the hearings backlog by the end of fiscal year 2013 while processing an unprecedented level of disability claims resulting from the economic downturn. With these funds, SSA will be able to process over 3.3 million initial disability claims and almost 800,000 disability hearings in fiscal year 2011, up from 2.6 million and 560,000, respectively, in fiscal year 2008. Additional funds also support increased program integrity efforts.

The Committee recommendation also includes a rescission of \$250,000,000 from unobligated balances of prior-year LAE appropriated funds. SSA has authority to carry over these unobligated balances to invest in information technology infrastructure and software. The Committee supports these investments and the use of these funds for this purpose but notes a significant buildup of unobligated balances that are not expected to be used in fiscal year 2011.

Program Integrity

Within the total for LAE, the Committee recommendation includes not less than \$796,000,000, the same amount as the budget request, for program integrity activities, including conducting continuing disability reviews and redeterminations of SSI eligibility. The comparable fiscal year 2010 funding level is \$758,000,000. Within this amount, up to \$10,000,000 may be used to complete implementation of a financial asset verification initiative.

Social Security Advisory Board

Within the total for LAE, the Committee recommendation includes not less than \$2,300,000 for the Social Security Advisory Board for fiscal year 2011. This amount is the same as the budget request and the comparable fiscal year 2010 funding level.

User Fees

Within the total for LAE, the Committee recommendation includes \$186,000,000 for administrative activities funded from user fees. Of this amount, \$185,000,000 is derived from fees paid to SSA by States that request SSA to administer State SSI supplementary payments and \$1,000,000 is generated from a fee payment process for nonattorney representatives of claimants.

Acquisition Workforce

Within the total for LAE, the Committee recommendation also includes \$1,863,280, as requested by the administration, to increase SSA's acquisition workforce capacity and capabilities. This funding is provided in section 521 within title V, general provisions.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2010	\$102,682,000
Budget estimate, 2011	106,122,000
Committee recommendation	106,122,000

The Committee recommends \$106,122,000, the same as the fiscal year 2011 budget request, for the Office of the Inspector General. The comparable fiscal year 2010 funding level is \$102,682,000. The

recommendation includes a general fund appropriation of \$30,000,000 together with an obligation limitation of \$76,122,000 from the Federal old-age and survivors insurance trust fund and the Federal disability insurance trust fund.

TITLE V—GENERAL PROVISIONS

The Committee recommendation includes provisions which: authorize transfers of unexpended balances (sec. 501); limit funding to 1 year availability unless otherwise specified (sec. 502); limit lobbying and related activities (sec. 503); limit official representation expenses (sec. 504); prohibit funding of any program to carry out distribution of sterile needles for the hypodermic injection of any illegal drug without the approval of appropriate local officials (sec. 505); clarify Federal funding as a component of State and local grant funds (sec. 506); limit use of funds for abortion (sec. 507 and sec. 508); restrict human embryo research (sec. 509); limit the use of funds for promotion of legalization of controlled substances (sec. 510); prohibit the use of funds to promulgate regulations regarding the individual health identifier (sec. 511); limit use of funds to enter into or review contracts with entities subject to the requirement in section 4212(d) of title 38, United States Code, if the report required by that section has not been submitted (sec. 512); prohibit transfer of funds made available in this act to any department, agency, or instrumentality of the U.S. Government, except as otherwise provided by this or any other act (sec. 513); prohibit Federal funding in this act for libraries and elementary and secondary schools unless they are in compliance with the Children's Internet Protection Act (sec. 514 and sec. 515); maintain a procedure for reprogramming of funds (sec. 516); prohibit candidates for scientific advisory committees from having to disclose their political activities (sec. 517); require the Secretaries of Labor, Health and Human Services, and Education to submit a report on the number and amounts of contracts, grants, and cooperative agreements awarded by the Departments on a noncompetitive basis (sec. 518); prohibit the use of funds for first-class travel (sec. 519); prohibit the use of funds for a grant or contract exceeding \$5,000,000 unless the prospective contractor or grantee makes certain certifications regarding Federal tax liability (sec. 520); and provide \$1,863,280 to the Social Security Administration to increase its acquisition workforce capacity and capabilities (sec. 521).

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee reports on general appropriations bills identify each Committee amendment to the House bill "which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session."

The Committee recommends funding for the following programs and activities which currently lack authorization: No Child Left Behind Act; Special Olympics Sport and Empowerment Act of 2004; Early Learning Challenge Fund; Workforce Investment Act; Homeless Veterans Reintegration Program; Universal Newborn Hearing Screening; Organ Transplantation; Family Planning; Rural Health programs; Nurse Reinvestment Act; Public Health Improvement Act; Healthy Start; Telehealth; Health Professions Education Partnership Act; Children's Health Act; Women's Health Research and Prevention Amendments of 1998; Birth Defects Prevention, Preventive Health Amendments of 1993; Substance Abuse and Mental Health Services programs, except for Depression Centers of Excellence and grants for Primary and Behavioral Healthcare Integration; Low Income Home Energy Assistance Program; Refugee and Entrant Assistance programs; Child Abuse Prevention; Adoption Opportunities; Child Care and Development Block Grant; Family violence programs; Developmental Disabilities programs; Voting Access for Individuals with Disabilities; Native American Pro-grams; Community Services Block Grant; Rural Facilities; Indi-vidual Development Accounts; Community Economic Development; Alzheimer's Disease Demonstration Grants; Adolescent Family Life; Office of Disease Prevention and Health Promotion; Rehabilitation Services and Disability Research, except sections 4, 5, and 6 of the Assistive Technology Program; Institute of Education Sciences; Corporation for Public Broadcasting; Museum and Library Services Act programs; and National Council on Disability.

COMPLIANCE WITH PARAGRAPH 7(c), RULE XXVI OF THE STANDING RULES OF THE SENATE

Pursuant to paragraph 7(c) of rule XXVI, on July 29, 2010, theCommittee ordered reported an original bill (S. 3686) making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2011, and for other purposes, subject to amendment and subject to the Committee spending guidance; and authorized the chairman of the committee or the chairman of the subcommittee to offer the text of the Senate-reported bill as a committee amendment in the nature of a substitute to the House companion measure, by a recorded vote of 18–12, a quorum being present. The vote was as follows:

Yeas Chairman Inouve Mr. Leahy Mr. Harkin Ms. Mikulski Mr. Kohl Mrs. Murray Mr. Dorgan Mrs. Feinstein Mr. Durbin Mr. Johnson Ms. Landrieu Mr. Reed Mr. Lautenberg Mr. Nelson Mr. Pryor Mr. Tester Mr. Specter Mr. Brown

Nays Mr. Cochran Mr. Bond Mr. McConnell Mr. Shelby Mr. Gregg Mr. Bennett Mrs. Hutchison Mr. Brownback Mr. Alexander Ms. Collins Mr. Voinovich Ms. Murkowski

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or a joint resolution repealing or amending any statute include "(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee."

TITLE 20—EDUCATION

CHAPTER 44—CAREER AND TECHNICALEDUCATION

SUBCHAPTER I—CAREER AND TECHNICAL EDUCATION ASSISTANCE TO THE STATES

PART A—ALLOTMENT AND ALLOCATION

§2324. National activities

(a) Program performance information

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(b) Miscellaneous provisions

(1) Collection of information at reasonable cost

The Secretary shall take such action as may be necessary to secure at reasonable cost the information required by this subchapter. To ensure reasonable cost, the Secretary, in consultation with the National Center for Education Statistics, the [Office of Vocational and Adult Education] Office of Career, Technical, and Adult Education, and an entity assisted under section 2328 of this title (if applicable), shall determine the methodology to be used and the frequency with which information is to be collected.

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CHAPTER 48—DEPARTMENT OF EDUCATION

SUBCHAPTER II—ESTABLISHMENT OF THE DEPARTMENT

§ 3412. Principal officers

(a) Deputy Secretary of Education

*

(b) Assistant Secretaries and General Counsel

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(1) * * * (A) * * *

(B) an [Assistant Secretary for Postsecondary Education] Assistant Secretary for Career, Technical, and Adult Education;

(h) Coordination of literacy related functions by [Assistant Secretary for Vocational and Adult Education] Assistant Secretary for Career, Technical, and Adult Education

The [Assistant Secretary for Vocational and Adult Education] Assistant Secretary for Career, Technical, and Adult Education, in addition to performing such functions as the Secretary may prescribe, shall have responsibility for coordination of all literacy related programs and policy initiatives in the Department. The [Assistant Secretary for Vocational and Adult Education] Assistant Secretary for Career, Technical, and Adult Education shall assist in coordinating the related activities and programs of other Federal departments and agencies.

* * * * * * *

§ 3416. [Office of Vocational and Adult Education] Office of Career, Technical, and Adult Education

There shall be in the Department an [Office of Vocational and Adult Education] Office of Career, Technical, and Adult Education, to be administered by the [Assistant Secretary for Vocational and Adult Education] Assistant Secretary for Career, Technical, and Adult Education appointed under section 3412(b) of this title. The Assistant Secretary shall administer such functions affecting [vocational and adult education] career, technical, and adult education as the Secretary shall delegate, and shall serve as principal adviser to the Secretary on matters affecting [vocational and adult education] career, technical, and adult education] career, technical, and adult education] career, technical, and adult education. The Secretary, through the Assistant Secretary, shall also provide a unified approach to rural education and rural family education through the coordination of programs within the Department and shall work with the Federal Interagency Committee on Education to coordinate related activities and programs of other Federal departments and agencies.

TITLE 29—LABOR

CHAPTER 12—DEPARTMENT OF LABOR

§ 563. Working capital fund; establishment; availability; capitalization; reimbursement

There is established a working capital fund, to be available without fiscal year limitation, for expenses necessary for the maintenance and operation of (1) a central reproduction service; (2) a central visual exhibit service; (3) a central supply service for supplies and equipment for which adequate stocks may be maintained to meet in whole or in part the requirements of the Department; (4) a central tabulating service; (5) telephone, mail and messenger services; (6) a central accounting and payroll service; and (7) a central laborers' service: Provided, That any stocks of supplies and equipment on hand or on order shall be used to capitalize such fund: Provided further, That such fund shall be reimbursed in advance from funds available to bureaus, offices, and agencies for which such centralized services are performed at rates which will return in full all expenses of operation, includingreserves for accrued annual leave and depreciation of equipment: [Provided further, That within the Working Capital Fund, there is established an Investment in Reinvention Fund (IRF), which shall be available to invest in projects of the Department designed to produce measurable improvements in agency efficiency and significant taxpayer savings. Notwithstanding any other provision of law, the Secretary of Labor may retain retain up to \$3,900,000 of the unobligated balances in the Department's annual Salaries and Expenses accounts as of September 30, 1995, and transfer those amounts to the IRF to provide the initial capital for the IRF, to remain available until expended, to make loans to agencies of the Department for projects designed to enhance productivity and generate cost savings. Such loans shall be repaid to the IRF no later than September 30 of the fiscal year following the fiscal year in which the project is completed. Such repayments shall be deposited in the IRF, to be available without further appropriation action]: Provided further, That the Secretary of Labor may transfer annually an amount not to exceed \$3,000,000 from unobligated balances in the Department's salaries and expenses accounts, to the unobligated balance of the Working Capital Fund, to be merged withsuch Fund and used for the acquisition of capital equipment and the improvement of financial management, information technology and other support systems, and to remain available until expended: Provided further, That the unobligated balance of the Fund shall not exceed \$20,000,000..1

¹So in original.

DEPARTMENT OF EDUCATION ORGANIZATION ACT, PUBLIC LAW 96–88

 $\ensuremath{\mathsf{SECTION}}$ 1. This Act may be cited as the Department of Education Organization Act.

TITLE II—ESTABLISHMENT OF THE DEPARTMENT

Sec. 201. Establishment. [Sec. 206. Office of Vocational and Adult Education.] Sec. 206. Office of Career, Technical, and Adult Education.

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget	authority	Outla	ays	
	Committee guidance ¹	Amount of bill	Committee guidance ¹	Amount of bill	
Comparison of amounts in the bill with Committee spending guidance to its subcommittees for 2011: Subcommittee on Labor, Health and Human Services, Education, and related agencies:					
Mandatory	NA	563,862	NA	² 561,798	
Discretionary	169,626	³ 169,626	NA	² 206,564	
Projection of outlays associated with the recommendation:					
2011				⁴ 63,541	
2012				74,052	
2013				15,972	
2014				3,670	
2015 and future years				622	
Financial assistance to State and local governments for					
2011	NA	326,539	NA	294,233	

¹There to no section 302(a) allocation to the Committee for fiscal year 2011

³ Includes outlays from prior-year budget authority. ³ This amount does not include \$5.51 billion that is assumed by the Budget Committees, but is not provided in the bill.

⁴ Excludes outlays from prior-year budget authority.

NA: Not applicable.

DISCLOSURE OF CONGRESSIONALLY DIRECTED SPENDING ITEMS

The Constitution vests in the Congress the power of the purse. The Committee believes strongly that Congress should make the decisions on how to allocate the people's money.

As defined in Rule XLIV of the Standing Rules of the Senate, the term "congressional directed spending item" means a provision or report language included primarily at the request of a Senator, providing, authorizing, or recommending a specific amount of discre-tionary budget authority, credit authority, or other spending authority for a contract, loan, loan guarantee, grant, loan authority, or other expenditure with or to an entity, or targeted to a specific State, locality or congressional district, other than through a statutory or administrative, formula-driven, or competitive award process.

For each item, a Member is required to provide a certification that neither the Member nor the Senator's immediate family has a pecuniary interest in such congressionally directed spending item. Such certifications are available to the public on the Web site the Senate Committee on Appropriations of (www.appropriations.senate.gov/senators.cfm).

Following is a list of congressionally directed spending items included in the Senate recommendation discussed in this report, along with the name of each Senator who submitted a request to the Committee of jurisdiction for each item so identified. Neither the Committee recommendation nor this report contains any limited tax benefits or limited tariff benefits as defined in rule XLIV.

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	Requesting member	Cochran, Wicker	Burr, Hagan	Murkowski	Mikulski, Cardin	Murkowski	Cornyn	Kohl	Leahy	Durbin	Collins, Snowe	Durbin	Durbin	Reid	Gillibrand	Reid	Reid	Voinovich, Sherrod Brown
	Funding	\$200,000	\$200,000	\$100,000	\$1,000,000	\$100,000	\$110,000	\$300,000	\$200,000	\$200,000	\$250,000	\$500,000	\$300,000	\$25,000	\$150,000	\$750,000	\$300,000	\$150,000
congressionally directed spending items	Project	3-D School, Petal, MS, for a model dyslexia intervention program	Appalachian State University, Boone, NC, for college preparation and access programs for high school students.	Avant-Garde Learning Foundation, Anchorage, AK, to improve educational	ouccurse for chinater in low-performing solution approvances. Baltimore City Public Schools, Baltimore City, MD, for support of alter- network education programs for academically chillenged students, which	may include equipment and technology. Big Brothers Big Sisters, Anchorage, AK, for youth mentoring programs for	underserved, action populations in Alaska. Big Thought, Dallas, TX, for afterschool programs	Boys & Girls Club of Greater Milwaukee, Milwaukee, WI, for support of	early literacy and related programming. Catamount Arts, St. Johnsbury, VT, for support of arts education	Chaddock, Quincy, IL, for support of special education activities	Challenger Learning Center, Bangor, ME, for science, technology, engineer-	ing, and mathematics programs. Chicago Public Schools, Chicago, IL, for a youth violence prevention initia-	tive. Chicago School of Professional Psychology, Chicago, IL, for support of	atterschool programming. Churchill County School District, Fallon, NV, for STEM Curriculum and	technology improvements. City University of New York-York College, Jamaica, NY, for support of science and aerospace-based education, which may include acquisition	or technology. Clark County School District, Las Vegas, NV, for support of a school for highly endored by the second	mginy griced students. Clark County School District, Las Vegas, NV, for support of the Family	ceaters with mittainte. Cleveland Metropolitian School District, Cleveland, OH, for science edu- cation programs, including the purchase of equipment.
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CONGRESSIONALLY DIRECTED SPENDING ITEMS

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Requesting member	Voinovich, Sherrod Brown	Murray	Lincoln, Pryor	Murkowski	Durbin, Burris	Voinovich, Sherrod Brown	Cochran, Wicker	Cochran, Wicker	Cochran. Wicker	Harkin	Specter	Collins, Snowe	Boxer	Collins	Feinstein	Reid	Murray	Bingaman, Tom Udall
Funding	\$100,000	\$150,000	\$200,000	\$250,000	\$250,000	\$100,000	\$150,000	\$300,000	\$300.000	\$750 000	\$100,000	\$225,000	\$450,000	\$250,000	\$175,000	\$150,000	\$100,000	\$200,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Cleveland Metropolitan School District, Cleveland, OH, to improve math,	science, recimonogy, and language skins unough music euocation. Communities In Schools of Spokane County, Spokane, WA, for support of	mentoring programs. Connect Arkansas, Little Rock, AR, to purchase and equip mobile	broadband labs. Cook Intel Tribal Council, Anchorage, AK, to increase literacy and math	skins or Araskan surgents. Cristo Rey, Chicago IL, for educational programming, which may include worldnshin schrifting	evaluation activities. Cuyahoga County Office of Early Childhood/Invest in Children, Cleveland, Of Are an activitidhood aduration initiative including scholarshins.	Delta Arts Alliance, Inc., Drew, MS, for arts education programs	Delta State University, Cleveland, MS, for a training program for early	childhood educators. Delta State University. Cleveland, MS. for science and environmental edu-	cation and outreach activities. Des Moines Indenendent Community School District Des Moines IA to in-	crease access to and quality of early childhood education programs. Drueding Center, Philadelphia, PA, to support educational programs, in-	cluding staff, technology upgrades, and the purchase of equipment. Eastern Maine Development Corporation, Bangor, ME, for youth career	pathway programs. Eden Housing, Hayward, CA, for support of an after school program	Educare Central Maine, Waterville, ME, to support early childhood edu-	cation activities, including the purchase of equipment. Educating Young Minds, Los Angeles, CA, for educational programming,	which may include the acquisition of technology. Education Alliance of Washoe County, Reno, NV, for support of an after-	school tutoring program. El Centro de la Raza, Seattle, WA, for support of counseling, tutoring, and	eurcational programming. Elev& New Mexico, New Mexico Community Foundation, Albuquerque, NM, for support of extended day learning programs in New Mexico.
CONGRESSIO	Elementary & Secondary Education (in-	Cludes FIE). Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	Cluues rie). Elementary & Secondary Education (in-	Elementary & Secondary Education (in- cludes FIF)	Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	Secondary Education	Secondary Education	Secondary Education	cludes FIE). Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	cludes ric). Elementary & Secondary Education (in-	cludes FIE). Elementary & Secondary Education (in-	cludes rit.). Elementary & Secondary Education (in- cludes FIE).
Agency	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education					Department of Education	Department of Education	Department of Education	Department of Education	Department of Education

Bingaman, Tom Udall	Harkin	Bennet, Mark Udall	Voinovich	Boxer	Durbin	Bond	Bennet	Reid	Lugar	Boxer	Harkin	Harkin	Harkin, Schumer	Voinovich	Kaufman, Carper	edeal anneal	поиуе, Акака	Reid	Reid	
\$150,000	\$500,000	\$100,000	\$150,000	\$300,000	\$200,000	\$450,000	\$100,000	\$150,000	\$100,000	\$300,000	\$6,000,000	\$300,000	\$400,000	\$150,000	\$50,000	000 0014	\$/00,000	\$150,000	\$50,000	-
ENLACE New Mexico, Albuquerque, NM, for support of academic engage- ment and completion programs in New Mexico	ы	Falcon School District 49, Falcon, CO, to support a science, technology,	Fri	chase of equipment. Give Every Child A Chance, Manteca, CA, for the expansion of the Give	Every Child A Chance program. Glenwood School for Boys and Girls, St. Charles, IL, for training and devel- opment costs associated with the Life Stabilization project. which may	He	Blams, meruting are purchase or equipment. History Colorado, Denver, CO, for support of the Student to Citizen Initia-	tive. Humboldt County School District, Winnemucca, NV, for support of tech-	nology-based instruction. Indiana State University, Terre Haute, IN, for curriculum development and	Inr	at-risk youth. Iowa Department of Education, Des Moines, IA, to continue the Harkin	Grant program. Iowa State Education Association, Des Moines, IA, for professional develop-	ment for teachers on 21st century skills. Jazz at Lincoln Center, New York, NY, for music education programs	Jot	Jur	programming and related science, technology, and engineering edu- cation activities.	nauar economic Development Board, Linue, m., 101 Science, teciniology, en- gineering: and math education.	Lai	technology and equipment. Lincoln County School District, Panaca, NV, for support of afterschool pro- remning	-
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	Requesting member	John son	Reid	Kohl	Dorgan, Conrad	Mikulski	Inouye, Akaka	Specter	Harkin	Harkin	Cochran, Wicker	Cochran, Wicker	Cochran, Wicker	Cochran, Wicker	Cochran, Wicker	Wicker	Cochran, Wicker
	Funding	\$100,000	\$150,000	\$500,000	\$200,000	\$800,000	\$800,000	\$100,000	\$400,000	\$100,000	\$100,000	\$500,000	\$500,000	\$100,000	\$200,000	\$850,000	\$500,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Project	Lower Brule Sioux Tribe, Lower Brule, SD, for support of afterschool pro- meanming which may include the accurication of aquipment	Lyon County School District, Yerington, NV, for support of early education	services. Madison Metropolitan School District, Madison, WI, for educational pro-	gramming. Marketplace of Ideas/Marketplace for Kids, Inc., Bismarck, ND, for entre-	preneursnip education. Maryland Bio Foundation, Rockville, MD, for support of science, technology, engineering, and mathematics education through a mobile laboratory	outreach program, which may include purchase of equipment. Maul Economic Development Board, Kihei, HI, for engaging girls and his- torically underspresented students in science, technology, engineering,	and math equecation. Mentoring Partnership of Southwestern PA, Pittsburgh, PA, for support of mentoring programs, which may include equipment and technology ac-	utusituoiis. Meskwaki Nation, The Sac & Fox Tribe of the Mississippi in Iowa, Tama, In 64 row of education environment	ns, for a currunary based equeation currunum. Mid-low Community Action, Inc., Marshalltown, IA, for literacy activities	on ple-school aged chindren. Mississippi Band of Choctaw Indians, Choctaw, MS, for academic support,	ucorne, memoring, and arterschool programs. Mississippi Building Blocks, Ridgeland, MS, for a state-wide early child-	Nisous equation pogram. Mississippi Council on Economic Education, Jackson, MS, for teacher train-	Ing for economics, rinarcical ineracy and entrepreneurial education. Mississippi Historical Society, Jackson, MS, to develop educational mate- ricals for itstrom instruction	Mississippi Museum of Natural Science Foundation, Jackson, MS, for	science euroation eximuts and outreach programs. Mississippi State University, Mississippi State, MS, for a dropout preven-	ton program, including the purchase or equipment. Mississippi State University, Mississippi State, MS, for an early childhood teacher education program, including the purchase of equipment and materials.
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\$250,000 Cochran, Wicker	Cochran, Wicker	Baucus, Tester	Bond	Burr, Hagan	Reid	Reid	Reid	Boxer	Cochran, Wicker	Harkin	Inouye, Akaka	Cochran, Wicker	Inouye, Akaka	Specter	Reed, Whitehouse	Reid	Lugar
\$250,000	\$200,000	\$100,000	\$850,000	\$150,000	\$2,000,000	\$125,000	\$350,000	\$300,000	\$100,000	\$300,000	\$400,000	\$250,000	\$300,000	\$100,000	\$250,000	\$100,000	\$100,000 Lugar
Mississippi University for Women, Columbus, MS, for development of at- risk wurth proceams	Mississippi University for Women, Columbus, MS, for science and math programs for K-12 students.	Montran Digital Academy, Missoula, MT, for support of online learning ac- tivities	National Center for Parents as Teachers, St. Louis, MO, to support home usiteteion corresponding the surveyage of animonat	visuation programs, including the purchase or equipment. NC STEM community Colaborative, fort Bragg Region, Research Triangle Park, NC, for science, technology, engineering, and math programs, in-	cluding the purchase of equipment. Nevada Department of Education, Carson City, NV, for a demonstration of public school facilities repair and construction, which may include sub-	grants. Nevada Parents Empowering Parents, Las Vegas, NV, to provide edu- cetional workehons to narants of etudants with dissibilities	Nye County School District Pahrump, NY, to support instructional/interven- tion school District Pahrump, NY, to support instructional/interven- tion school sints and the nuclease of instructional materials	Dakland Unified School District, Oakland, CA, for the Oakland Truancy	Intervention and currentional Support Frogram. Operation Shoesting, Jackson, MS, for afterschool and summer community	oureach and euroation programs. Orchestra lowa, Cedar Rapids, IA, to support a music education program	Pacific Islands Center for Educational Development, Pago Pago, American Samaa for nooraam development	Parents for Public Schools of Jackson, Inc., Jackson, MS, for professional development, development of materials, and programs to increase stu- dard polynoment and readingtion rates in low performing schools	very active server and gradient acts in the performing servers. Polynesian Voyaging Society, Honolulu, HI, for educational programs	Project HOME, Philadelphia, PA, for afterschool programs	Providence Community Library, Providence, RI, for support of the Out-of- School Learning Onontrunities proviam	Public Education Forentian Las Provinces NV, for support of a clearing- huno for classroom formations and materials	nuces on viscouries suppres on materials. Saint Mary's College, Notre Dame, IN, for tutoring and mentoring programs for at-risk youth.
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Agency		Account			Project	Funding	Requesting member	
Department of Education	<u>مح</u>	Secondary	Education	(in-	San Francisco Redevelopment Agency, San Francisco, CA, for a college	\$250,000	Feinstein	
Department of Education	്ഷ്ം	Secondary	Education	(in-	preparatory program, in partnersinp with College Irack. Save the Children, Washington, DC, for a rural literacy program in Mis-	\$100,000	Cochran, Wicker	
Department of Education		condary	Secondary Education	(in-	sussipply. Save the Children, Westport, CT, for support of the Louisiana Early Child	\$200,000	Landrieu	
Department of Education		condary	Secondary Education	(in-	Development program. SEED Foundation, Washington, DC, for the SEED School of Louisiana Ex-	\$250,000	Landrieu	
Department of Education		condary	Secondary Education	(in-	ploratory project. Seton Hall University, South Orange, NJ, for an urban school improvement	\$350,000	Lautenberg, Menendez	
Department of Education	cludes FIE). Elementary & Se cludes FIE).	condary	Secondary Education	(in-	program. Southeastern Louisiana University, Hammond, LA, to increase the number of certififed teachers and support other activities designed to improve	\$100,000	Landrieu	
Department of Education	Elementary & Se cludes FIE).	condary	Secondary Education	(in-	student achievement. Southwest Washington Workforce Development Council, Vancouver, WA, for support of professional development in science and mathematics edu-	\$100,000	Murray	2
Department of Education	Elementary & Se	Secondary	Education	-ui)	catton. Syracuse University, Syracuse, NY, for support of afterschool programming	\$500,000	Gillibrand, Schumer	14
Department of Education		Secondary	Education	-ui)	Technology Assessment for Basic Skills, Inc., Des Moines, IA, for continu-	\$2,000,000	Harkin	
Department of Education	cludes FIE). Elementary & Se cludes FIE).	Secondary	Education	(in-	The Tibetan Community of New York and New Jorgan. The Tibetan Community of New York and New Jersey, Inc., New York, NY, for the Tibetan Community Center Youth Education and Empowerment	\$100,000	Schumer	
Department of Education	Elementary & Se	condary	Secondary Education (in-		Frogram. Thrive By Five Washington, Seattle, WA, for support of early childhood edu-	\$300,000	Murray	
Department of Education		condary	Secondary Education	(in-	Unital School Distrimung. Unital School District, Vernal, UT, for academic achievement and credit	\$106,000	Hatch	
Department of Education		condary	Secondary Education	(in-	recovery programs, including ure purchase or equipment. University of Mississippi, University, MS, for teacher training for elemen-	\$300,000	Cochran, Wicker	
Department of Education		condary	Secondary Education	(in-	up incurrentatus equivation. University of Southern Mississippi, Hattiesburg, MS, for teacher training in the science, technology, engineering, math, language, and creative arts	\$400,000	Cochran, Wicker	
Department of Education	Elementary & Se	condary	Secondary Education	(in-	fields. Uttah State Office of Education, Salt Lake City, UT, for teacher develop- ment neurorans.	\$300,000	Bennett	
Department of Education		condary	Secondary Education (in-	(in-	Utah Symphony, Sait Lake City, UT, for music education programs	\$106,000	Hatch	

Reid	Cochran	Leahy	Cochran. Wicker		Lincoln, Pryor	lsakson, Chambliss		Hutchison	Johnson	Fain stain		Boxer		boxer	Boxer	Leahy		Schumer	Collins, Snowe	Murray, Cantwell		Voinovich	Harkin, Grassley Crapo, Risch	
\$500,000	\$200,000	\$175,000	\$250.000		\$150,000	\$200,000		\$200,000	\$450,000 Johnson	\$500 000	000,0004	\$150,000	Å 2F0 000	000,005¢	\$150,000	\$300,000		\$200,000	\$285,000	\$1,000,000		\$150,000	\$300,000 \$100.000	
Washoe County School District, Reno, NV, for support of educational activi-	ues. World Science Festival, New York, NY, for science and environmental edu-	cation and outreach activities. Young Writers Project, Inc., Winooski, VT, for support educational program-	ming and teaching training. Alcorn State University. Alcorn State. MS. for curriculum develooment and	the purchase of equipment related to graduate technical programs.	Arkansas Baptist College, Little Rock, AR, for the Center for Entrepreneur- ship.	Armstrong Atlantic State University Cyber Security Research Foundation, Savannah GA for the Cyber Intelligence and Counter Terrorism Pro-	gram, including the purchase of equipment.	Baylor University, Waco, TX, for technology upgrades at the Baylor Re- meach and Innovation Collaborative, including the purchase of equip-	ment. Black Hills State University, Spearfish, SD, for equipment to enhance edu-	cation programs. Palifernia Community Pollaras Phancellor's Office. Sacramento PA to ev.	pand a program providing academic support to veterans.	California State University, Bakersfield, CA, for support of the nursing pro-	gram.	cantornia state university, cong beach, c.a. for start resources for the Metro Academies Initiative.	California State University, Sacramento, CA, for the Veterans Education	Transitional Supports program. Castleton State College, Castleton, VT, to expand the Principal Training	and School Leadership Program.	Cazenovia College, Cazenovia, NY, for curriculum development and job	Central Maine Community College, Auburn, ME, for job training programs	Contral Washington University, Ellensburg, WA, to launch the state's first	bachelor's degree program in clean energy.	Cincinnati State Technical and Community College, Cincinnati, OH, for	bEL and transition to college programs and job placement. Coe College, Cedar Repairs, Al, for the Digital Media Technology Project College of Idaho. Caldwell. ID: for fechnology unoradas and the nucrianas	of equipment.
Elementary & Secondary Education (in-	ciudes rie). Museums & Libraries	Elementary & Secondary Education (in-	cludes FIE). Higher Education (includes FIPSE)		Higher Education (includes FIPSE)	Higher Education (includes FIPSE)		Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Hirther Education (includes EIDSE)		Higher Education (includes FIPSE)		HIGNER EQUCATION (INCLUDES FIRSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)		Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)		Higher Education (includes FIPSE)	Higher Education (includes FIPSE) Higher Education (includes FIPSE)	
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Requesting member	Reid	Harkin	Casey, Specter	Specter	Reed	Dodd	Johnson Harkin	Carper, Kaufman	Levin, Stabenow	Dorgan, Conrad	Harkin	Murray, Cantwell	Kerry	Mark Udall, Bennet	Graham	Rockefeller	Landrieu	
Funding	\$400,000	\$500,000	\$250,000	\$100,000	\$500,000	\$500,000	\$150,000 \$250.000	\$150,000	\$250,000	\$300,000	\$300,000	\$300,000	\$500,000	\$250,000	\$150,000	\$1,000,000	\$100,000	
Project	College of Southern Nevada, Las Vegas, NV, for the expansion of online	courses. College Success Foundation, Washington, DC, for mentoring and scholar-	Commonwealth Medical College, Scranton, PA, for the Community Quality	Initiative currelutum development program. Community College of Allegheny County, Pittsburgh, PA, to support basic	euclation and dec) programs. Community College of Rhode Island, Warwick, R1, for the development of a bishood processory is offunding continuous.	biotech program, including equipment. Connecticut State University System, Hartford, CT, to expand Latin Amer- ican and Caribbaon chridies	Dakta Wesleyan process structures (NCAR) SD, for healthcare training programs Dear Wesleyan University, Michell, SD, for healthcare training programs Dear West Morth Hollwoord, CA, for educational programming	Delaware Technical and Community College, Dover, DE, for distance learn-	ing technology. Delta College, University Center, MI, for chemical process and lithium bat- toru ich Echnismond.	tery cap computent. Dickinson State University, Dickinson, ND, for its Theodore Roosevelt Cen-	ter. Drake University Law School, Des Moines, IA, to create the Drake Institute	ior Legislation and Agriculture Folicy. Eastern Washington University, Spokane, WA, to educate, conduct research, and disceminate vital information on regional water resume.	Edward M. Kennedy Institute for the United States Senate, Boston, MA, for edward M. Annoram development including an andowned	Fort Lewis College Durango, CO, to develop and administer the Tribal Na- tion Building program to provide internships and social service pro-	grams. Francis Marion University, Florence, SC, for early childhood education ini-	uatives. Future Generations, Franklin, WV, to develop a higher education degree in	the field of substance abuse prevention. Grambling State University, Grambling, LA, for the Project Lifelines pro- gram for vocational or higher education training.	
Account	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	
Agency	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	

\$100,000 Stabenow, Levin	\$400,000 Inouye, Akaka	Bunning	Sessions	Durbin	Boxer	Harkin	Levin, Stabenow	\$500,000 Cochran, Wicker	Leahy	Bond	Bond	\$200,000 Inouye, Akaka	Shaheen	Johnson, Thune	Specter, Casey	\$400,000 Inouye, Akaka
\$100,000	\$400,000	\$100,000	\$100,000	\$400,000	\$200,000	\$300,000	\$100,000	\$500,000	\$200,000 Leahy	\$500,000	\$500,000	\$200,000	\$150,000	\$200,000	\$100,000	\$400,000
Grand Rapids Community College, Grand Rapids, MI, for the purchase of equipment and development of education programs in alternative/re- nonements on some	newaure energy. Hawaii Community College, Hilo, HI, to promote Native Hawaiian and other secondration reforeams.	Hazard Community and Technics College, Hazard, KY, for science, tech- molow noninsoriar and math education provisions.	Huntingdon College, Montgomery, AL, for purchase of equipment and tech-	nology upgrades to support distance learning initiatives. Illinois State University—Normal, Normal, 1L, for minority student recruit-	ment and retention. Imperial Valley Community College District, Imperial, CA, for an English	Language Immersion program. Iowa Valley Community College District, Iowa Falls, IA, for a training pro- gram in agricultural and renewable energy technology, including the	purchase of equipment. Jackson Community College/Bay de Noc College/Lake Michigan College, Jackson, M, to develop and implement assessment tools and cur- cicular to some house foilud and cur-	Jackson State low-source autuls. Jackson State University, Jackson, MS, for teacher training to improve lit- erav and mathematics instruction	Johnson State College, Johnson, VT, to expand the teacher preparation pro-	Junior College District of Newton and McDonald Counties, Missouri, Neo- sho, MO, for the purchase of equipment to support allied health edu-	catuon. Junior College District of Sedalia, Missouri, Sedalia, MO, for curriculum de- velopment and the purchase of equipment related to advanced energy	systems. Kauai Community College, Lihue, HI, for planning and implementation of a A norman and and a second and a second se	4-year uegree program. Keene State College, Keene, NH, for curriculum development and edu- cetional naurinomat for the Monadonack Briodiaeol Collaboration	Lake Area Technical for the Matertown, Diversion Control actions active Lake Area Technical Institute, Watertown, SD, for educational equipment	Lake Eric College of Osteopartic Medicine, Erie, PA, to training dental stu- dords in contrast contrast contrast.	uenus in pourent contered care. Leeward Community College, Pearl City, HI, to provide college preparatory education for Filipino students.
Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)
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	Requesting member	Stabenow, Levin	Brownback	Mikulski	Schumer	Burr	Alexander	Bunning	Dorgan, Conrad	Cochran, Wicker	Levin, Stabenow	Reid	Webb, Warner	Gregg	Gillibrand	Schumer
	Funding	\$250,000	\$450,000	\$1,250,000	\$150,000	\$150,000	\$1,500,000	\$100,000	\$450,000	\$100,000	\$250,000	\$200,000	\$100,000	\$2,650,000	\$725,000	\$100,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Project	Macomb Community College, Warren, MI, to develop assessment and cur- riculum materials to make disclared workers college reado	Manhattan Area Technical College, Manhattan, KS, for curriculum develop-	ment and demology upgrades, including the purchase of equipment. Maryland Association of Community Colleges, Annapolis, MD, for the pur- chase of entiment th develor science and encineming lats.	Medaille College, Buffalo, NY, for equipment related to science educa-	uon. Methodist University, Fayetteville, NC, for curriculum development and educertion environment related to first resconder training	ž	equipment. Midway College, Inc., Midway, KY, for education equipment related to	musting and rearm sceness. Minot State University, Minot, ND, for salaries and operating expense for	the Center for Community Research and Service. Mississippi State University, Mississippi State, MS, for technology up- grades and the purchase of equipment to support the Delta Council Pa-	Mo	and Sustainable Energy. Nevada State College, Henderson, NV, for curriculum development and for the nurrhass of factionions.	New partnerse on commonse. New College Institute, Martinsville, VA, for curriculum development for the development of bachelor's degree programs in Renewable Energy. Ad-	vanced Manufacturing. Technology Integration, and Entrepreneurship. New Hampshire Institute of Politics at Saint Anselm College, Manchester, NH, for education programs, technology upgrades and purchase of	equipment. New School—Institute for Urban Education, New York, NY, for an edu- cational mentoring and outreach program for low-income, at-risk stu-	dents. Niagara County Community College, Sanborn, NY, for educational equip- ment.
CONGRESSIO	Account	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)
	Agency	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education

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	Requesting memory	Dodd, Lieberman	Leahy	Tom Udall, Bingaman	Specter	Harkin	Lincoln, Pryor	Collins, Snowe	Schumer	Cornyn	Cornyn	Bond	Cardin	Graham	Reid	Dorgan, Conrad	Harkin	Sherrod Brown
, madia e	runding	\$500,000	\$250,000	\$150,000	\$100,000	\$400,000	\$200,000	\$625,000	\$200,000	\$110,000	\$110,000	\$250,000	\$150,000	\$100,000	\$200,000	\$200,000	\$600,000	\$350,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	riojeci	Saint Joseph College, West Hartford, CT, for personnel, equipment and technolow at the new Institute for Antism and Behavioral Sturgies	Saint Michael's College, Colchester, VT, for curriculum development and academic programming at the Center for Intercultural and Global	Learning. San Juan College, Farmington, NM, for the creation of online and certifi- octs increams to evolved the Renewable Freerw Provinsm.	care programs to expand the retrevance chergy truggam. Security on Campus, Inc., King of Prussia, PA, to support peer education	programs. Simpson College, Indianola, IA, for the John C. Culver Public Policy Cen-	South Arkansas Community College, El Dorado, AR, for the purchase of	equipment for the Process Lectimology Deptator Program. Southern Maine Community College, South Portland, ME, to development a heave equipment and transportation program, including the purchase of	equipment. SUNY Upstate Medical University, Syracuse, NY, for curriculum develop-	Texas State Technical College, Georgetown, TX, for the purchase of equip-	ment and technology. Texas Wesleyan University, Fort Worth, TX, to develop a distance education texas for the methods of continuous	Interative, including the purchase of equipment. Three Rivers Community College, Poplar Bluff, MO, for the purchase of	equipment. Towson University, Towson, MD, for equipment and program development	Trident Technical College, North Charleston, SC, for curriculum develop-	ment and education equipment for an aeronautical training program. Truckee Meadows Community College, Reno, NV, to support the Success	First program. Turtle Mountain Community College, Belcourt, ND, for education technology	equipment. University of Arizona, Tucson, AZ, for the Integrative Medicine in Residency	program. University of Cincinnati, Cincinnati, OH, for the Diversity and Access Ini- tiative.
	Account	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)
	Agency	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education

\$100,000 Mark Udall, Bennet	Dodd	Inouye, Akaka	Grassley, Harkin	Collins	Cochran, Wicker	Bennet	Harkin, Grassley	Johnson, Thune	Collins, Snowe	Cochran, Wicker	Leahy	Kohl	Kerry	Hatch, Bennett	Dorgan, Conrad	Ben Nelson	Kohl
\$100,000	\$250,000	\$350,000	\$275,000	\$600,000	\$250,000	\$100,000	\$550,000	\$400,000	\$500,000	\$250,000	\$475,000	\$400,000	\$500,000	\$106,000	\$350,000	\$500,000	\$150,000
University of Colorado at Colorado Springs, Colorado Springs, CO, for the Southern Colorado Higher Education Consortium Veterans Educational Assistance Program.	University of Connecticut School of Law, Hartford, CT, for a Human Rights and International Law fellowship program.	University of Hawaii School of Law, Honolulu, HI, for the health policy cen-	University of lowa, lowa City, IA, for the National Institute for Twice-	Exceptionality. University of Maine at Fort Kent, Fort Kent, ME, for curriculum develop-	ment for nursing education programs. University of Mississippi, University, MS, to support interdisciplinary re-	search and education related to public poincy and economic education. University of Northern Colorado, Greeley, CO, for The Education Innovation	linstitute: University of Northern Iowa, Cedar Falls, IA, to support the Center for Dis-	ability studies in Literacy, Language and Leanning. University of South Dakota, Vermillion, SD, to identify and address the	eucrational needs of veteralis with disabilities. University of Southern Maine, Portland, ME, for curriculum development,	including the purchase or equipment. University of Southern Mississippi, Hattiesburg, MS, for professional and curriculum development, and distance learning at the Gulf Coast Cam-	puese. University of Vermont, Burlington, VT, to modernize the College of Nursing arrivorum	University of Wisconsin-Stevens Point, Stevens Point, Wi, to support non- traditional and veteran students with disabilities in higher education	and career development. Urban College of Boston, Boston, MA, to support higher education program contin low_income and minority endants	Utah State University, Logan, UT, to develop a land-grant education and	research network. Valley City State University, Valley City, ND, for the Great Plains STEM Future Anton Control On Anton	Vestern Nebraska Community College, Scottsbluff, NE, for the Western Ne-	braska wind chergy naming center. Western Technical College, La Crosse, WI, to establish a veteran's center on campus.
cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE	cludes FIPSE
Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)	Higher Education (includes FIPSE)
Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education	Department of Education

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Project Westminister College, Salt Lake City, UT, to purchase equipm nursing and health science education. American Academy of Orthotists and Prosthetists, Washingt prove the quality of applied orthotic and prosthetic re help meet the demand for provider services. ARC of Madison County, Hurtsville, AL, for a disability prog which may include equipment. Holy Angels Residential Facility, Caddo Parish, LA, for voca for developmental disabled individuals. Spruwink Services, Portland, ME, for education programs for autism. Statewide Independent Living Council, Anchorage, AK, to pendent living programs for rural and remote areas. Utah State Office of Rehabilitation, Salt Lake City, UT, for chil rental education programs. Utah State Office of Rehabilitation, Salt Lake City, UT, for pendent living programs. Utah State Office of Rehabilitation. Salt Lake City, UT, for addison County Parent Child Center, Middlebury, VT, for chil rental education programs. County of Contra Costa, Martinez, CA, for an initiative fo addescents exposed to domestic violence. Dakto County Hastings, MM, for a home visitation program faints and folders and their families. Georgia State University, Atlanta, GA, for child abuse prevention services. Nez Perce Tribe, Lapwai, ID, for child abuse prevention Southern Nevada Health District, Las Vegas, NV, for a home gram for low-income first-time mothers. Suthern Nevada Health District, Las Vegas, NV, for a home gram to low-income first-time mothers. Southern Weada Health District, Las Vegas, NV, for a home grampus Kitchen, Washington, DC, for services to the homelo in Attantic City, MA	College, Sal demy of Or quality of quality of quality of quality of the demance Residential free of Rei trouces, Portla rices, P		IPSE)	Project Funding Requesting member	Westminister College, Salt Lake City, UT, to purchase equipment to support \$150,000 Bennett	Inturving and mediation science enderation. American Academy of Orthoticss and Prosthetists, Washington, DC, to im- prove the quality of applied orthotic and prosthetic research and to	help meet the demand for provider services. ARC of Madison County, Huntsville, AL, for a disability program initiative, \$100,000 Sessions which may include antinment	Holy Angels Residential facility, Caddo Parish, LA, for vocational training \$100,000 Landrieu for Angelonmental dischled individuale	burwink Services, Portland, ME, for education programs for students with \$400,000 Collins, Snowe	Living Council, Anchorage, AK, to expand inde- se for rurel and remote areas	pervent neuron programs programs for the program of the city. UT, for assistive tech- \$150,000 Bennett number of Rehabilitation, Salt Lake City. UT, for assistive tech-	Addisor Superson Provide Conter, Middlebury, VT, for childcare and pa- \$100,000 Sanders	County of Contra Costa, Martinez, CA, for an initiative for children and \$350,000 Boxer	adolescents exposed to domestic violence. Dakota County, Hastings, MN, for a home visitation program for at-risk in- sents and troduce and their families	denois and country and their ammes. Georgia State University, Atlanta, GA, for child abuse prevention education \$100,000 Chambliss services.	Nez Perce Tribe, Lapwai, ID, for child abuse prevention	South Carolina Department of Education, Columbia, SC, for child abuse \$100,000 Graham nevertion education services	Southern Nevada Health District, Las Vegas, NV, for a home visitation pro- southern Nevada Health District, Las Vegas, NV, for a home visitation pro- southern for how income first him mathematical statematical statematica	giant on tow-income insertine incortes. Access to Heathcare Akordy, Reno, W, for a helpline to assist residents \$330,000 Reid th Theathcare and social services.	Campus Kitchen, Washington, DC, for services to the homeless community \$100,000 Lautenberg, Menendez in Atlantic City NI	City of Marriel View Art Variation Andread Andre
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\$300,000 Boxer	\$200,000	\$400,000	\$450,000	\$250,000	¢ E 00 000	nnn'nnc¢	\$100,000	000 0104	\$250,000	\$150,000		\$500,000	\$500,000		\$408,000		\$750,000	\$300,000		\$500,000		\$600,000	\$750,000		\$150,000	\$100,000
City of Tracy, CA, for gang-outreach, intervention, prevention, and edu-	Creative Visions, Des Moines, IA, for family reunification and support serv- ices.	FAMIX, Inc., Council Bluffs, IA, for a home visitation program for young Children and their families.	Jewish Social Service Agency, Rockville, MD, for autism outreach, edu-	cation, and case management services. Lake County Community Foundation, Waukegan, IL, for expanding access	to services.	wour ward center, newark, wy rol comprehensive services for people with autism spectrum disorders.	Northern Kentucky Community Action Commission, Covington, KY, for child	care program activities.	Olive Crest Pacific Northwest, Bellevue, WA, for services for foster children and children in unstable home situations.	Refuge Network, Cambridge, MN, for family violence and sexual assault	prevention and intervention services.	Springfield Area Parent Child Center, North Springfield, VT, for services for tenneng and eventent methods	TLC for Children and Families, Olathe, KS, for youth transitional living pro-	grams.	United Way of Capital Area, Jackson, MS, for 2–1–1 Mississippi		United Way of California, South Pasadena, CA, for expanding 2–1–1 serv- ices.	University of Medicine and Dentistry of New Jersey—The Autism Center at NI Medicial School Newsork NI for identifying and tracting children with	autism spectrum disorders.	University of Nevada-Las Vegas, Las Vegas, NV, for expanding access to	services for people with autism spectrum disorders.	YWCA of Greater Portland, Portland, OR, for services for victims of human trafficking	Cathedral Square Corporation, South Burlington, VT, for the Seniors Aging	Safely at Home pilot program.	Jev	Jew
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Administration for Children and Families	Administration for Children (ACF)—Social Services.	Administration for Children (ACF)—Social Services.	Administration for Children	Administration for Children	(ACF)—Social Services.	(ACF)—Social Services.	Administration for Children	(ACF)—Social Services.	Administration for Children (ACF)—Social Services.	Administration for Children	(ACF)—Social Services.	Administration for Children	Administration for Children	(ACF)-Social Services.	Administration for Children	(ACF)—Social Services.	Administration for Children (ACF)—Social Services.	Administration for Children		Administration for Children	(ACF)—Social Services.	Administration for Children	Administration on Aging (AOA)		Administration on Aging (AOA)	Administration on Aging (AOA)

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CONGRESSIONALLY DIRECTED SPENDING ITEMS-Continued

Requesting member	Vitter, Landrieu	Mikulski	Sanders	Reid	Durbin	Lugar	Burr	Kerry	Leahy	Inouye, Akaka	Lautenberg, Menendez	Johnson	Vitter	Bingaman	Harkin	Leahy	Kerry	Johnson
Funding	\$150,000	\$200,000	\$200,000	\$100,000	\$150,000	\$100,000	\$300,000	\$200,000	\$100,000	\$200,000	\$750,000	\$100,000	\$200,000	\$1,000,000	\$300,000	\$250,000	\$200,000	\$200,000
	PACE Greater New Orleans, New Orleans, LA, for the expansion of senior services	The Associated: Jewish Community Federation of Baltimore, Baltimore, MD, Andress Safety and community engagement issues among seniors	Vermont Association of Area Agencies on Aging, Barre, VT, to expand nu- trimont Associations and related nonzense.	Washoe County Senior Services, Carson City, NV, for the RSVP Home Com-	pamon serior Respite Care Program. Chicago Public Schools, Chicago, IL, for nutrition and health education	programs, including equipment. City of Fort Wayne, IN, for outreach, screening and education for Burmese	rerugees. East Carolina University, Greenville, NC, for a health disparities behavioral	and chronic disease management initiative. Fibrous Dysplasia Foundation, Washington, DC, for the development of a	patient network. Fletcher Allen Health Gare, Burlington, VT, to expand the Center for Nutri-	tion and Healthy Food Systems. Hawaii Primary Care Association, Honolulu, HI, to continue a program on	childhood asthma. John M. Tedeschi Pediatric Institute at Virtua, Camden, NJ, to establish an	outreach and education program to combat childhood obesity. Lower Brule Sioux Tribe, Lower Brule, SD, for health education and pro-	motion programs. Mary Bird Perkins Cancer Center, Baton Rouge, Louisiana, for cancer out-	reach initiatives. National Council of La Raza, Washington, DC, for the Institute of Hispanic	Health. PE4Hife Foundation, Kansas City, MO, for expansion and assessment of	PE-Hitte programs across lowa. Shelburne Farms, Shelburne, VT, to expand Farm-to-School activities	Silent Spring Institute, Newton, MA, for studies of the impact of environ-	mental porturants on preas cancer and women's rearch. South Dakota State University, Brookings, SD, for research on health pro- motion.
Account	Administration on Aging (AOA)	Administration on Aging (AOA)	Administration on Aging (AOA)	Administration on Aging (AOA)	Centers for Disease Control and Prevention	Centers for Disease Control and Prevention	Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	(CDC). Centers for Disease Control and Prevention	Courts for Disease Control and Prevention	Centers for Disease Control and Prevention (CDC).
Agency	Department of Health & Human Services	Department of Health & Human Services	Department of Health & Human	Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Services. Department of Health & Human	Department of Health & Human	behattes. Department of Health & Human Services.

\$100,000 Chambliss	Inouye, Akaka	Grassley, Harkin	Harkin	Harkin	Cochran, Wicker	Thune, Johnson	Feinstein	Murkowski	Murkowski, Begich	Murkowski, Begich	Durbin	Murkowski	Begich	Franken, Klobuchar
\$100,000	\$100,000	\$300,000	\$150,000	\$500,000	\$800,000	\$450,000	\$775,000	\$500,000	\$1,000,000	\$250,000	\$375,000	\$500,000	\$200,000	\$150,000
Centers for Disease Control and Prevention University of Georgia, Athens, GA, for obesity intervention and prevention	University of Hawaii at Hilo, Hilo, HI, for occupational safety and health research.	University of Northern Iowa, Cedar Falls, IA, for a health literacy pro- gram.	Waterloo Fire Rescue, Waterloo, IA, for FirePALS, a school-based injury pre- vention program.	lov	n	Aberdeen Area Tribal Chairmen's Health Board, Rapid City, SD, for facili- ties and equipment to improve prenatal care.	Alameda County Medical Center, Oakland, CA, for facilities and equip- ment.	Alaska Medicare Clinic, Anchorage, AK, for facilities and equipment	Alaska Native Tribal Health Consortium, Anchorage, AK, for facilities and equipment.	Alaska Native Tribal Health Consortium, Anchorage, AK, for the oral health disparities project.	Alexian Brothers Hospital Network, Arlington Heights, IL, for facilities and equipment.	Anchorage Neighborhood Health Center, Anchorage, AK, for facilities and equipment.	Anchorage Project Access, Anchorage, AK, for outreach, care coordination, and support of oral healthcare.	Apple Tree Dental, Minneapolis, MN, for facilities and equipment related to oral healthcare.
Centers for Disease Control and Prevention	CODC). Centers for Disease Control and Prevention (CDC).	Centers for Disease Control and Prevention (CDC).	Centers for Disease Control and Prevention (CDC).	Centers for Medicare and Medicaid Serv- ices (CMS)—Research & Demonstration	Centers for Medicare and Medicaid Serv- ices (CMS)—Research & Demonstration	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health. tion (HRSA)—Health Facilities and Serv- cises	Health. tion (HRSA)—Health Facilities and Serv- ices	Health. tion (HRSA)—Health Facilities and Serv- rices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.

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ITEMS
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	member											_	od Brown
	Requesting member	Chambliss	Lincoln, Pryor	Tester, Baucus	Hatch, Bennett	Levin, Stabenow	Harkin	Vitter	Lincoln, Pryor	Cornyn	Crapo, Risch	Carper, Kaufman	Voinovich, Sherrod Brown
	Funding	\$150,000	\$500,000	\$200,000	\$106,000	\$250,000	\$300,000	\$200,000	\$450,000	\$110,000	\$150,000	\$150,000	\$100,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS-Continued	Project	Archbold Medical Center, Thomasville, GA, for facilities and equipment	Arkansas Methodist Hospital Corporation, Paragould, AR, for facilities and equipment.	Assimiboine and Sioux Tribes of the Fort Peck Reservation, Poplar, MT, for facilities and equipment related to dialysis.	Association for Utah Community Health, Salt Lake City, UT, to implement an electronic medical record system.	Barbara Ann Karmanos Cancer Institute, Detroit, MI, for facilities and equipment.	Barnabas Uplift, Waverly, IA, for a healthcare job training program	Baton Rouge Children's Health Project, Baton Rouge, Louisiana, for the purchase of mobile mental health units.	Baxter Regional Medical Center, Mountain Home, AR, for facilities and equipment.	Baylor Health Care System and City of Dallas, TX, for facilities and equipment.	Bear Lake Memorial Hospital, Montpelier, ID, for facilities and equip- ment.	Beebe Medical Center, Lewes, DE, for facilities and equipment related to nurse training.	BioOhio, Columbus, OH, for a national vaccine manufacturing and logis- tics center study.
CONGRESSIO	Account	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health: Health: tion (HRSA)—Health Facilities and Serv- ices.
	Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

Sanders	Sanders	Baucus, Tester	Harkin, Grassley	Harkin, Grassley	Schumer	Crapo, Risch	Baucus, Tester	Wyden, Merkley	Lincoln, Pryor	Snowe, Collins	Collins, Snowe	Durbin
\$40,000	\$110,000	\$250,000	\$100,000	\$500,000	\$100,000	\$150,000	\$300,000	\$100,000	\$500,000	\$200,000	\$225,000	\$350,000
Bi-State Primary Care Association, Montpelier, VT, for education and out- reach.	Bi-State Primary Care Association, Montpelier, VT, for equipment and support of a dental clinic.	Bozeman Deaconess Hospital, Bozeman, MT, for facilities and equipment, including electronic health records.	Briar Cliff University, Sioux City, IA, for health training equipment and on- line instruction.	Broadlawns Medical Center, Des Moines, IA, for facilities and equipment $\$	Brookhaven Memorial Hospital Medical Center, Patchogue, NY, to establish the Brookhaven Breast Cancer Coalition.	Cassia Regional Medical Center, Burley, ID, for facilities and equipment	Center for Asbestos Related Disease, Libby, MT, for facilities and equip- ment, including information technology.	Center for Enhanced Diabetic Eye Care, Pikesville, MD, for programs re- lated to diabetic retinopathy, including equipment.	Central Arkansas Radiation Therapy Institute, Little Rock, AR, for facilities and equipment.	Central Maine Medical Center College of Nursing and Health Professions, Lewiston, ME, for facilities and equipment.	Central Maine Medical Center, Lewiston, ME, for health professions train- ing, including equipment.	Chestnut Health Systems, Bloomington, IL, for facilities and equipment
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

CONGRESSIONALLY DIRECTED SPENDING ITEMS-Continued

Merkley, Wyden	Lugar	Collins, Snowe	Brownback, Roberts	Sherrod Brown	Harkin	Dodd, Lieberman	Lincoln, Pryor	Harkin	Harkin	Durbin	Reed, Whitehouse	Kohl
\$100,000	\$100,000	\$450,000	\$150,000	\$250,000	\$100,000	\$150,000	\$250,000	\$100,000	\$250,000	\$150,000	\$500,000	\$500,000
Coastal Family Health Center, Astoria, OR, for facilities and equipment	Columbus Regional Hospital, Columbus, IN, for facilities and equipment \dots	Community Dental, Portland, ME, for dental health services, including equipment.	Community Foundation of Southwest Kansas, Dodge City, KS, for facilities and equipment.	Community Health Access Project, Inc., Mansfield, OH, for facilities and equipment.	Community Health Center of Fort Dodge, IA, for facilities and equipment \dots	Community Health Center, Inc., Middletown, CT, for a residency training program for nurse practitioners.	Community Health Centers of Arkansas, North Little Rock, AR, for facilities and equipment.	Community Health Centers of Southeastern Iowa, Burlington, IA, for facili- ties and equipment.	Community Health Centers of Southern Iowa, Leon, IA, for facilities and equipment.	Community Health, Chicago, IL, for facilities and equipment	Comprehensive Community Action Inc., Cranston, RI, for health center fa- cilities and equipment.	Concordia University School of Pharmacy, Mequon, WI, for facilities and equipment.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Herbox Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

	CONGRESSIO	CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued		
Agency	Account	Project	Funding	Requesting member
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Connecticut Children's Medical Center, Hartford, CT, for facilities and equipment.	\$500,000	Dodd, Lieberman
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Coos County Family Health Services, Berlin, NH, for facilities and equip- ment.	\$150,000	Shaheen
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Copper River Native Association, Copper Center, AK, for facilities and equipment.	\$500,000	Murkowski
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Council Bluffs Community Health Center, Council Bluffs, IA, for facilities and equipment.	\$350,000	Harkin
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	County of Riverside, Moreno Valley, CA, for facilities and equipment re- lated to trauma care.	\$1,000,000	Feinstein, Boxer
Department of Health & Human Services.	Ices. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Crouse Hospital, Syracuse, NY, for facilities and equipment	\$150,000	Schumer
Department of Health & Human Services.	Ices. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Cure for the Kids Foundation, Las Vegas, NV, for facilities and equip- ment.	\$500,000	Reid
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Dakota Wesleyan University, Mitchell, SD, for health training equipment	\$200,000	Johnson
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Dallas County Community College District, Dallas, TX, for a health careers resource center.	\$250,000	Hutchison
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Dartmouth Hitchcock Medical Center, Lebanon, NH, for facilities and equipment.	\$400,000	Gregg
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Dean McGee Eye Institute, Oklahoma City, OK, for facilities and equipment.	\$150,000	Inhofe
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- tices.	Delta State University, Cleveland, MS, for facilities and equipment	\$1,300,000	Cochran, Wicker

CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued

Bennet	\$250,000 Landrieu, Vitter	Lincoln, Pryor	Burr	Landrieu	\$200,000 Lautenberg, Menendez	Durbin, Burris	Collins, Snowe	Webb, Warner	Durbin	Baucus, Tester	Chambliss	Harkin
\$150,000	\$250,000	\$500,000	\$500,000	\$600,000	\$200,000	\$200,000	\$385,000	\$150,000	\$275,000	\$100,000	\$100,000	\$350,000
Denver Hospice, Denver, CO, for facilities and equipment	Dillard University, New Orleans, LA, for facilities and equipment at the Gentille Center for Health Disparities and Disease Prevention.	Drew Memorial Hospital, Monticello, AR, for facilities and equipment	East Carolina University, Greenville, NC, for facilities and equipment	East Carroll Parish Hospital, Lake Providence, LA, for facilities and equipment.	East Orange General Hospital, East Orange, NJ, for facilities and equipment.	Easter Seals Joliet Region, Inc., Joliet, IL, for facilities and equipment re- lated to autism.	Eastern Maine Healthcare System, Brewer, ME, for a hospice and palliative care initiative.	Eastern Shore Rural Health System, Inc., Nassawadox, VA, for equipment related to oral healthcare.	Egyptian Public & Mental Health Department, Eldorado, IL, for facilities and equipment at a rural health clinic.	Flathead Valley Community College, Kalispell, MT, for health professions training, including equipment.	Floyd Medical Center, Rome, GA, for facilities and equipment	Free Clinics of lowa, Des Moines, IA, for coordination of care
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Hearth Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

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	Requesting member	Hatch	Klobuchar, Franken	Murray, Cantwell	Sessions	Collins	Murray, Cantwell	Harkin	Chambliss	Crapo, Risch	Hutchison	Harkin, Grassley	Murray
	Funding	\$106,000	\$100,000	\$400,000	\$100,000	\$300,000	\$750,000	\$600,000	\$100,000	\$100,000	\$250,000	\$400,000	\$300,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Project	Garfield Memorial Hospital, Panguitch, UT, for facilities and equipment	Gillette Children's Specialty Healthcare, St. Paul, MN, for facilities and equipment.	Global to Local Health Initiative, Seattle, WA, for a health disparities pro- gram, including equipment.	Good Samaritan Health Clinic of Cullman, Inc., Cullman, AL, to implement an electronic medical records system.	Goodall Hospital, Sanford, ME, for facilities and equipment	Grays Harbor Community Hospital, Aberdeen, WA, for facilities and equipment.	Greater Sioux Community Health Center, Sioux Center, IA, for facilities, equipment, supplies, and outreach.	Habersham Medical Center, Demorest, GA, for facilities and equipment \ldots	Harms Memorial Hospital District, American Falls, ID, for facilities and equipment.	Harris County Hospital District, Houston, TX, for facilities and equipment \ldots	Hawkeye Community College, Waterloo, IA, for health education facilities and equipment.	Health Work Force Institute, Seattle, WA, for programs to identify and ad- dress workforce needs.
CONGRESSIO	Account	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
	Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

CONGRESSIONALLY DIRECTED SPENDING ITEMS-Continued

Mikulski, Cardin	Tom Udall, Bingaman	Rockefeller	Hutchison	Cardin	Lautenberg, Menendez	Crapo, Risch	Dorgan, Conrad	Collins	Harkin	Harkin	Harkin	Harkin, Grassley
\$500,000	\$250,000	\$3,000,000	\$250,000	\$250,000	\$200,000	\$150,000	\$175,000	\$255,000	\$300,000	\$650,000	\$600,000	\$1,000,000
Healthy Howard Health Plan, Inc., Columbia, MD, for outreach, support and care coordination.	Hidalgo Medical Services, Lordsburg, NM, for facilities and equipment in Sliver City.	Hospice of the Panhandle, Martinsburg, WV, for facilities and equipment $\$	Houston Community College, Houston, TX, for recruitment and nurse train- ing.	Howard Community College, Columbia, MD, for health education facilities and equipment.	Hudson Perinatal Consortium, Jersey City, NJ, for a program to improve birth outcomes.	Idaho State University, Pocatello, ID, for facilities and equipment	Innovis Health, Fargo, ND, for facilities and equipment	Integrated Service Solutions, Caribou, ME, to implement an electronic health record system.	lowa CareGivers Association, West Des Moines, IA, for the Direct Care Worker Resource and Outreach Center.	lowa Healthcare Collaborative, Des Moines, IA, to improve healthcare pro- vider efficiency and effectiveness.	lowa Nebraska Primary Care Association, Des Moines, IA, for planning grants.	lowa State University, Ames, IA, for facilities and equipment for the Insti- tute for Novel Vaccines and Anti-Microbial Design.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

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ITEM
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Agency	Account	Project	Funding	Requesting member
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	lowa Valley Community College District, Marshalltown, IA, to assist under- served individuals in pursuing a healthcare career.	\$100,000	Harkin, Grassley
Department of Health & Human Services.	loces. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	lowa Western Community College, Council Bluffs, IA, for facilities and equipment for the nursing center.	\$250,000	Grassley, Harkin
Department of Health & Human Services.	locs. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	J.C. Blair Memorial Hospital, Huntingdon, PA, for facilities and equipment.	\$100,000	Specter, Casey
Department of Health & Human Services.	ices. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Jackson Laboratory, Bar Harbor, ME, for facilities and equipment	\$100,000	Snowe, Collins
Department of Health & Human Services.	loces. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Jackson Park Hospital, Chicago, IL, for facilities and equipment	\$250,000	Durbin
Department of Health & Human Services.	locs. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Jackson State University, Jackson, MS, for facilities and equipment	\$1,000,000	Cochran, Wicker
Department of Health & Human Services.	lices. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Jacksonville State University, Jacksonville, AL, for a nursing education pro- gram including equipment.	\$100,000	Sessions
Department of Health & Human Services.	Health Resources and Services Administra- Health Resources and Services and Serv-	Jameson Health System, New Castle, PA, for facilities and equipment	\$100,000	Specter
Department of Health & Human Services.	ices. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Kalihi-Palama Health Center, Honolulu, HI, for a program on renal dis- ease.	\$250,000	Inouye, Akaka
Department of Health & Human Services.	loces. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Kanawha-Charleston Health Department, Charleston, WV, for a chronic dis- ease management program.	\$350,000	Rockefeller
Department of Health & Human Services.	loces. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Kauai Community Health Center, Lihue, HI, for facilities and equipment	\$200,000	Inouye, Akaka
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Kennesaw State University, Kennesaw, GA, for facilities and equipment	\$200,000	Isakson

Murray	Merkley, Wyden	John son	Inouye, Akaka	Cochran, Wicker	Murray, Cantwell	Crapo, Risch	Harkin	Durbin	Tester, Baucus	Boxer	Durbin	Collins, Snowe
\$40,000	\$200,000	\$100,000	\$100,000	\$250,000	\$125,000	\$150,000	\$250,000	\$400,000	\$150,000	\$150,000	\$400,000	\$355,000
King County Project Access, Seattle, WA, for facilities and equipment	La Clinica del Valle Family Health Care Center, Inc., Medford, OR, for fa- cilities and equipment.	Lake Area Technical Institute, Watertown, SD, for health training equipment.	Lanai'i Community Health Center, Lanai'i City, HI, for facilities and equip- ment.	Leflore County Health Center, Inc, Greenwood, MS, for a patient navigator initiative, including equipment.	Legacy Health System, Vancouver, WA, for telemedicine programs, includ- ing equipment.	Lewis-Clark State College, Lewiston, ID, for facilities and equipment	Linn Community Care, Cedar Rapids, IA, for facilities and equipment	Little Company of Mary Hospital, Evergreen Park, IL, for facilities and equipment.	Livingston Health Care, Livingston, MT, for facilities and equipment	Los Angeles Community College District, Los Angeles, CA, for health pro- fessions training, including equipment.	Loyola University, Chicago, IL, for facilities and equipment related to nurse training.	Maine Medical Center, Portland, ME, for physician recruitment, including scholarships.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Hearth Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

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Requesting member	Lugar	Murkowski	Isakson, Chambliss	Kohl	Rockefeller	Kerry	Inouye, Akaka	Bennet	Voinovich	Harkin	Crapo, Risch	Dorgan, Conrad
Funding	\$150,000	\$1,500,000	\$200,000	\$850,000	\$2,300,000	\$100,000	\$100,000	\$150,000	\$250,000	\$500,000	\$150,000	\$200,000
	Manchester College, Fort Wayne, IN, for facilities and equipment	Maniilaq Association, Kotzebue, AK, for facilities and equipment	Marcus Autism Center, Atlanta, GA, for rural health outreach	Marquette University, Milwaukee, WI, for a comprehensive dental outreach program.	Marshall University, Huntington, WV, for facilities and equipment related to genetic research.	Massachusetts League of Community Health Centers, Boston, MA, for workforce training and development.	Maui Medical Center, Wailuku, HI, for health professions training, includ- ing equipment.	Mental Crisis Services, Denver, CO, for electronic health record implemen- tation.	Mercy Medical Center, Inc., Canton, OH, to implement an electronic med- ical records system.	Mercy Medical Foundation, Des Moines, IA, for pediatric care facilities and equipment.	Minidoka Memorial Hospital, Rupert, ID, for facilities and equipment	Minot State University, Minot, ND, for its Great Plains Autism Treatment Program to serve transition-age youth with autism spectrum disorders.
	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued

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Hagan	Cochran	Lincoln, Pryor	Cochran, Wicker	Cochran, Wicker	Cochran, Wicker	Cochran, Wicker	Tester, Baucus	Hagan	McConnell	Reid	Bennet	Johnson
\$150,000	\$485,000	\$200,000	\$350,000	\$1,000,000	\$500,000	\$190,000	\$300,000	\$200,000	\$500,000	\$590,000	\$250,000	\$100,000
Mission Health System, Asheville, NC, for facilities and equipment	Mississippi Blood Services, Inc., Jackson, MS, for facilities and equipment.	Mississippi County Hospital System d.b.a. Great River Medical Center, Blytheville, AR, for facilities and equipment.	Mississippi Primary Health Care Association, Jackson, MS, for facilities and equipment.	Mississippi State University, Mississippi State, MS, for biomedical engineering facilities and equipment.	Mississippi State University, Mississippi State, MS, for facilities and equipment.	Mississippi University for Women, Columbus, MS, for facilities and equipment.	Missouri River Medical Center, Fort Benton, MT, for facilities and equipment.	Moses Cone Health System, Greensboro, NC, for facilities and equipment $\ .$	Murray State University, Murray, KY, to purchase a mobile health unit	Nathan Adelson Hospice Foundation, Las Vegas, NV, for facilities and equipment.	National Jewish Health, Denver, CO, for facilities and equipment	Native Women's Health Care Center, Rapid City, SD, for facilities and equipment.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
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CONGRESS	CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Funding	Requesting member
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Navos, Seattle, WA, for facilities and equipment	\$100,000	Cantwell, Murray
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	 Nevada Cancer Institute, Las Vegas, NV, for equipment 	\$750,000	Reid
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	 New Mexico Foundation for Dental Health, Research and Education, Albu- querque, NM, for outreach, care coordination, and support of oral health care 	\$100,000	Bingaman, Tom Udall
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Ne	\$150,000	Gillibrand, Schumer
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	 New York University Langone Medical Center, New York, NY, for facilities and equipment. 	\$750,000	Schumer
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	 North Colorado Medical Center, Greeley, CO, for facilities and equipment 	\$250,000	Bennet
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	 North Dakota Medical Association, Bismarck, ND, to set up a statewide quality improvement network. 	\$250,000	Dorgan, Conrad
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	 North Idaho College, Coeur d'Alene, ID, to expand the physical therapy pro- gram. 	\$100,000	Crapo, Risch
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	 North Shore Long Island Jewish Health System, Great Neck, NY, to implement electronic medical records. 	\$500,000	Gillibrand, Schumer
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	 Northeast Missouri Health Council, Inc., Kirksville, MO, for facilities and equipment. 	\$750,000	Bond
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Nye County, Pahrump, NV, for facilities and equipment	\$400,000	Reid
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	 Oakwood Healthcare, Inc., Dearborn, MI, for facilities and equipment re- lated to orthopedics. 	\$150,000	Stabenow, Levin

Johnson	Voinovich, Sherrod Brown	Voinovich, Sherrod Brown	Inhofe	Murray, Cantwell	Cornyn	Harkin	Hutchison	Bennet	Cantwell, Murray	Casey, Specter	Snowe	Collins, Snowe
\$250,000 Johnson	\$200,000	\$200,000	\$100,000	\$350,000	\$110,000	\$400,000	\$400,000	\$250,000	\$200,000	\$100,000	\$150,000	\$395,000
Oglala Sioux Tribe, Pine Ridge, SD, for facilities and equipment related to emergency care.	Ohio State University Comprehensive Cancer Center—James Cancer Hos- pital and Solove Research Institute, Columbus, OH, for facilities and equipment.	Ohio University, Athens, OH, for health outreach and services in Appa- lachia Ohio.	Oklahoma Medical Research Foundation, Oklahoma City, OK, for facilities and equipment.	Olympic College, Bremerton, WA, for facilities and equipment related to nurse training.	Our Lady of the Lake University, San Antonio, TX, for nursing curriculum development, including equipment.	Palmer College of Chiropractic and Myrna Brind Center of Integrative Med- icine, Davenport, IA, to develop a model integrative healthcare program for the treatment of pain.	Parkland Health and Hospital System, Dallas, TX, for facilities and equip- ment.	Parkview Medical Center, Pueblo, CO, for facilities and equipment	Peace Health Whatcom Region, Bellingham, WA, for facilities and equip- ment.	Pennsylvania Breast Cancer Coalition, Ephrata, PA, for screening programs and outreach.	Penobscot Community Health Care, Bangor, ME, for a rural dental health initiative.	Penobscot Valley Hospital, Lincoln, ME, for facilities and equipment
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

ITEMS-
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	Requesting member	Harkin	Murray	Kerry	Brownback	Inouye, Akaka	Murkowski	Murray	Murray	Kerry	Reid	Reed, Whitehouse	Kohl
	Funding	\$250,000	\$130,000	\$100,000	\$500,000	\$1,850,000	\$500,000	\$300,000	\$135,000	\$100,000	\$500,000	\$250,000	\$100,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Project	Peoples Community Health Clinic, Waterloo, IA, for facilities and equipment.	Pierce College Puyallup, Puyallup, WA, for health training equipment	Pioneer Valley Life Sciences Institute, Springfield, MA, for facilities and equipment.	Pratt Regional Medical Center, Pratt, KS, for facilities and equipment	Primary Care Association of Hawaii, Honolulu, HI, to support community health centers, including equipment.	Providence Alaska Family Medicine Residency, Anchorage, AK, for physician recruitment and retention initiative in rural Alaska.	Providence ElderPlace Seattle, Seattle, WA, for facilities and equipment	Providence St. Peter Hospital, Olympia, WA, for facilities and equipment \dots	Regis College, Weston, MA, for facilities and equipment related to nurse training.	Renown Health, Reno, W, to expand nurse training	Rhode Island Free Clinic, Providence, RI, for coordination of care, data col- lection and analysis.	Rice Lake Area Free Clinic, Rice Lake, WI, for facilities and equipment
	Account	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- icos	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Herror Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- icos	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- icos	Health Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
	Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

\$200,000 Hutchison	Schumer	Thune, Johnson	Johnson	Klobuchar, Franken	Tester, Baucus	Tester, Baucus	Reed, Whitehouse	Bennet	Tester, Baucus	Hutchison	Wyden, Merkley	Bennett, Hatch
\$200,000	\$350,000	\$450,000	\$50,000	\$100,000	\$150,000	\$100,000	\$500,000	\$250,000	\$300,000	\$200,000	\$150,000	\$150,000
Rice University, Houston, TX, for facilities and equipment	Richmond Medical Center dba Richmond University Medical Center, Staten Island, NY, for facilities and equipment.	Rosebud Sioux Tribe, Rosebud, SD, for facilities and equipment	Rosebud Sioux Tribe, Rosebud, SD, for facilities and equipment, including purchase of a vehicle related to elderly care.	Saint Elizabeth's Medical Center, Wabasha, MN, for facilities and equip- ment.	Saint Patrick Hospital and Health Sciences Center, Missoula, MT, for fa- cilities and equipment.	Salish Kootenai College, Pablo, MT, for facilities and equipment related to health professions training.	Salve Regina University, Newport, RI, for facilities, equipment, and train- ing for an expanded nursing program.	San Luis Valley Regional Medical Center, Alamosa, CO, to implement elec- tronic medical record system.	Sanders County Community Development Corporation, Thompson Falls, MT, for facilities and equipment at the Hot Springs Medical Clinic.	Seton Medical Center—Austin, Austin, TX, for facilities and equipment	Sherman County Health District dba Moro Medical Clinic, Moro, OR, for fa- cilities and equipment.	Snow College, Ephraim, UT, for facilities and equipment
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ires	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Heat Heat Heat Heat Heat Heat Heat Heat
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\$250,000 Gregg, Shaheen	Lincoln, Pryor	Alexander	Bond	Reid	Crapo, Risch	Kohl	Rockefeller	Baucus, Tester	Mikulski	Inouye, Akaka	Specter, Casey	Crapo, Risch
\$250,000	\$200,000	\$1,600,000	\$500,000	\$300,000	\$100,000	\$700,000	\$250,000	\$250,000	\$1,250,000	\$150,000	\$100,000	\$100,000
St. Joseph Hospital, Nashua, NH, to implement an electronic medical record system.	St. Joseph's Mercy Health Foundation, Hot Springs, AR, for facilities and equipment.	St. Jude Children's Research Hospital, Memphis, TN, for facilities and equipment.	St. Louis Children's Hospital, St. Louis, MO, for facilities and equipment	St. Mary's Foundation for St. Mary's Regional Medical Center, Reno, NV, for planning and support of oral health care.	St. Mary's Hospital, Cottonwood, ID, for facilities and equipment	St. Mary's Janesville Hospital, Janesville, WI, for facilities and equipment \ldots	St. Mary's Medical Center, Huntington, WV, for facilities and equipment \dots	St. Vincent Hospital, Billings, MT, for facilities and equipment	State of Maryland, Baltimore, MD, for facilities and equipment related to emergency care.	Straub Hospital Burn Center, Honolulu, HI, for facilities and equipment \ldots	Temple University Health System, Philadelphia, PA, for facilities and equipment.	Teton Valley Hospital, Driggs, ID, for facilities and equipment
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Head the services and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
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Agency	Account	Project	Funding	Requesting member
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Texas Children's Hospital, McAllen, TX, for education and outreach pro- grams at the Vannie E. Cook Jr. Children's Cancer and Hematology Clinic.	\$250,000	Hutchison, Cornyn
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Texas Health Institute, Austin, TX, for emergency response initiative, in- cluding purchase of equipment.	\$200,000	Hutchison
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Texas Medical Center, Houston, TX, for facilities and equipment	\$650,000	Hutchison
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Texas Tech University Health Sciences Center, Austin, TX, for facilities and equipment.	\$200,000	Hutchison
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Texas Women's University, Denton, TX, for facilities and equipment	\$300,000	Hutchison
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Thomas Jefferson University Hospital, Philadelphia, PA, for facilities and equipment.	\$100,000	Specter, Casey
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Thompson Health, Canandaigua, NY, for facilities and equipment	\$150,000	Gillibrand, Schumer
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Touro University Nevada, Henderson, NV, for facilities and equipment at the College of Optometry.	\$750,000	Reid
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Tulane University School of Medicine, New Orleans, LA, for facilities and equipment.	300,000	Landrieu
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Tulare Regional Medical Center, Tulare, CA, for facilities and equipment	\$550,000	Feinstein
Department of Health & Human Services.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Tyrone Hospital, Tyrone, PA, for facilities and equipment	\$100,000	Specter
Department of Health & Human Services.	Heatth Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Union Hospital, Terre Haute, IN, for facilities and equipment	\$100,000	Lugar

Murray	Gillibrand	Voinovich	Reid	Shelby	Lincoln, Pryor	Lincoln, Pryor	Feinstein	Feinstein, Boxer	Lincoln, Pryor	Bennet	Mark Udall, Bennet	Inouye, Akaka
\$150,000	\$200,000	\$200,000	\$300,000	\$15,000,000	\$500,000	\$200,000	\$500,000	\$750,000	\$250,000	\$400,000	\$150,000	\$350,000
United General Hospital, Sedro Woolley, WA, for facilities and equipment	University at Albany SUNY, Albany, NY, for facilities and equipment related to orphan disease research.	University Hospitals, Cleveland, OH, for facilities and equipment	University Medical Center of Southern Nevada, Las Vegas, NV, for a diabe- tes management program.	University of Alabama, Tuscaloosa, AL, for facilities and equipment	University of Arkansas for Medical Sciences, Little Rock, AR, for facilities and equipment.	University of Arkansas for Medical Sciences, Little Rock, AR, for facilities and equipment.	University of California Davis Medical Center, Davis, CA, for facilities and equipment.	University of California, Riverside, Riverside, CA, for facilities and equipment at the School of Medicine.	University of Central Arkansas, Conway, AR, for facilities and equipment related to training mental health professionals.	University of Colorado—Denver School of Medicine, Aurora, CO, for facili- ties and equipment for the Linda Crnic Institute for Down Syndrome.	University of Colorado—Denver, Aurora, CO, for a health professions train- ing program.	University of Hawaii at Hilo School of Nursing, Hilo, HI, to develop ad- vanced degrees and expand rural nurse training.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Herrors and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Herrors and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
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	Requesting member	Inouye, Akaka	Inouye, Akaka	Inouye, Akaka	Harkin, Grassley	Harkin, Grassley	Brownback	Roberts	McConnell	McConnell	McConnell	McConnell	McConnell
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Funding	\$1,600,000	\$200,000	\$350,000	\$2,000,000	\$1,000,000	\$500,000	\$550,000	\$1,900,000	\$2,000,000	\$4,000,000	\$900,000	\$700,000
	Project	University of Hawaii at Hilo, Hilo, HI, for a clinical pharmacy training pro- gram.	University of Hawaii School of Medicine, Honolulu, HI, for curriculum devel- opment.	University of Hawaii School of Nursing—Manoa, Honolulu, HI, for rural nurse training programs.	University of lowa, Carver College of Medicine, lowa City, IA, for facilities and equipment for the Institute for Biomedical Discovery.	University of lowa, lowa City, IA, for facilities and equipment at the Col- lege of Public Health.	University of Kansas Hospital, Kansas City, KS, for facilities and equip- ment.	University of Kansas, Lawrence, KS, for facilities and equipment	University of Kentucky Research Foundation, Lexington, KY, for a colorectal cancer research program, including equipment.	University of Kentucky Research Foundation, Lexington, KY, to establish a program to reduce heart disease in rural areas.	University of Louisville Research Foundation, Louisville, KY, for facilities and equipment.	University of Louisville Research Foundation, Louisville, KY, for facilities and equipment.	University of Louisville Research Foundation, Louisville, KY, for facilities and equipment.
	Account	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- Health Resources and Services and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Ices. Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
	Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

Mikulski	Mikulski, Cardin	Kerry	Cochran, Wicker	Cochran, Wicker	Reid	Tom Udall, Bingaman	Burr, Hagan	Dorgan, Conrad	Specter	Reed, Whitehouse	Cochran, Wicker	Hutchison
\$200,000	\$1,000,000	\$250,000	\$4,384,000	\$5,000,000	\$300,000	\$100,000	\$300,000	\$175,000	\$100,000	\$500,000	\$6,000,000	\$500,000
University of Maryland Medical System, Baltimore, MD, for equipment and information technology upgrades.	University of Maryland, Baltimore, Annapolis, MD, for facilities and equip- ment related to stem cell research.	University of Massachusetts Memorial Health Care, Worcester, MA, for im- plementation of an electronic medical record.	University of Mississippi Medical Center, Jackson, MS, for facilities and equipment.	University of Mississippi, University, MS, for facilities and equipment	University of Nevada—Reno, Reno, NV, for health professions training and public education efforts related to pediatric chron's disease.	University of New Mexico, Albuquerque, NM, for outreach, training and technical assistance related to cerebral cavernous malformations.	University of North Carolina—Greensboro, Greensboro, NC, for a telespeech initiative, including equipment.	University of North Dakota School of Medicine and Health Sciences, Grand Forks, ND, for facilities and equipment.	University of Pittsburgh Cancer Institute, Pittsburgh, PA, for equipment	University of Rhode Island, Kingston, RI, for equipment related to nursing education.	University of Southern Mississippi, Hattiesburg, MS, for facilities and equipment.	University of Texas Health Center at Tyler, Tyler, TX, for facilities and equipment.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- tions.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

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CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Account Project Funding Requesting member	th Resources and Services Administra- University of Texas Health Science Center at San Antonio, San Antonio, TX, \$500,000 Hutchison on (HRSA)—Health Facilities and Serv- for facilities and equipment.	th Resources and Services Administra- University of Texas Health Science Center-Houston, Houston, TX, for facili- \$200,000 Hutchison on (HRSA)—Health Facilities and Serv- ties and equipment.	th Resources and Services Administra- University of Texas MD Anderson Cancer Center, Houston, TX, for facilities \$250,000 Hutchison on (HRSA)—Health Facilities and Serv- and equipment.	th Resources and Services Administra- University of Utah, Salt Lake City, UT, for facilities and equipment \$1,000,000 Bennett, Hatch	th Resources and Services Administra- University of Vermont, Burlington, VT, for equipment related to DNA se- 0. (HRSA)—Health Facilities and Serv- 0. (mode of the services	th Resources and Services Administra- University of Washington, Seattle, WA, for facilities and equipment related \$570,000 Murray, Cantwell to contend to the contend of HRSA)—Health Facilities and Serv- to dental care.	es. th Resources and Services Administra- non (HRSA)—Health Facilities and Serv- collaboration to promote degrees in nursing.	th Resources and Services Administra- Utable Department of Health, Salt Lake City, UT, for facilities and equip- ment. Hatch ment. Hatch	es. th Resources and Services Administra- on (HRSA)—Health Facilities and Serv- education and screening initiative.	th Resources and Services Administra- Utable Medical Education Council, Salt Lake City, UT, for the purchase of a \$500,000 Bennett mobile dental unit.	es. th Resources and Services Administra- In (HRSA)—Health Facilities and Serv-	es. th Beaucres and Services Administra- von (HRSA)—Health Facilities and Serv-
CONGRESSIONALLY D	Account	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- for fa	Health Resources and Services Administra- Lion (HRSA)—Health Facilities and Serv- tices a	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- Lion (HRSA)—Health Facilities and Serv-	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- Health Resources and Services Administra- Lion (HRSA)—Health Facilities and Serv- educa	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Resources and Services Administra- (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- Vanderbi tion (HRSA)—Health Facilities and Serv-
	Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

Warner, Webb	Murray	Webb, Warner	Burr	Bennett, Hatch	Carper, Kaufman	Inouye, Akaka	Rockefeller	Rockefeller	Rockefeller	McConnell	Sessions	Rockefeller
\$100,000	\$500,000	\$100,000	\$400,000	\$350,000	\$200,000	\$250,000	\$3,000,000	\$1,000,000	\$2,300,000	\$2,500,000	\$150,000	\$2,500,000
Virginia Community College System, Richmond, VA, for expansion of the Emergency Medical Technician program.	Virginia Mason Medical Center, Seattle, WA, for facilities and equipment \ldots	Virginia State University, Petersburg, VA, for facilities and equipment re- lated to nurse training.	Washington County, NC, Plymouth, NC, for facilities and equipment	Weber State University, Ogden, UT, for expansion of nursing programs, in- cluding equipment.	Wesley College, Dover, DE, for facilities and equipment related to nurse training.	West Hawaii Community Health Center, Kailua-Kona, HI, for facilities and equipment.	West Virginia Northern Community College, Weirton, WV, for facilities and equipment related to health professions training.	West Virginia University Health Sciences, Morgantown, WV, for facilities and equipment.	West Virginia University, Morgantown, WV, for the construction of a Mul- tiple Sclerosis Center.	Western Kentucky University, Bowling Green, KY, for facilities and equipment.	Whatley Health Services, Greensboro, AL, for facilities and equipment	Wheeling Jesuit University, Wheeling, WV, for the HeattheWV program, in- cluding equipment.
Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv- ices.
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

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	Requesting member	Lincoln, Pryor	Reid, Ensign	Specter	Schumer	Johnson	Harkin	Kaufman, Carper	Kerry	Dodd, Lieberman	Boxer	Tester, Baucus	Bunning
	Funding	\$500,000	\$1,000,000	\$100,000	\$150,000	\$100,000	\$950,000	\$200,000	\$200,000	\$100,000	\$250,000	\$100,000	\$100,000
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Project	White River Medical Center, Batesville, AR, for facilities and equipment	Whittemore-Peterson Institute for Neuro-Immune Disease, Sparks, NV, for facilities and equipment.	Williamsport Hospital, Williamsport, PA, for facilities and equipment	Woman's Christian Association Hospital, Jamestown, NV, for facilities and equipment.	Yankton Sioux Tribe, Marty, SD, for facilities and equipment related to di- alysis care.	Community Transportation Association of America, Washington, DC, for technical assistance to human services transportation providers on ADA requirements	St. Francis Hospital Foundation, Wilmington, DE, for outreach and preven- tive services to underserved populations.	Children's Hospital Boston, Boston, MA, for Expansion of Mental Health Capacity in Massachusetts Schools.	Clifford W. Beers Guidance Clinic, Inc., New Haven, CT, to expand child and family trauma services.	Family Service Agency of Marin County, San Rafael, CA, for suicide pre- vention and mental health services.	Help Center—211, Bozeman, MT, for suicide intervention and outreach services.	Lindsey Wilson College, Columbia, KY, for professional development and mental health services for the Appalachia region.
CONGRESSIO	Account	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	Health Resources and Services Administra- tion (HRSA)—Health Facilities and Serv-	HHS Office of the Secretary (0S)—Re- search & Demonstration (including Mi- nority & Women's Health)	HHS Office of the Secretary (0S)—Re- search & Demonstration (including Mi- nority & Women's Health)	Notify a women's nearby. Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental	Uppear and Mental Health Serv- Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health.
	Agency	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.

Murkowski, Begich	Merkley, Wyden	Snowe, Collins	Inouye, Akaka	Inouye, Akaka	Rockefeller	John son	Bingaman, Tom Udall	John son	Harkin	Specter	Klobuchar, Franken	Murkowski
\$200,000	\$200,000	\$100,000	\$200,000	\$200,000	\$1,000,000	\$200,000	\$400,000	\$150,000	\$1,000,000	\$100,000	\$100,000	\$500,000
Maniilaq Association, Kotzebue, AK, for suicide prevention activities in Northwest Alaska.	Oregon Partnership, Portland, OR, to provide suicide prevention services to soldiers and military families.	Pen Bay Healthcare, Rockport, ME, for mental health services	Hamakua Health Center, Honoka'a, HI, for a youth anti-drug program	Waimanalo Community Health Center, Waimanalo, HI, for drug abuse pre- vention.	West Virginia Prevention Resource Center, Charleston, WV, for drug abuse prevention.	City/County Alcohol Drug Programs, Rapid City, SD, for substance abuse and recovery programs.	Luna County Healthy Start, Deming, NM, for drug abuse treatment services for women.	Rosebud Sioux Tribe, Rosebud, SD, for a drug and alcohol treatment pro- gram.	AFL-CIO Working for America Institute, Washington, DC, for employment and training programs.	Apprentice Training for Electrical Industry, Philadelphia, PA, for a job training program.	Arrowhead Economic Opportunity Agency, Virginia, MN, for an educational and transportation assistance program for job seekers.	Association of Village Council Presidents, Bethel. AK, for workforce devel- opment and training.
Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Mental Health.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Sub- stance Abuse Prevention.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Sub- stance Abuse Prevention.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Sub- stance Abuse Prevention.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Sub- stance Abuse Treatment.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Sub- stance Abuse Treatment.	Substance Abuse and Mental Health Serv- ices Administration (SAMHSA)—Sub- stance Abuse Treatment.	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).
Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Health & Human Services.	Department of Labor	Department of Labor	Department of Labor	Department of Labor

CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued

							510						
	Requesting member	Cardin	Bill Nelson	Cochran	Mikulski	Hatch	Cardin	Gillibrand	Cochran, Wicker	Crapo, Risch	Harkin	Harkin, Grassley	Reid
	Funding	\$150,000	\$600,000	\$500,000	\$250,000	\$108,000	\$200,000	\$500,000	\$100,000	\$150,000	\$450,000	\$400,000	\$200,000
הטומהרבטטטואלרו עותבטובע טרבועטואט וובואטניייט	Project	Baltimore City Mayor's Office of Employment Development, Baltimore, MD, for a summer jobs program.	Brevard Workforce Development Board, Rockledge, FL, for a job training initiative.	Capps Workforce Training Center, Stoneville, MS, for workforce training	Catholic Charities, Baltimore, MD, for a job training and job placement program.	Center for Education, Business and the Arts, Interlocal Agency, St. George, UT, for workforce development program in green jobs.	Chesapeake Bay Trust, Annapolis, MD, for a job training program and de- velopment of a training curriculum.	City of Buffalo, NY, for youth employment readiness programs	City of Jackson, MS, for workforce training	College of Southern Idaho, Twin Falls, ID, for job training in green con- struction.	Community Transportation Association of America, Washington, DC, to con- tinue the Joblinks program.	Des Moines Area Community College, Ankeny, IA, for the development of the Perry Career Technical Academy.	Easter Seals of Southern Nevada, Las Vegas, NV, for a job training pro- gram for dislocated workers.
CUNGRESSION	Account	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TES).
	Agency	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor

Reid	Reid	Vitter	Specter	Vitter	Bill Nelson	Reid	Kohl	Gillibrand	Kohl	Reid	Reid	Hutchison, Cornyn
\$200,000	\$100,000	\$150,000	\$100,000	\$200,000	\$250,000	\$125,000	\$250,000	\$200,000	\$750,000	\$100,000	\$200,000	\$200,000
Employment and Training Administration Envirolution, Reno, NV, for a green jobs resources center	Expertise, Inc, Las Vegas, NV, for job readiness and employment training \ldots	Finishing Trades Institute, Kenner, Louisiana, for job training and work-force development.	First African Community Development Corporation, Philadelphia, PA, for training in green and technology-related jobs.	Fletcher Community College, Houma, Louisiana, for job training and work- force development.	Florida Institute of Technology, Melbourne, FL, for training in cyber se- curity.	Foundation for an Independent Tomorrow, Las Vegas, NV, for job search support program.	Fox Valley Technical College, Appleton, WI, to expand truck driver training program.	Fund for the City of New York, NY, for an academic success and workforce development program.	Goodwill Industries of Southeastern WI, Inc., Milwaukee, WI, for community job center.	Goodwill of Southern Nevada, Las Vegas, NV, for the career connections job training program.	Great Basin College, Elko, NV, for job training program	Haven for Hope, San Antonio, TX, for job training and education for the homeless.
Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (ETA)	Employment and Training Administration (ETA)—Training & Employment Services (ETA)	Employment and Training Administration (ETA)—Training & Employment Services (ETA)	Employment and Training Administration (ETA)—Training & Employment Services (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (ETA)	Employment and Training Administration (ETA)—Training & Employment Services (FEA)	Employment and Training Administration (ETA)—Training & Employment Services (FEA)	Employed Employed (ETA)—Training & Employment Services (ETA)	E	Employment and Training Administration (ETA)—Training & Employment Services (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (TES).
Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor

	CUNGRESSION	congressionally directed spending tems—continued		
Agency	Account	Project	Funding	Requesting member
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TEC)	Hispanic Federation, New York, NY, for a Latino Workforce Training Initia- tive.	\$100,000	Schumer
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TEC)	Holmes Community College, Goodman, MS, for workforce training	\$225,000	Cochran, Wicker
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Hopkins House, Alexandria, VA, for workforce development and training in early childhood education.	\$150,000	Warner, Webb
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	lowa Workforce Development, Des Moines, IA, for the IowaWORKS Integra- tion Project.	\$1,000,000	Harkin, Grassley
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Jobs for Mississippi Graduates, Inc., Jackson, MS, for career development for at-risk youth.	\$125,000	Cochran, Wicker
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Lakeshore Technical College, Cleveland, WI, to support the training of workers for manufacturing jobs.	\$750,000	Kohl
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Las Vegas-Clark County Urban League, Las Vegas, NV, to provide job de- velopment and workforce readiness skills for unemployed or under- employed individuals	\$145,000	Reid
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Lawrence Technological University, Dearborn, MI, to train displaced workers in green jobs.	\$150,000	Levin, Stabenow
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Maine Centers for Women, Work, & Community/University of Maine at Au- gusta/University of Maine System, Augusta, ME, for job training and workforce development	\$100,000	Snowe
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Maui Community College, Kahului, HI, for remote rural Hawaii job train- ing.	\$2,300,000	Inouye, Akaka
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Maui Community College, Kahului, HI, for the Samoan/Asian Pacific Job Training program.	\$2,000,000	Inouye, Akaka
Department of Labor	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Maui Economic Development Board, Kihei, HI, Rural Computer Utilization Training.	\$300,000	Inouye, Akaka

CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued

\$450,000 Inouye, Akaka	Schumer	Bennet, Mark Udall	Kohl	Cochran	Cochran, Wicker	Cochran, Wicker	\$200,000 Tester, Baucus	Cochran, Wicker	Shaheen	Murkowski	Begich	Hagan
\$450,000	\$150,000	\$100,000	\$300,000	\$250,000	\$375,000	\$250,000	\$200,000	\$100,000	\$200,000	\$100,000	\$200,000	\$150,000
Maui Economic Development Board, Kihei, HI, to recruit, train, and retain women and minorities in STEM careers.	MedTech Association, Inc., Syracuse, NY, to identify career pathways that connect to bioscience jobs.	Metropolitan State College of Denver, Denver, CO, for the purchase of equipment for aviation training program.	Milwaukee Area Technical College, Milwaukee, WI, for Solar Jobs Training Center.	Mississippi Gulf Coast Community College, Perkinston, MS, for workforce training.	Mississippi State University, Mississippi State, MS, for the Mississippi In- tegrated Workforce Performance System.	Mississippi Technology Alliance, Ridgeland, MS, for the Mississippi ILED training program.	Montana State University-Northern, Havre, MT, for Energy Training Cen- ter.	Moore Community House, Biloxi, MS, for workforce training	New Hampshire Manufacturing Extension Partnership, Concord, NH, for in- cumbent worker retraining initiative.	Nine Star Education & Employment Services, Anchorage, AK, for job training for prisoner re-entry programs.	Nine Star Education and Employment, Anchorage, AK, to expand Math for the Trades course.	North Carolina Rural Economic Development Center, Raleigh, NC, for Com- munity Mobilization Project for Dislocated Workers.
Employment and Training Administration (ETA)—Training & Employment Services (TEA)	Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TEX)	Employment and Training Administration (ETA)—Training & Employment Services (TEX)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TES).
Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor

	Funding Requesting member	\$400,000 Dorgan, Conrad	\$150,000 Schumer	\$100,000 Murray	\$500,000 Boxer	\$100,000 Specter	\$100,000 Schumer	\$200,000 Landrieu	\$900,000 Murray	\$100,000 Lugar	\$150,000 Boxer	\$100,000 Specter	\$300,000 Murray, Cantwell
congressionally directed spending thems—continued	Project	North Dakota State College of Science, Fargo, ND, for biosciences work- force training and equipment.	Parnassa Fund, Inc., New York, NY, for EPI Emergency Employment and Job Creation Network.	Partners in Careers, Vancouver, WA, for workforce development for female veterans.	Peralta Community College District, Oakland, CA, for the East Bay Green Jobs Project.	Philadelphia Opportunities Industrialization Center, Philadelphia, PA, for salaries and equipment.	Plattsburgh-North Country Chamber of Commerce, Plattsburgh, NY, for an on the job training program.	Rapides Parish Police Jury Office of Economic & Workforce Development, Alexandria, LA, to train displaced workers in demand occupations in- cluting green ints	Regional Education & Training Center at Satsop, Elma, WA, for programs focused on rapid certifications, entry-level degrees and advanced cer- rifications	River Valley Resources, Inc., Madison, IN, for workforce training	San Mateo County Community College District, San Mateo, CA, for cur- riculum development, job placement and job retention services at the	Annee treatti vareer Avvancement Avaeuenty. Scranton Electricians JATC, Scranton, PA, for training in green technolo- gies.	SEU Healthcare NW Training Partnership, Federal Way, WA, for training of home care aides, including equipment.
CUNGRESSIUN	Account	Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES).
	Agency	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor

CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued

Cochran, Wicker	Murkowski, Begich	Cochran, Wicker	Harkin	Landrieu	Sanders	Specter	Warner, Webb	Klobuchar, Franken	Bennett	Bennett	Leahy	Leahy
\$400,000	\$100,000	\$350,000	\$200,000	\$200,000	\$100,000	\$100,000	\$250,000	\$100,000	\$250,000	\$250,000	\$500,000	\$300,000
South Delta Planning and Development District, Greenville, MS, for work-force training.	Southwest Alaska Vocational & Education Center, King Salmon, AK, for workforce development programs in rural Alaska.	Southwest Mississippi Community College, Summit, MS, for workforce training.	Spectrum Resources, Des Moines, IA, to expand the Project Phoenix job training program.	St. Bernard Project, Chalmette, LA, for operational and equipment expenses.	State of Vermont Department of Public Safety, Waterbury, VT, for fire- fighting and emergency services training support.	Steamfitters Local 449 and Plumbers Local 27, Pittsburgh, PA, for training program for those entering the pipe trades industry.	Total Action Against Poverty, Roanoke, VA, to provide job training to help individuals obtain and retain employment.	Twin Cities RISE!, Minneapolis, MN, to expand job training program, and support program replication in other cities.	United 4 Economic Development, Salt Lake City, UT, for workforce develop- ment and training.	Utah Capital Investment Corporation, Salt Lake City, UT, for workforce de- velopment, education and training.	Vermont HITEC, Williston, VT, for the Vermont HITEC Job Training Initia- tive.	Vermont Technical College, Randolph Center, VT, for development of a paramedicine program.
Employment and Training Administration (ETA)—Training & Employment Services	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TFS)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES)	Employment and Training Administration (ETA)—Training & Employment Services (TES).
Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor

ITEMSContinued
SPENDING
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	I				و	510							
Requesting member	Leahy	Casey	Murray	Boxer	Murray	Kerry	Murray	Bingaman, Tom Udall	Inouye, Akaka	Harkin	Mikulski, Cardin	Cochran, Wicker	Harkin, Grassley
Funding	\$500,000	\$150,000	\$1,000,000	\$100,000	\$400,000	\$100,000	\$100,000	\$150,000	\$800,000	\$300,000	\$100,000	\$100,000	\$400,000
	Vermont Technical College, Randolph Center, VT, for Green Jobs Workforce Development.	Veterans Leadership Program of Western Pennsylvania, Pittsburgh, PA, for a jobs program for veterans.	Washington State Workforce Board, Olympia, WA, to better engage employ- ers with regional workforce development systems.	Women's Initiative for Self Employment, San Francisco, CA, for an eco- nomic self sufficiency program for low-income women.	Workforce Development Council of Seattle-King County, Seattle, WA, to align K–12 and post-secondary education to better meet the workforce skill needs in King County.	Year Up Boston, Boston, MA, to support the expansion of curriculum development and career placement services for urban youth.	Youthcare, Seattle, WA, to provide youth with education and training in the telecommunications industry.	YWCA Middle Rio Grande, Albuquerque, NM, for a transitional living pro- gram for at-risk women veterans and their children to prepare them for entry into the workforce.	Bishop Museum, Honolulu, HI, for conservation and other projects, includ- ing arts education for youth and the study and preservation of the his- tory of Kalaugapa.	City of Cedar Rapids, IA, for automating the circulation system at the Cedar Rapids Library.	City of Hageistown, MD, for educational programming and displaying the Doleman collection.	Delta State University, Cleveland, MS, for library technology upgrades, in- cluding the purchase of equipment.	Dubuque Historical Society, Dubuque, IA, for exhibits relating to the Mis- sissippi River.
Account	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Employment and Training Administration (ETA)—Training & Employment Services (TES).	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries
Agency	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Department of Labor	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.

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Reed, Whitehouse Cochran, Wicker		Cochran	Cochran, Wicker		Johnson	Bennett, Hatch	Cochran	Cochran, Wicker	Cochran, Wicker	Cochran, Wicker	Harkin, Grassley	Inouye, Murkowski	Harkin	Burris, Cantwell, Gillibrand, Klobuchar, Levin, Menen- dez, Reid, Rockefeller, Warner	Akaka, Begich, Scott Brown, Inouye, Kerry, Murkowski	Bennett, Harkin
\$300,000 \$400,000	\$100,000	\$250,000	\$100,000	\$400,000	\$100,000	\$400,000	\$100,000	\$150,000	\$150,000	\$150,000	\$450,000	\$15,084,000	\$1,942,000	\$4,000,000	\$8,754,000	\$17,438,000
Greenville Public Library, Smithfield, RI, for library technology and pro- grams. Mississippi Children's Museum, Jackson, MS, for exhibits and educational	programming. Mississippi Guift Coast Community College, Perkinston, MS, for collecting,	catatoging, and atchiving or newsparker and upplical medua. Oh-o'Keefe Museum of Art, Biloxi, MS, for design and exhibits	Oxford Lafayette County Heritage Foundation, Oxford, MS, for exhibits and design.	Science Center of Iowa, Des Moines, IA, for educational exhibits	South Dakota School of Mines and Technology, Rapid City, SD, for preser- vation activities and storage.	Southern Utah University, Cedar City, UT, for exhibits, installations, and equipment.	Tennessee-Tombigbee Waterway Transportation Museum, Columbus, MS, for exhibit design and digitization of documents.	University of Mississippi, University, MS, for documentation, preservation, restoration, and programming related to the American Music Archives.	University of Mississippi, University, MS, for museum education and out- reach programs.	Walter Anderson Museum of Art, Ocean Springs, MS, for archive and digitization of collections.	World Food Prize, Des Moines, IA, for exhibits at the Dr. Norman E. Borlaug Hall of Laureates Museum.	Strengthening Alaska Native and Native Hawaiian Serving Institutions Pro- grams for activities authorized under the Higher Education Act.	Close Up Fellowships Program for activities authorized under the Elemen- tary and Secondary Education Act.	Communities in Schools for dropout prevention programs	Exchanges with Historic Whaling and Trading Partners for activities au- thorized under the Elementary and Secondary Education Act.	John F. Kennedy Center for the Performing Arts and its affiliate VSA (for- merly VSA arts), as authorized by the Elementary and Secondary Edu- cation Act.
Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Museums & Libraries	Higher Education	Innovation and Improvement	Innovation and Improvement	Innovation and Improvement	Innovation and Improvement
Institute of Museum & Library Serv- ices. Institute of Museum & Library Serv-	ices. Institute of Museum & Library Serv-	lices. Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Institute of Museum & Library Serv- ices.	Department of Education National Projects.	Department of Education National Projects.	Department of Education National Projects.	Department of Education National Projects.	Department of Education National Projects.

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	Requesting member	Bennett, Harkin	Akaka, Bennett, Bingaman, Sherrod Brown. Bunning.	Burris, Casey, Collins,	Conrad, Crapo, Dodd,	Gillibrand, Grassley,	tenberg, Leahy, Levin,	Lieberman, Lincoln,	Menendez, Pryor, Reed,	Risch, Rockefeller, Sand-	ers, Schumer, Sessions,	Shaheen, Stabenow, Tom	Udall, Whitehouse,	Wicker, Wyden	Akaka, Bayh, Begich, Ben-	nett, Bingaman, Sherrod	Brown, Bunning, Burris,	Cantwell, Casey, Cham-	bliss, Cornyn, Dodd,	Franken, Gillibrand,	Grassley, Hatch, Hagan,	Kautman, Kerry, Klo-	buchar, Lautenberg,	Leahy, Levin, Lieberman,	Lincoln, Lugar, Menen-	dez, Merkley, Pryor,	Reed, Rockefeller, Sand-	ers, Schumer, Sessions,	Shaheen, Snowe, Stabe-	IIOW, IUIII UUAII, VUIIIU-	vicit, warner, write- house, Wyden
	Funding	\$10,649,000	\$25,646,000												\$6,000,000																
CONGRESSIONALLY DIRECTED SPENDING ITEMS—Continued	Project	National Board for Professional Teaching Standards for activities author- ized under the Elementary and Secondary Education Act.	Na	, ,											Reach out and Read authorized under the Elementary and Secondary Edu-	cation Act.															
CONGRESSIO	Account	Innovation and Improvement	Innovation and Improvement												Innovation and Improvement																
	Agency	Department of Education National Projects.	Department of Education National Projects.	×											Department of Education National	Projects.															

Akaka, Bennett, Sherrod Brown, Burris, Casey, Dodd, Franken, Gilli- brand, Hagan, Harkin, Johnson, Kerry, Lauten- berg, Levin, Lieberman, Lincoln, Lugar, Menen- dar, Phone Robert	et, 11,900 to the second science, Rockefeller, Sanders, Schumer, Sassions, Sha- heen, Snowe, Stabenow, Whitehouse, Wicker, Wyden Wyden Akaka, Alexander, Bennet, Bingaman, Boxer, Sherrod Brown, Burris, Cardin, Casey, Dodd, Dribin, Gillitrand, Harrishiron, Interhison, John	son, Kohi, Landrieu, Lau- tenberg, Lieberman, Lin- tenberg, Lieberman, Lin- coln, Menendez, Mikul- ski, Bill Nelson, Pryor, Reed, Reid, Schumer, Specter, Stabenow, Whitehouse, Wicker, Wyden	Grassley, Hatch, Leahy	Akaka, Burris, Dodd, Hagan, Lincoln	Murkowski	Akaka, Inouye	Harkin
\$24,803,000	\$22,000,000		\$25,636,000	\$5,019,000	\$6,000,000	\$1,500,000	\$5,000,000
Reading is Fundamental authorized under the Elementary and Secondary Education Act.	Teach for America as authorized under the Higher Education Act		Center for Civic Education for two programs (We the People and Coopera- tive Education Exchange) that are authorized in the Elementary and Secondary Education Act as part of the Civic Education program.	National Council on Economic Education for the Cooperative Education Ex- change program, which is authorized in the Elementary and Secondary Education Act as part of the Civic Education program.	Alaska Native Educational Equity for activities authorized under section 7304(d)(2) of the Elementary and Secondary Education Act.	Hawaii Department of Education for school renovation activities	New Leaders for New Schools for activities authorized under the Elemen- tary and Secondary Education Act.
Innovation and Improvement	Innovation and Improvement		Safe Schools and Citizenship Education	Safe Schools and Citizenship Education	School Improvement	School Improvement	School Improvement
Department of Education National Projects.	Department of Education National Projects.		Department of Education National Projects.	Department of Education National Projects.	Department of Education National Projects.	Department of Education National Projects.	Department of Education National Projects.

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ITEMS
SPENDING
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Agency	Account	Project	Funding	Requesting member
artment of Education National roiects.	School Improvement	School Improvement	\$500,000	Akaka, Inouye
Department of Education National Projects.	School Improvement	University of Hawaii School of Law for a Center of Excellence in Native Hawaiian Law.	\$1,500,000	Akaka, Inouye
artment of Education National rojects.	Special Education	Recording for the Blind and Dyslexic, Inc. for development, production, and circulation of accessible educational materials.	\$13,250,000	Harkin
Department of Health and Human Services National Projects.	Health Resources and Services	Delta Heatth Alliance, Inc to improve the delivery of public heatth services in the Mississippi Delta region under title III of the Publc Heatth Serv- ice Act.	\$34,927,000	Cochran
Department of Labor National Projects.	Departmental Management	International Program for the Elimination of Child Labor for the U.S. con- tribution to a multinational effort to combat child labor consistent with Executive Order 12216 and the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008.	\$40,000,000	Harkin
Department of Labor National Projects.	Mine Safety and Health Administration	United Mine Workers of America for mine rescue team training activities authorized under the Mine Safety and Health Act.	\$1,500,000	Rockefeller

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2010 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 2011 [In thousands of dollars]

[In thousands of dollars]	goliarsj				
Item	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation com- pared with (+ or -)	commendation com- (+ or -)
		2	recommendation	2010 appropriation	Budget estimate
TITLE I—DEPARTMENT OF LABOR					
EMPLOYMENT AND TRAINING ADMINISTRATION					
TRAINING AND EMPLOYMENT SERVICES					
Grants to States: Adult Training, current year Advance from prior year	149,540 (712,000) 712,000	194,884 (712,000) 712,000	184,884 (712,000) 713,000		- 10,000
		1 12,000	112,000		
Subtotal	861,540	906,884	896,884	+ 35,344	-10,000
Youth Training	924,069	1,025,000	995,000	+ 70,931	- 30,000
Dislocated Worker Assistance, current year	323,840 (848,000) 860,000	386,147 (860,000) 860,000	381,147 (860,000) 860,000	+ 57,307 (+ 12,000)	- 5,000
Subtotal	1,183,840	1,246,147	1,241,147	+ 57,307	-5,000
Subtotal, Grants to States	2,969,449 (1,397,449) (1,572,000)	3,178,031 (1,606,031) (1,572,000)	3,133,031 (1,561,031) (1,572,000)	+ 163,582 (+ 163,582)	- 45,000 (- 45,000)
Federally Administered Programs: Dislocated Worker Assistance National Reserve: Current year Advance from prior year Fiscal year 2012	29,160 (212,000) 200,000	29,160 (200,000) 200,000	29,160 (200,000) 200,000	(12,000)	
Subtotal	229,160	229,160	229,160		
Subtotal, Dislocated Worker Assistance	1,413,000	1,475,307	1,470,307	+ 57,307	-5,000

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COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2010 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 2011—Continued

[In thousands of dollars]

fem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with ($+$ or $-$)	commendation com- + or -)
		2	recommendation	2010 appropriation	Budget estimate
Native Americans	52,758 84,620 1,000 102,500	55,000 87,378 1,000 120,000	55,000 87,378 1,000 110,000	+ 2,242 + 2,758 + 7,500	- 10,000
Subtotal, Federally Administered Programs [FAP] Current Year Fiscal year 2012	470,038 (270,038) (200,000)	492,538 (292,538) (200,000)	482,538 (282,538) (200,000)	+ 12,500 (+ 12,500)	- 10,000 (- 10,000)
National Activities: Pilots, Demonstrations, and Research	93,450 40,000 108,493 9,600 125,000 12,500	46,556 85,000 98,000 11,600 13,750	73,559 65,000 98,000 11,600 13,750	$\begin{array}{c} -19,891\\ +25,000\\ -10,493\\ +2,000\\ -125,000\\ +1,250\end{array}$	+ 27,003 - 20,000
Subtotal	389,043	254,906	261,909	-127,134	+ 7,003
Total, Training and Employment Services [TES]	3,828,530 (2,056,530) (1,772,000)	3,925,475 (2,153,475) (1,772,000)	3,877,478 (2,105,478) (1,772,000)	+ 48,948 (+ 48,948)	- 47,997 (- 47,997)
Administration	29,190 983,015 (591,000) 591,000 5,000 (100,000)	30,110 981,253 981,253 591,000 591,000 5,000 (100,000)	30,110 986,095 (591,000) 591,000 591,000 (100,000)	+ 920 + 3,080	+ 4,842

Fiscal year 2012	100,000	100,000	100,000		
Total, Office of Job Corps	1,708,205 (1,017,205) (691,000)	1,707,363 (1,016,363) (691,000)	1,712,205 (1,021,205) (691,000)	+ 4,000 (+ 4,000)	+ 4,842 (+ 4,842)
COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS	825,425	600,425	600,425	-225,000	
FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES	1,818,400	1,938,200	1,938,200	+119,800	
STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS					
Unemployment Compensation [UI]: State Operations	3,195,645	3,515,079 55,000	3,570,079	+374,434 - 50,000	+ 55,000 - 55,000
National Activities	11,310	11,310	11,310		
Subtotal, Unemployment Compensation	3,256,955	3,581,389	3,581,389	+324,434	
Employment Sarvice [ES]: Allotments to States: Federal Funds	22,683 680,893	22,683 680,893	22,683 680,893		
Subtotal	703,576	703,576	703,576		
ES National Activities	20,994	20,994	20,994		
Subtotal, Employment Service Federal Funds Trust Funds	724,570 (22,683) (701,887)	724,570 (22,683) (701,887)	724,570 (22,683) (701,887)		
Foreign Labor Certification: Federal Administration Grants to States	53,307 15,129	50,519 15,129	50,519 15,129	- 2,788	
Subtotal, Foreign Labor Certification	68,436 63,720	65,648 63,720	65,648 68,720	- 2,788 + 5,000	+ 5,000
Total, State UI and ES Federal Funds Federal Funds Trust Funds STATE PAID LEAVE FUND	4,113,681 (86,403) (4,027,278)	4,435,327 (86,403) (4,348,924) 50,000	4,440,327 (91,403) (4,348,924) 10,000	$\begin{array}{c} + 326,646 \\ (+5,000) \\ (+321,646) \\ + 10,000 \end{array}$	+ 5,000 (+5,000) - 40,000

[In thousands of dollars]

		-	Committee	Senate Committee recommendation com- pared with (+ or -)	commendation com-
Kell	zuru арргорпации	Duuget estimate	recommendation	2010 appropriation	Budget estimate
ADVANCES TO THE UI AND OTHER TRUST FUNDS ²	120,000	200,000	200,000	+ 80,000	
	46,859 8,553 12,308 3,490 39,490	50,564 11,225 14,803 3,450 43,801	50,564 11,225 14,803 3,450 43,801	+ 3,705 + 2,672 + 2,495 - 40 + 4,305	
Apprenticeship Services Executive Direction Trust Funds	2/,/84 7,075 2,091	28,965 7,122 2,112	28,965 7,122 2,112	+ 1,181 + 47 + 21	
Total, Program Administration	147,656 (97,516) (50,140)	162,042 (104,904) (57,138)	162,042 (104,904) (57,138)	+ 14,386 (+7,388) (+6,998)	
Total. Employment and Training Administration [ETA]	12,561,897 8,484,479 (6,021,479) (2,463,000) 4,077,418	13,018,832 8,612,770 (6,149,770) (2,463,000) 4,406,062	12,940,677 8,534,615 (6,071,615) (2,463,000) 4,406,062	+ 378,780 + 50,136 (+ 50,136) + 328,644	- 78, 155 - 78, 155 (- 78, 155)
Enforcement and Participant Assistance	129,199 18,994 6,668	133,241 22,232 6,522	133,241 22,232 6,522	+ 4,042 + 3,238 - 146	
Total, EBSA	154,861	161,995	161,995	+ 7,134	

PENSION BENEFIT GUARANTY CORPORATION [PBGC]					
Pension insurance activities	(86,412) (234,005) (143,650)	(71,896) (249,408) (144,997)	(71,896) (249,408) (144,997)	(-14,516) (+15,403) (+1,347)	
Total, PBGC (program level)	(464,067)	(466,301)	(466,301)	(+2,234)	
Wage and Hour Division	227,606 41,367 105,386 51,900	244,240 45,181 113,433 53,778	244,240 45,181 112,433 53,778	+ 16,634 + 3,814 + 7,047 + 1,878	- 1,000
Federal Programs for Workers' Compensation	116,171 2,124	125,165 2,181	124,165 2,181	+ 7,994 + 57	- 1,000
Federal employees' compensation benefits	184,000 3,000	180,000 3,000	180,000 3,000	-4,000	
Total, Special Benefits	187,000	183,000	183,000	- 4,000	
Benefit payments	220,000 5,180	198,000 5,220	198,000 5,220	-22,000 + 40	
Subtotal, program level	225,180 - 56,000	203,220 - 45,000	203,220 45,000	-21,960 + 11,000	
Total, Current Year	169,180 45,000	158,220 41,000	158,220 41,000	-10,960 -4,000	
Total, Special Benefits for Disabled Coal Miners	214,180	199,220	199,220	- 14,960	
Benefit payments and interest on advances	604,736 32,720 25,091 327	650,371 33,075 25,394 327	650,371 33,075 25,394 327	+ 45,635 + 355 + 303	

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ftem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	ommendation com- + or -)
				2010 appropriation	Budget estimate
Subtotal, Black Lung Disability Trust Fund	662,874	709,167	709,167	+ 46,293	
Treasury Department Administrative Costs	356	356	356		
Total, Black Lung Disability Trust Fund	663,230	709,523	709,523	+ 46,293	
Total, Office of Workers Compensation Programs	1,182,705	1,219,089 1,216,008	1,218,089	+ 35,384 + 35,327	- 1,000
	(1,135,581) (1,135,581) (45,000) 2,124	(1,175,908) (1,175,908) (41,000) (181)	(1,174,908) (1,174,908) (41,000) 2181	(+39,327) (-4,000) +57	(-1,000)
SP	- - - -	4 2 1	- 	5	
SALARIES AND EXPENSES					
Safety and Health Standards	19,569 223,399 104 393	23,756 233,445 105 803	23,756 233,445 105,893	+4,187 + 10,046 + 1500	
date regens Technical Support	25,920	26,186	26,186	+266	
Compliance Assistance: Federal Assistance	73,380	70,255	71,255	- 2,125	+1,000
State Consultation Grants	54,798 10,750	55,798 11,000	55,798 11,000	+1,000 +250	
Subtotal, Compliance Assistance	138,928	137,053	138,053	-875	+1,000
Safety and Health Statistics Executive Direction and Administration	34,875 11,536	34,981 11,782	34,981 11,782	+ 106 + 246	
Total, OSHA	558,620	573,096	574,096	+ 15,476	+ 1,000

$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	357,293 360,780 377,000 + 19,707 + 16,220 197,852 217,234 217,234 + 19,382 - 10,862 78,264 67,438 67,438 - 10,826 - 10,826 201,081 234,521 224,021 + 22,940 - 10,500 88,553 81,202 81,202 - 7,351 - 10,500 33,793 34,714 34,714 + 921 10,500	611,447 645,351 634,851 + 23,404 - 10,500 533,183 577,913 567,413 + 34,230 - 10,500 78,264 67,438 67,438 - 10,826 - 10,600 39,031 39,138 44,138 + 5,107 + 5,000	33,350 34,225 34,225 +875 +875 19,892 20,642 20,642 +750 -14,000 8,500 50,300 36,300 +27,800 -14,000 117,121 122,234 138,234 +27,800 -14,000 327 327 327 +27,810 +16,000 92,669 115,000 117,000 +24,331 +2,000
MINE SAFETY AND HEALTH ADMINISTRATION [MSHA] SALARIES AND EXPENSES Coal Enforcement Meta/Non-metal Enforcement Meta/Non-metal Enforcement Standards Development Educational Policy and Development Technical Support Program evaluation Program evaluation	Total, MSHABUREAU OF LABOR STATISTICS [BLS] BUREAU OF LABOR STATISTICS [BLS] SALARIES AND EXPENSES Employment and Unemployment Statistics Labor Market Information Prices and Cost of Living Compensation and Working Conditions Productivity and Technology Executive Direction and Staff Services	Total, BLS	Executive Direction

[In thousands of dollars]

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ftem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- + or -)
		,		2010 appropriation	Budget estimate
Adjudication Women's Bureau Civil Rights Activities Chief Financial Officer	29,286 11,604 7,220 5,361	30,367 12,255 7,335 5,438	30,367 12,255 7,335 5,438	+ 1,081 + 651 + 115 + 77	
Total, Salaries and expenses	356,006 (355,679) (327)	428,624 (428,297) (327)	432,624 (432,297) (327)	+ 76,618 (+76,618)	+ 4,000 (+ 4,000)
State administration, Grants	165,394 7,000 35,313 2,449 36,330 9,641	165,394 8,000 35,680 2,449 41,330 9,641	$165,394 \\ 8,000 \\ 35,680 \\ 2,449 \\ 41,330 \\ 9,641 \\ 9,641 \\ \end{array}$	+ 1,000 + 367 + 5,000	
Total, VETS Tederal Funds Trust Funds OFFICE OF INSPECTOR GENERAL [IG]	256,127 45,971 210,156	262,494 50,971 211,523	262,494 50,971 211,523	+ 6,367 + 5,000 + 1,367	
Program Activities	78,093 5,921	79,090 5,992	79,090 5,992	+ 997 + 71	
Total, IG	84,014	85,082	85,082	+1,068	
Total, Departmental Management Federal Funds Current Year Trust Funds	696,147 479,743 (479,743) 216,404	776,200 558,358 (558,358) 217,842	780,200 562,358 (562,358) 217,842	+ 84,053 + 82,615 (+ 82,615) + 1,438	+ 4,000 + 4,000 (+ 4,000)

				32	29				
	- 64,435 - 64,435 (- 64,435)		- 294,847 - 75,000		— 369,847	- 27,169	+ 5,000	+5,000 +50,725 +15,000 +5,100	+ 5,727
+ 4,537	+ 602,955 + 283,642 (+ 287,642) (- 4,000) + 319,313		- 74,480 + 34	+1	- 74,445		+ 52 + 47 + 5,000 + 106	+ 5,205 + 51,077 + 15,063 + 5,100	+ 71 + 5,737
4,537	17,191,215 12,497,692 (9,993,692) (2,504,000) 4,693,523		2,185,146 40 16,109	129 1,976	2,203,400	141,420	24,602 22,133 6,266 49,342	102,343 90,000 47,982 5,100	33,345 10,617
4,537	17,255,650 12,562,127 (10,058,127) (2,504,000) 4,693,523		2,479,993 75,000 40 16,109	129 1,976	2,573,247	168,589	24,602 22,133 1,266 49,342	97,343 39,275 32,982	33,345 4,890
	16,588,260 12,214,050 (9,706,050) (2,508,000) 4,374,210		$\begin{array}{c} 2,185,146\\74,480\\40\\16,075\end{array}$	128 1,976	2,277,845	141,420	24,550 22,086 1,266 49,236	97,138 38,923 32,919	33,274 4,880
Working capital fund	Total, Title I, Department of Labor Federal Funds Current Year Fiscal year 2012 Trust Funds	TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH RESOURCES AND SERVICES ADMINISTRATION [HRSA] HEALTH RESOURCES AND SERVICES Bureau of Primary Health Care	Community health centers State health access grants Free Clinics Medical Malpractice National Hansen's Disease Program	Buildings and Facilities	Subtotal, Bureau of Primary Health Care	National Health Service Corps	Health Professions, Training for Diversity: Centers of excellence	Subtotal, Health Professions, Training for Diversity	Interdisciplinary Community-based Linkages: Area health education centers

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Item	2010 appropriation	Budget estimate	Committee	Senate Committee recommended with (+ or	Senate Committee recommendation compared with $(+ \text{ or } -)$
		0	recommendation	2010 appropriation	Budget estimate
Geriatric programs	33,675	33,747	33,747	+ 72	
Subtotal, Interdisciplinary Community Linkages	71,829	71,982	77,709	+ 5,880	+ 5,727
Workforce information and analysis	2,826 9,647	8,781 9,668	13,781 19,668	+ 10,955 + 10,021	+5,000 + 10,000
Nursing Programs: Advanced Education Nursing Nurse education, practice, and retention Nursing workforce diversity	64,301 39,811 16,073	64,438 39,896 16,107	74,438 50,000 16,107	+ 10,137 + 10,189 + 34	+ 10,000 + 10,104
Loan repayment and scholarship program	93,864 4,557 24,947	93,864 4,567 25,000	93,864 4,567 53,309	+ 10 + 28,362	+ 28,309
Subtotal, Nursing programs	243,553	243,872	292,285	+ 48,732	+ 48,413
Subtotal, Health Professions	496,835	503,903	648,868	+ 152,033	+ 144,965
Children's Hospitals Graduate Medical Education	$\begin{array}{c} 316,824\\ 4,965\\ 19,750\\ -19,750\\ -3,758\\ -3,758\end{array}$	317,500 5,000 21,000 - 21,000 4,000 - 4,000	317,500 5,000 21,000 -21,000 4,000 -4,000	+ 676 + 35 + 35 + 1,250 - 1,250 + 242 - 242	
Subtotal, BHP	960,044	994,992	1,112,788	+ 152,744	+ 117,796
Maternal and Child Health Block Grant	660,710 4,740 9,918	673, 187 4, 750 9, 939	673,187 4,750 9,939	+ 12,477 + 10 + 21	

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[In thousands of dollars]	Jollars				
ftem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- + or -)
				2010 appropriation	Budget estimate
Medical Home Demonstration			40,000	+ 40,000	+ 40,000
Subtotal, Healthcare systems bureau	92,885	101,010	142,952	+ 50,067	+41,942
Rural Health Programs					
Rural outrach grants	55,905	57,266	57,266	+1,361	
rurar rearur vesearur	40,915	41,200	41,200	+ 285	
Delta Health Initiative	34,927	7 575	34,927		+34,927
rural ariu community access to emergency uevices	10.005	10.075	2,320	+ 70	
	7,185	7,200	7,200	+ 15	
Radiation Exposure Screening and Education Program	1,948	1,952	1,952	+4	
Subtotal, Rural health programs	163,335	130,169	165,096	+ 1,761	+ 34,927
Denali Commission	10,000			-10,000	
Family Planning	316,832	327,356	327,356	+ 10,524	. ב2 220
realui cale-relateu lacintes and acumites Telehealth	11.575	11.600	15.000	-100,3/1 + 3,425	+3.400
Program management	147,052	153,808	154,808	+ 7,756	+1,000
Total, Health Resources and Services Administration [HRSA]	7,482,994	7,601,658	7,490,663	+ 7,669	-110,995
Total, Health resources and services program level		(7,626,658)	(7,515,663)	(+7,669)	(-110,995)
Total, Evaluation Tap Funding	(25,000)	(25,000)	(25,000)		
HEALTH EDUCATION ASSISTANCE LOANS [HEAL] PROGRAM ACCOUNT					
HEAL Liquidating account	(1,000)			(-1,000)	
HEAL Program management	2,847			- 2,847	
Total, HEAL	2,847			- 2,847	

VACCINE INJURY COMPENSATION PROGRAM TRUST FUND					
Post fiscal year 1988 claims	115,908 6,502	115,908 6,502	115,908 6,502		
Total, Vaccine Injury Compensation Trust Fund	122,410	122,410	122,410		
Covered Countermeasure Process Fund		2,500	2,500	+ 2,500	
Total, HRSA	7,608,251	7,726,568	7,615,573	+ 7,322	-110,995
Total, HRSA program level	(7,633,251)	(7,751,568)	(7,640,573)	(+7, 322)	(-110,995)
CENTERS FOR DISEASE CONTROL AND PREVENTION [CDC]					
DISEASE CONTROL, RESEARCH, AND TRAINING					
Infectious Diseases	1,996,018	1,899,987	1,927,780	- 68,238	+ 27,793
Balances from Public Law 111–32 Pan Flu (NA) Evaluation Tap Funding	(12,864)	(156,344) (12,864)	(116,344) (12,864)	(+116,344)	(40,000)
Subtotal, Infectious Diseases program level	(2,008,882)	(2,069,195)	(2,056,988)	(+48,106)	(-12,207)
Health Promotion					
Chronic disease prevention, health promotion, and genomics	931,154 143,347	937,307 143,539	931,154 145,289	+ 1,942	-6,153 + 1,750
Subtotal, Health promotion	1,074,501	1,080,846	1,076,443	+ 1,942	-4,403
Health Information and Service	72,044 (216,599)	97,033 (209,914)	228,748 (72,600)	+156,704 ($-143,999$)	+ 131,715 ($- 137,314$)
Subtotal, Health information and service program	(288,643)	(306,947)	(301,348)	(+12,705)	(-5,599)
Environmental Health and Injury					
Environmental health Iniury revention and control	187,090 148.593	182,350 147.570	190,710 147.729	+3,620 -864	+8,360 + 159
Subtotal, Environmental health and injury	335,683	329,920	338,439	+ 2,756	+8,519
National Institute for Occupational Safety and Health ³	281,405 (91,724)	364,318 (91,724)	431,569 (21,724)	+150,164 (-70,000)	+ 67,251 (- 70,000)
Subtotal, Occupational Safety and health program ³	(373,129)	(456,042)	(453,293)	(+ 80,164)	(-2,749)

[In thousands of dollars]

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Item	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	mmendation com- + or -)
		,	Iconinienadon	2010 appropriation	Budget estimate
Energy employees occupational illness compensation program Global health Public health preparedness and response Balances from Public Law 111–32 Pan Flu [NA]	55,358 336,075 1,549,128	55,358 351,944 1,464,656 (68,515)	55,358 353,294 1,464,668 (68,515)	+ 17,219 + 84,460 + 68,515)	+1,350 +12
Subtotal, Public Health Preparedness	1,549,128	1,533,171	1,533,183	- 15,945	+ 12
Public health research	(31,170) (31,404 211,404 102,019 69,140 369,814	(31,170) (31,170) 192,916 102,034 382,152	(31,170) (31,170) 210,108 102,034 12,000 382,152	$\begin{array}{c} -1,296\\ -1,296\\ +15\\ -57,140\\ +12,338\end{array}$	+ 17,192 + 12,000
Total, CDC	6,452,589 6,397,231 (352,357) 6,452,589	6, 321, 164 6, 265, 806 (345, 672) 6, 321, 164	6,582,593 6,527,235 (138,358) 6,582,593	+130,004 +130,004 (-213,999) +130,004	+ 261,429 + 261,429 (- 207,314) + 261,429
Total, Centers for Disease Control and Prevention program level	(6,804,946)	(6,891,695)	(6,905,810)	(+100,864)	(+14,115)
National Cancer Institute	5,100,906 3,095,349 413,014	5,264,643 3,187,516 423,511	5,256,409 3,182,524 422,845	+155,503 +87,175 +9,831	- 8, 234 - 4, 992 - 666
National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK]	1,807,094 (150,000)	1,857,589 (150,000)	1,854,674 (150,000)	+ 47,580	-2,915
Subtotal, NIDDK program level	1,957,094 1,635,477	2,007,589 1,681,333	2,004,674 1,678,696	+ 47,580 + 43,219	-2,915 -2,637

National Institute of Allergy and Infectious Diseases	4,516,051 300,000	4,677,070 300,000	4,669,301 300,000	+153,250	-7,769
Subtotal, NIAID program level	4,816,051	4,977,070	4,969,301	+153,250	-7,769
National Institute of General Medical Sciences National Institute of Child Health and Human Develonment	2,050,665 1.328.828	2,125,090 1.368.894	2,121,783 1.366.750	+71,118 +37.922	-3,307 -2,144
National Eye Institute	706,659	724,360	723,220	+ 16,561	-1,140
National Institute of Environmental Health Sciences	689,462	707,339	706,227	+ 16,765	-1,112
varional institute on Aging	538.773	1,142,337 555.715	1,140,34/ 554.846	+30,913 + 16.073	— 1,790 — 869
National Institute on Deafness and Other Communication Disorders	418,594	429,007	428,331	+ 9,737 + A_{385}	- 676 - 235
National Institute on Alcohol Abuse and Alcoholism	462,098	474,649	473,904	+ 11,806	- 745
National Institute on Drug Abuse	1,059,288	1,094,078	1,092,369 1 537 042	+ 33,081	-1,709
National Human Genome Research Institute	515,799	533,959	533,127	+17,328	- 2,403 - 832
National Institute of Biomedical Imaging and Bioengineering	316,405	325,925	325,415	+ 9,010	-510
National Center for Research Resources	1,268,329	1,308,741	1,306,695	+ 38,366	-2,046
National Center for Complementary and Alternative Medicine	128,772	132,004	131,796	+ 3,024	- 208
National Institute on Minority Health and Health Disparities	211,474 60 007	219,046	218,705	+7,231	-341
	166,60	10,021	+12'21	116'7 +	
National Library of Medicine (NLM)	350,557 (8,200)	364,802 (8,200)	364,254 (8,200)	+ 13,697	- 548
Subtotal	358.757	373.002	372.454	+ 13.697	- 548
Office of the Director	1,176,844	1,220,478	1,268,580	+ 91,736	+48,102
Common fund	(544,109) 99,985	(561,629) 125,581	(561,629) 125,420	(+17,520) + 25,435	- 161
Total, Mational Institutes of Health [NIH]	31,005,201 - 300,000 (8,200)	32,007,237 - 300,000 (8,200)	32,007,237 - 300,000 (8,200)	+ 1,002,036	
Total, NIH Program Level	(30,713,401)	(31,715,437)	(31,715,437)	(+1,002,036)	

[In thousands of dollars]	ollars]				
ttem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	mmendation com- + or -)
			recommendation	2010 appropriation	Budget estimate
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION [SAMHSA]					
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES					
Mental Health: Programs of Regional and National Significance	361,352 300 735	374,184 300 735	386,309 200 725	+ 24,957	+ 12,125
Evaluation Tap Funding	(21,039)	(21,039)	(21,039)		
Subtotal, Program level	(420,774)	(420,774)	(420,774)		
Children's Mental Health	121,316 65,047	126,214 70,000	126,214 70,000	+4,898 +4,953	
Protection and Advocacy	30,380	30,380	38,380	+ z,uuu	+ 2,000
Subtotal, Mental Health	983,830	1,006,513	1,020,638	+ 36,808	+ 14,125
Subtotal, Mental health program level	(1,004,869)	(1,027,552)	(1,041,677)	(+ 36,808)	(+14, 125)
Substance Abuse Treatment: Programs of Regional and National Significance	445,864 (8,596)	480,086 (8,596)	464,936 (8,596)	+ 19,072	- 15, 150
Subtotal, Program level	(454,460)	(488,682)	(473,532)	(+19,072)	(-15, 150)
Substance Abuse block grant	1,719,391 (79,200)	1,719,391 (79,200)	1,719,391 (79,200)		
Subtotal, Program level	(1,798,591)	(1,798,591)	(1,798,591)		
Subtotal, Substance Abuse Treatment	2,165,255	2,199,477	2,184,327	+ 19,072	-15,150
Subtotal, Program level	(2,253,051)	(2,287,273)	(2,272,123)	(+19,072)	(-15, 150)

Substance Abuse Prevention: Programs of Regional and National Significance Program Management	202,039 79,197 (22,750)	223,075 112,297 (23,399)	222,492 108,727 (23,399)	+ 20,453 + 29,530 (+649)	- 583 - 3,570
Subtotal, Program level	101,947 795	135,696	132,126	+ 30,179 - 795	-3,570
	3,431,116 (131,585)	3,541,362 (132,234)	3,536,184 (132,234)	+ 105,068 (+649)	-5,178
Total, SAMHSA program level	(3,562,701)	(3,673,596)	(3,668,418)	(+105,717)	(-5,178)
HEALTHCARE RESEARCH AND QUALITY					
Research on Health Costs, Quality, and Outcomes:					
Evene at undring [NA] Evaluation Tap Funding [NA] Patient-centered Health Research [NA] Quality Measure Development [NA]	(270,653) (21,000)	(478,899) (272,750)	(267,290) (35,000) (10,000)	$\begin{array}{c} (-3,363) \\ (+14,000) \\ (+10,000) \\ (+10,000) \end{array}$	(-211,609) (-237,750) (+10,000)
Subtotal, Program level	(270,653)	(478,899)	(267,290)	(-3,363)	(-211,609)
Medical Expenditures Panel Surveys: Federal Funds					
Evaluation Tap Funding [NA]	(58,800)	(59,300)	(59,300)	(+500)	
Subtotal, Medical Expenditures Panel Surveys	(58,800)	(59,300)	(59,300)	(+200)	
Program Support. Evaluation Tap Funding (NA)	(67,600)	(72,713)	(70,463)	(+2,863)	(-2,250)
Total, AHRQ	(397,053)	(610,912)	(397,053)		(-213,859)
Total, AHRQ program level	(397,053)	(610,912)	(397,053)		(-213,859)
Total, Public Health Service [PHS] appropriation	48,497,157 (51,251,143)	49,596,331 (52,781,989)	49,741,587 (52,516,082)	+1,244,430 (+1,264,939)	+ 145,256 (- 265,907)

[In thousands of dollars]

Hom	2010 annonriation	Rudrat actimata	Committee	Senate Committee recommendation com- pared with (+ or -)	commendation com- (+ or -)
NGU			recommendation	2010 appropriation	Budget estimate
CENTERS FOR MEDICARE AND MEDICAID SERVICES					
GRANTS TO STATES FOR MEDICAID					
Medicaid current law benefits	276,957,508	242,714,348	242,714,348	-34,243,160	
State and local administration	12,381,233 3,323,770	13,567,479 3,651,354	13,567,479 $3,651,354$	+1,186,246 +327,584	
Subtotal, Medicaid program level	292,662,511 - 71,700,038	259,933,181 - 86,789,382	259,933,181 - 86,789,382	-32,729,330 -15,089,344	
Total, Grants to States for Medicaid	220,962,473 86,789,382	173,143,799 86,445,289	173,143,799 86,445,289	- 47,818,674 - 344,093	
PAYMENTS TO HEALTH CARE TRUST FUNDS					
Supplemental medical insurance	160,364,000	173,873,000	173,873,000	+ 13,509,000	
respirat maganetics for the unimated Federal unisured payment Pororam manacement	272,000 272,000 393,070	275,000 180 000	275,000 180,000	+3,000 +3,000 -213,070	
Constant revenue for Part D benefit General revenue for Part D benefit General revenue for Part D administration	53,180,000 484,000	54,393,000 382,000	54,393,000 382,000	+ 1,213,000 - 102,000	
HCFAG reimbursement	311,000	561,000	561,000	+250,000	
Total, Payments to Trust Funds, program level	214,590,070	229,664,000	229,664,000	+ 15,073,930	
PROGRAM MANAGEMENT					
Research, Demonstration, Evaluation	35,600	47,178	41,300	+5,700 + 110,000	- 5,878
Medicare Operations	2,335,862 346,900	2,356,604 362,000	2,335,862 362,000	+ 15,100	- 20,742
High-risk insurance pools	55,000			-55,000	

26,620		239,620 26,620 26,620					
- 26,620		- 26,620 					
+ 28,485 + 104,285	$\begin{array}{c} +108,103\\ +65,040\\ +65,042\\ +60,213\\ +16,644\\ +250,000\end{array}$	$\begin{array}{r} -32,734,552\\ -33,088,837\\ (-32,744,744)\\ (-344,093)\\ +354,285\end{array}$		- 1,215,635 + 10,000	-1,205,635	-1,205,635 -100,000	-1,305,635
725,365 3,574,527	328,423 94,830 90,003 47,744 561,000	493,388,615 489,253,088 (402,807,799) (86,445,289) 4,135,527	33,000 1,000	34,000 3,024,814 514,000 10,000	3,548,814	3,582,814 - 1,100,000	2,482,814
725,365 3,601,147	328,423 94,830 90,003 47,744 561,000	493,415,235 489,253,088 (402,807,799) (86,445,799) 4,162,147	33,000 1,000	34,000 3,024,814 514,000 10,000	3,548,814	3,582,814 	2,482,814
696,880 3,470,242	220,320 29,790 29,790 31,100 311,000	526,123,167 522,341,925 (435,552,543) (86,789,382) 3,781,242	33,000 1,000	34,000 4,240,449 504,000 10,000	4,754,449	4,788,449 - 1,000,000	3,788,449
Federal Administration	Part D drug benefit/medicare advantage [MIP] HHS Office of Inspector General Department of Justice	Total, Centers for Medicare and Medicard Services Federal funds Current year 2012 Trust Funds ADMINSTRATION FOR CHILDREN AND FAMILIES	PAYMENTS TO STATES FOR CHILD SUPPORT ENFORCEMENT AND FAMILY SUPPORT PROGRAMS Payments to territories	Subtotal, Welfare payments	Subtotal, Child Support Enforcement	Total, Family support payments program level	Total, Family support payments, current year

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tem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- (+ or -)
				2010 appropriation	Budget estimate
LOW-INCOME HOME ENERGY ASSISTANCE [LIHEAP]					
Formula grants	4,509,672	2,510,000	2,709,672	-1,800,000	+ 199,672
Subtotal, Formula grants	4,509,672	2,510,000	2,709,672	-1,800,000	+ 199,672
Contingency fund	589,551	790,000	590,328	+777	-199,672
Subtotal, Contingency fund	589,551	790,000	590,328	+777	- 199,672
Total, LIHEAP	5,099,223	3,300,000	3,300,000	-1,799,223	
Total, LIHEAP, program level	5,099,223	3,300,000	3,300,000	- 1,799,223	
Transitional and Medical Services	353,281	417,000	392,000	+ 38,719	- 25,000
Arcuns of Tarticking	154,005	3,014 179,005	187,005	+33,000	+ 8,000
Preventive Health	4,748 48,590	4,748 48,590	4,748 48,590		
Unaccompanied minors	149,291 11,088	207,357 11,088	179,357 12,088	+ 30,066 + 1,000	28,000 +- 1,000
Total, Refugee and entrant assistance	730,817	877,602	834,602	+103,785	- 43,000
PAYMENTS TO STATES FOR THE CHILD CARE AND DEVELOPMENT BLOCK GRANT					
Child Care and Development Block Grant	2,126,757	2,927,081	3,127,081	+ 1,000,324	+ 200,000
Total, Child Care and Development Block Grant	2,126,757	2,927,081	3,127,081	+1,000,324	+ 200,000
SOCIAL SERVICES BLOCK GRANT (TITLE XX)	1,700,000	1,700,000	1,700,000		

	341		
+7,000 +1,000 -1,725 -1,725 +6,738	(+6,738) +1,000 +1,000 +1,000 +3,000	$\begin{array}{c} + 19,000 \\ + 10,000 \\ + 29,000 \\ + 2,644 \end{array}$	+ 31,644
$\begin{array}{c} + 990.278 \\ + 7,000 \\ + 7,000 \\ + 1,000 \\ + 1,000 \\ + 2,500 \\ - 2,803 \\ - 2,803 \\ - 2,872$	(-9,872) +1,000 +1,000 +1,000 +3,026	+ 19,000 + 19,000 + 118	+ 19,118
8,223,958 104,734 118,774 118,774 118,77 26,535 41,628 11,628 11,628 21,7207 39,332 42,000 9,738 (5,762) (5,762)	(15,500) 76,066 42,024 17,410 14,162 39,943 189,605 189,605 48,773	700,000 55,000 10,000 765,000 2,644 2,644	791,669
8,223,958 97,734 17,774 17,771 26,535 26,535 41,628 11,628 11,628 11,628 21,7207 33,332 281,747 21,207 33,332 33,332 42,000 42,000 (5,762)	(8,762) 75,066 17,410 17,410 14,162 38,943 38,943 186,605 48,773	700,000 36,000 736,000 24,025	760,025
7,233,680 97,734 17,971 26,533 41,689 11,628 29,020 29,020 21,628 27,207	(25,372) 75,066 41,024 17,410 14,136 38,943 38,943 186,579 48,773	700,000 36,000 10,000 746,000 2,644	772,551
CHILDREN AND FAMILIES SERVICES PROGRAMS Programs for Children, Youth, and Families. Head Start, current funded Consolidated Runaway, Homeless Youth Program Prevention grants to reduce abuse of runaway youth Prevention grants to reduce abuse of runaway youth Child Abuse State Grants Child Abuse Discretionary Activities Child Abuse Discretionary Activities Child Welfare Services Adoption Opportunities Child Welfare Training Adoption Opportunities Child Mateness Child Mateness Child Mateness Child Mateness Child Mateness Child Mateness Child Mateness Child Mateness Cocial Services and Inome Maintenance Research Evaluation Tap Funding	Subtotal, Program level Developmental Disabilities Programs: State Councis State Councis Protection and Advocacy Protection and Advocacy Volting access for individuals with disabilities Developmental Disabilities Projects of National Significance University Centers for Excellence in Developmental Disabilities Subtotal, Developmental disabilities programs	Community Services. Community Services Block Grant Act programs. Community Services Block Grant Act programs. Economic Development	Subtotal, Community Services

[In thousands of dollars]

ttem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation com- pared with (+ or -)	ommendation com- + or -)
		2	lecommendation	2010 appropriation	Budget estimate
Domestic Violence Hotline	3,209 130,032 49,314 45,351 1,376 2,000 2003,398	4,500 140,000 49,314 45,351 1,376 2,000 222,308	$\begin{array}{c} 4,500\\ 140,000\\ 49,314\\ 45,351\\ 1,376\\ 2,000\\ 2,000\end{array}$	+ 1,291 + 9,968 + 9,968	
Total, Children and Families Services Programs	9,313,180 (9,313,180) (5,762)	10,312,070 (10,312,070) (5,762)	10,359,727 (10,359,727) (5,762)	+ 1,046,547 (+1,046,547)	+ 47,657 (+ 47,657)
Total, Program level	(9,318,942) 345.000	(10,317,832) 345_000	(10,365,489) 345.000	(+1,046,547)	(+47,657)
: 22	63,311	63,311	63,311		
Foster Care	4,681,000 2,501,000 56,000 140,000	4,539,000 2,459,000 78,000 140,000	4,539,000 2,459,000 78,000 140,000	-142,000 -42,000 +22,000	
Total, Payments to States	7,378,000 - 1,800,000	7,216,000 -1,850,000	7,216,000 - 1,850,000	-162,000 -50,000	
Total, payments, current year	5,578,000 1,850,000	5,366,000 1,850,000	5,366,000 1,850,000	-212,000	
Total, Administration for Children and Families	31,694,737 (28,744,737)	30,423,878 (27,373,878)	30,628,535 (27,578,535)	-1,066,202 (-1,166,202)	+ 204,657 (+ 204,657)

Fiscal year 2012	(2,950,000) (5,762)	(3,050,000) (5,762)	(3,050,000) (5,762)	(+100,000)	
Total, Administration for Children and Families program level	31,700,499	30,429,640	30,634,297	- 1,066,202	+ 204,657
Grants to States: Home and Community-based Supportive Services	368,294 21,023 21,880 154,197 6,388	416,348 21,026 23,290 202,220 8,389	416,348 21,026 24,290 202,220 8,389	+ 48,054 + 3 + 2,410 + 48,023 + 2,001	+ 1,000
Subtotal, Caregivers	160,585	210,609	210,609	+50,024	
Nutrition: Congregate Meals Home-delivered Meals Nutrition Services Incentive Program	440,718 217,644 160,991	445,644 220,893 161,015	463,644 232,893 161,015	+ 22,926 + 15,249 + 24	+ 18,000 + 12,000
Subtotal	819,353	827,552	857,552	+ 38,199	+ 30,000
Grants for Native Americans	27,704 19,020 44,276 11,462 2,500 19,976	29,708 13,049 44,179 5,000 22,508	29,708 14,699 44,179 11,464 7,000 22,508	+ 2,004 - 4,321 - 97 + 2,532 + 2,532	+1,650 +2,000
Total, Administration on Aging	1,516,073	1,624,733	1,659,383	+ 143,310	+ 34,650
General Departmental Management: Federal Funds	195,249 5,851	227,943	228,693	+ 33,444 - 5,851	+ 750
Subtotal Subtotal Teen Pregnancy Prevention Community Grants	201,100 109,979	227,943 129,218	228,693 110,000	+ 27,593 + 21	+ 750 - 19,218

[In thousands of dollars]

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Item	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	ommendation com- + or -)
		1		2010 appropriation	Budget estimate
Evaluation Tap Funding	(4,455)	(4,455)	(8,455)	(+4,000)	(+4,000)
Subtotal, Teen Pregnancy Prevention Community Grants	(114,434)	(133,673)	(118,455)	(+4,021)	(-15,218)
Adolescent Family Life (Title XX)	16,658	16,658	12,474	-4,184	- 4,184 + 200
Office of Women's Health	33,746	33,746	33,746	1 2,101	-
Transformation of the Commissioned Corps	14,813 53,880	13,513 53 891	13,513	- 1,300 + 11	
Embro adoption awareness campaign	4,200	4,200	4,200		
Acquisition reform	(60,756)	7,000 (60,756)	/,000 (60,756)	+ /,000	
Total, General Departmental Management	490,365 (484,514)	544,149 (544,149)	521,697 (521,697)	+ 31,332 (+ 37,183)	- 22,452 (- 22,452)
russ Funds	555,576	(65,211) 609,360	(69,211) 590,908	(+ 4,000) (+ 35,332	(+4,000) -18,452
OFFICE OF MEDICARE HEARINGS AND APPEALS	71,147	77,798	77,798	+ 6,651	
OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY Evaluation Tap Funding	42,325 (19,011)	78,334	59,323 (19,011)	+ 16,998	-19,011 (+19,011)
Total, pogram level	(61,336)	(78,334)	(78,334)	(+ 16,998)	
OFFICE OF INSPECTOR GENERAL [IG]					
Inspector General Federal Funds	50,279 (177,205)	51,754 (177,205)	54,754 (177,205)	+ 4,475	+ 3,000
Medicaid integrity program: Deficit Reduction Act (Public Law 109–171) [NA]	(25,000)			(-25,000)	

Total, Inspector General program level	(252,484) (252,484)	(228,959) (228,959)	(231,959) (231,959)	(-20,525) (-20,525)	(+3,000) (+3,000)
OFFICE FOR CIVIL RICHTS: Federal Funds	37,779 3,314	44,382	44,382	+ 6,603 - 3,314	
Total, Office for Civil Rights	41,093	44,382	44,382	+ 3,289	
Retirement payments	356,455 24,593 93,509	386,040 27,888 103,608	386,040 27,888 103,608	+ 29,585 + 3,295 + 10,099	
Total, Medical benefits for Commissioned Officers	474,557	517,536	517,536	+ 42,979	
2 S	12,845 33,059 56,028	12,847 44,153 56,540	12,847 38,059 56,540	+ 5,000 + 5,000 + 512	- 6,094
nospida t repareutes	4.2,0.26 340,066 9,998 8,747 4,366	476,194 10,000 10,000 8,000 10,000	476,194 10,000 10,000 6,166 10,000	+136,128 + 136,128 + 2 + 1,253 + 1,260 + 10,000	-1,834
Subtotal, Assistant Secretary for Preparedness and Response	891,037 27,040	1,053,734 37,040	1,045,806 32,040	+ 154,769 + 5,000	- 7,928 - 5,000
Medical Reserve Corps	12,581	12,694	12,694	+113	
Parklawn lease expiration	69,585 4,893	35,000 6,460	35,000 5,677	- 34,585 + 784 - 276,000	- 783

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tem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- + or -)
		2	leconnicend actor	2010 appropriation	Budget estimate
Balances from Public Law 111–32 Pan Flu [NA] Fiscal year 2011	65,000	(330,000) 65,578	(330,000) 65,578	(+330,000) +578	
Pandemic Flu, program level [NA]	(341,000)	(395,578)	(395,578)	(+54,578)	
Subtotal, OS appropriation	415,478 415,478	107,038 437,038	106,255 436,255	-309,223 +20,777	- 783 - 783
Total, PHSSEF appropriation	1,346,136 1,346,136	1,210,506 1,540,506	1,196,795 1,526,795	-149,341 +180,659	- 13,711 - 13,711
Total, Office of the Secretary Federal Funds	2,515,902 2,435,590 80,312 (84,222)	2,524,459 2,446,661 77,798 (65,211)	2,472,285 2,394,487 77,798 (88,222)	$\begin{array}{c} -43,617\\ -41,103\\ -2,514\\ (+4,000)\end{array}$	-52,174 -52,174 (+23,011)
Total, Title II, Dept of Health and Human Services	610,347,036 606,485,482 (516,746,100)	577,584,636 573,344,691 (483,849,402)	577,890,405 573,677,080 (484,181,791)	- 32,456,631 - 32,808,402 (- 32,564,309)	+ 305,769 + 332,389 (+ 332,389)
Fiscal year 2012	(89,739,382) 3,861,554 610,347,036	(89,495,289) 4,239,945 577,584,636	(89,495,289) 4,213,325 577,890,405	(-244,093) + 351,771 - 32,456,631	- 26,620 + 305,769
EDUCATION FOR THE DISADVANTAGED Grants to Local Educational Agencies (LEAs): Basic Grants: Advance from prior year	(2,946,721) 3,145,801	(3,448,145) 2,305,080	(3,448,145) 3,145,801	(+501,424)	+ 840,721

Current funded	4,000	4,000	4,000		
Subtotal, Basic grants current year appropriations	3,149,801 (6,096,522) 3,448,145	2,309,080 (5,757,225) 4,288,866	3,149,801 (6,597,946) 3,448,145	(+501,424)	+ 840,721 (+ 840,721) - 840,721
Subtotal, Basic grants, program level	6,597,946	6,597,946	6,597,946		
Concentration Grants. Advance from prior year Fiscal year 2012 Advance	(1,365,031) 1,365,031	(1,365,031) 1,365,031	(1,365,031) 1,365,031		
Targeted Grants: Forward funded	250,712 (3,264,712) 3,014,000	250,712 (3,014,000) 3,014,000	475,712 (3,014,000) 3,014,000	+ 225,000 (- 250,712)	+ 225,000
Subtotal	3,264,712	3,264,712	3,489,712	+225,000	+ 225,000
Education Finance Incentive Grants: Forward Funded	250,712 (3,264,712) 3,014,000	250,712 (3,014,000) 3,014,000	475,712 (3,014,000) 3,014,000	+225,000 (-250,712)	+ 225,000
Subtotal, Grants to LEAs, program level	14,492,401	14,492,401	14,942,401	+450,000	+ 450,000
	GE AFA		300,000	+300,000 -66 454	+300,000
School improvement grants Striving readers	545,633 250,000 19,145	000'006	625,000 250,000 19,145	+ 79,367	-275,000 + 250,000 + 19,145
State Agency Programs. Migrant	394,771 50,427	394,771 50,427	394,771 50,427		
Subtotal, State Agency programs	445,198	445,198	445,198		
Evaluation	9,167 50,000 36,668	9,167 36,668	8,167 100,000 36,668	-1,000 + 50,000	-1,000 + 100,000

[In thousands of dollars]

ltem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	ommendation com- + or -)
				2010 appropriation	Budget estimate
Total, Education for the disadvantaged	15,914,666 (5,073,490)	15,883,434 (4,201,537)	16,726,579 (5,885,403)	+ 811,913 (+811,913)	+ 843, 145 (+ 1, 683, 866)
risaal year Joiz	(10,841,176) (4,954,510) 15,914,666	(11, 581, 897) (4, 151, 702) 15, 883, 434	(10,841,176) (5,717,423) 16,726,579	(+762,913) +811,913	(-840,721) (+1,565,721) +843,145
Basic Support Payments	1,138,000 48,602 4,864	1,138,000 48,602 4,864	1,153,000 50,602 4,864	+15,000 +2,000	+ 15,000 + 2,000
Construction (Sec. 8007)	17,509 67,208	17,509 67,208	18,509 69,208	$^{+1,000}_{+2,000}$	+1,000 + 2,000
Total, Impact aid	1,276,183	1,276,183	1,296,183	+ 20,000	+ 20,000
		450,000 300,000 265,000			-450,000 -300,000 -265,000
College pathways	1,266,308	100,000	1,266,232 7_000	- 76 - 76	-100,000 +1,266,232 +7.000
Advance from prior year	(1,681,441) 1,681,441	(1,681,441)	(1,681,441) 1,681,441		+1,681,441
Subtotal, State Grants for Improving Teacher Quality, program level	2,947,749		2,954,673	+ 6,924	+ 2,954,673
Mathematics and Science Partnerships	$\begin{array}{c} 180,478\\ 100,000\\ 17,687\\ 1,166,166\end{array}$	17,687 1,166,166	180,478 100,000 17,687 1,266,166	+100,000	+ 180,478 + 100,000 + 100,000

		349			
+ 26,928 + 10,000 + 1,000 + 5,000 + 5,000	$\begin{array}{c} +2,268,079\\ (+586,638)\\ (+1,681,441)\\ (+1,661,710)\\ +2,268,079\end{array}$	+ 2,000	+2,000	+ 2,000	$\begin{array}{c} - 675,000\\ - 256,000\\ - 2560,000\\ - 950,000\\ - 950,000\\ - 490,000\\ - 490,000\\ - 413,707\\ + 25,646\\ + 112,564\\ + 11,220\\ + 10,649\\ + 22,000\\ \end{array}$
+ 39,268 - 7,463 + 10,000 + 1,000 + 5,000 + 5,000	$\begin{array}{c} + 159,729 \\ (+ 159,729) \\ (- 154,192) \\ + 159,729 \end{array}$	+ 2,000	+ 2,000	+ 2,000	+ 675,000 + 250,000 - 14,389 - 14,389 + 12,000 + 4,000
450,000 26,928 75,427 6,999 35,315 33,315 33,315 179,882 61,313	5,388,173 (3,706,732) (1,681,441) (3,518,185) 5,388,173	104,331 19,060 5,891	24,951	129,282	675,000 250,000 43,707 25,646 118,552 41,220 10,649 22,000
450,000 65,427 65,427 33,315 33,315 174,882 56,313	3,120,094 (3,120,094) (1,856,475) 3,120,094	104,331 19,060 3,891	22,951	127,282	1,350,000 500,000 2,500,000 4950,000 490,000 490,000
410,732 7,463 26,928 65,427 65,427 6,989 34,315 33,315 56,313 56,313	5,228,444 (3,547,003) (1,681,441) (3,363,993) 5,228,444	104,331 19,060 3,891	22,951	127,282	14,389 14,389 14,707 118,955 118,952 29,220 10,649 18,000
State Assessments/Enhanced Assessment Instruments Javits gifted and talented education	Total, School improvement programs	Grants to Local Educational Agencies	Subtotal, Federal Programs	Total, Indian Education	Race to the Top

[In thousands of dollars]

tem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation com- pared with (+ or -)	ommendation com- + or -)
				2010 appropriation	Budget estimate
Charter Schools Grants	256.031		256.031		+256.031
Voluntary Public School Choice	25,819		25,819		+ 25,819
Magnet Schools Assistance	100,000	110,000	100,000		-10,000
Fund for the Improvement of Education [FIE]	261,570	27,278	178,987	- 82,583	+ 151,709
reacher nicerure Fund Ready-to-Learn television	27.300		29.050	+ 1.750	+ 400,000 + 29.050
Close Up Fellowships	1,942 45,840		1,942 45,840		+1,942 + 45,840
Total, Innovation and Improvement	1,379,065	6,332,278	2,224,843	+ 845,778	-4,107,435
Subtotal, Forward funded		1,350,000	675,000	+675,000	- 675,000
SAFE SCHOOLS AND CITIZENSHIP EDUCATION					
Safe and healthy students		410,000			-410,000
Promise neignornoods	191 341	210,000	20,000	+ 10,000	- 190,000 + 196 341
Alcohol Abuse Reduction	32,712		32,712		+32,712
Elementary and Secondary School Counseling	55,000		57,000	+ 2,000	+57,000
Carol M. White Physical Education Program	79,000 35,000		80,000 40,000	+1,000 +5,000	+ 80,000 + 40,000
Total. Safe Schools and Citizenship Education	403,053	620,000	426,053	+ 23,000	- 193,947
ENGLISH LANGUAGE ACQUISITION				-	
Current funded	48.750	48.750	52.000	+ 3.250	+ 3.250
Forward funded	701,250	751,250	748,000	+46,750	-3,250
Total, English Language Acquisition	750,000	800,000	800,000	+ 50,000	

					351				
+ 1 010 720	- 840,720	+ 170,000 + 20,000	+ 190,000	+1,223 +2,000 +6,077	+ 9,300 - 10,000	$\begin{array}{c} + 189,300 \\ (+1,030,020) \\ (-840,720) \\ (+1,030,720) \\ (+1,030,720) \end{array}$	- 56,833	- 56,833	+2,000 +4,515 +13,251 +2,239 +2,239 +1,000
000 000 +		+ 420,000 + 20,000	+440,000	+ 1,223 + 2,000 + 3,327	+ 6,550 + 1,905	+ 448,455 (+448,455) (+440,000)			+ 2,000 + 1,650 + 1,000
808 CEF E	(8,592,383) 8,592,383	11,925,211 374,099 459,427	12,758,737	49,223 49,549 90,653 30,028 47,300	266,753 10,000	13,035,490 (4,443,107) (8,592,383) (4,166,354)	3,084,696	3,084,696	14,288 37,766 13,251 2,239 2,474 19,101
2 322 108	(8,592,383) 9,433,103	11,755,211 374,099 439,427	12,568,737	48,000 49,549 90,653 41,223	257,453 10,000 10,000	12,846,190 (3,413,087) (9,433,103) (3,135,634)	3,084,696 56,833	3,141,529	12,288 33,251 2,474 18,101
828 10 0	(8,592,383) 8,592,383	11,505,211 374,099 439,427	12,318,737	48,000 49,549 90,653 28,028	260,203 8,095	12,587,035 (3,994,652) (8,592,383) (3,726,354)	3,084,696	3,084,696	12,288 37,766 11,601 2,239 2,474 18,101
SPECIAL EDUCATION State Grants: Grants to States Part R current war	Part B advance from prior year Part B advance from prior year Grants to States Part B (fiscal year 2012)	Subtotal, program level	Subtotal, program level	IDEA National Activities (current funded): State personnel development Technical Assistance and Dissemination Personnel Preparation Parent Information Centers Technology and Media Services	Subtral, IDEA special programs	Total, Special education Current Year Fiscal year 2012 Subtotal, Forward Funded REHABILITATION SERVICES AND DISABILITY RESEARCH	Vocational Rehabilitation State Grants	Subtotal, VR State grants program level	Client Assistance State grants

	-				
tem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	ommendation com- + or -)
		,	lecollillellation	2010 appropriation	Budget estimate
Projects with industry	19,197 29,181		19,197 29,181		+ 19,197 + 29,181
Independent living: Independent living grants State grants Centers Services for older blind individuals	23,450 80,266 34,151	110,000 34,151	23,450 83,656 34,151	+ 3,390	
Subtotal	137,867	144,151	141,257	+ 3,390	-2,894
Vocational Rehabilitation (VR): VR-supported employment extended services VR Innovation and Technical Assistance Program		25,000 6,472			- 25,000 - 6,472
Workforce innovation and partnership	852	30,000	27,000	+ 27,000 - 852	-3,000
Evaluation	1,217 9,181 109,241 30,960	9,181 9,181 111,919 30,960	9,181 9,181 111,919 30,960	- 1,217 + 2,678	
Subtotal, Discretionary programs	422,165	480,630	457,814	+ 35,649	- 22,816
Total, Rehabilitation services	3,506,861	3,565,326	3,542,510	+ 35,649	- 22,816
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES AMERICAN PRINTING HOUSE FOR THE BLIND	24,600	24,600	24,600		
NATIONAL TECHNICAL INSTITUTE FOR THE DEAF [NTID]: Operations	63,037 5,400	63,037 1,640	63,037 1,640	- 3,760	

Total, NTID	68,437	64,677	64,677	- 3,760	
GALLAUDET UNIVERSITY: Operations	118,000 5,000	118,000	118,000 10,000	+ 5,000	+ 10,000
Total, Galludet University	123,000	118,000	128,000	+ 5,000	+ 10,000
Total, Special Institutions for Persons with Disabilities	216,037	207,277	217,277	+ 1,240	+ 10,000
Career Education: Basic State Grants/Secondary and Technical Education: State Grants, current funded	369,911 (791,000) 791,000	473,000 (791,000) 791,000	369,911 (791,000) 791,000		- 103,089
Subtotal, Basic State Grants, program level	1,160,911 102,923 7,860	1,264,000 7,860	1,160,911 102,923 7,860		- 103,089 + 102,923
Subtotal, Vocational Education	1,271,694	1,271,860	1,271,694		- 166
Adult Education: State Grants/Adult basic and literacy education: State Grants, current funded	628,221	612,315	612,315	- 15,906	
National Programs: National Leadership Activities	11,346	41,346	41,346	+ 30,000	
Subtotal, National programs	11,346	41,346	41,346	+ 30,000	
	639,567	653,661	653,661	+ 14,094	
Smaller Learning Communities, current funded	4,400 83,600 17,186	17,186	17,186	- 4,400 - 83,600	
Total, Career and adult education	2,016,447 (1,225,447) (791,000) (1,221,047)	1,942,707 (1,151,707) (791,000) (1,151,707)	$\begin{array}{c} 1,942,541\\ (1,151,541)\\ (791,000)\\ (1,151,541)\\ (1,151,541)\end{array}$	- 73,906 (- 73,906) (- 69,506)	- 166 (- 166) (- 166)

[In thousands of dollars]	lollars]				
ftem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	ommendation com- + or -)
				2010 appropriation	Budget estimate
STUDENT FINANCIAL ASSISTANCE [SFA]					
Pell Grants—maximum grant [NA]	(4,860)	(4,860)	(4,860)		
Pell Grants 4	17,495,000	17,652,000	17,652,000 757 A65		
reversi supprementari cuucationar opportunity oranis	980,492	980,492	980,492		
LEAP program	63,852		63,852		+ 63,852
Total SFA	19 296 809	19 389 957	19 453 809	+157000	+ 63 852
Total, SFA (excluding emergencies)	19,296,809	19,389,957	19,453,809	+157,000	+63,852
STUDENT AID ADMINISTRATION					
Salaries and expenses	870,402	673,404	661,852	-208,550	-11,552
Servicing activities		496,827	386,226	+ 386,226	-110,601
Total, Student Aid Administration	870,402	1,170,231	1,048,078	+177,676	- 122, 153
HIGHER EDUCATION					
Aid for Institutional Development:					
Strengthening Institutions	84,000	88,200	88,200	+4,200	
Hispanic-serving Institutions	117,429	123,300	123,300	+5,871	
Promoting Post-baccalaureate Opportunities for Hispanic Americans	10,500 266 586	10,500 279 015	10,500 266 586		13_320
evenguering instance of place oneges process and the second s	61,425	64,496	64,496	+ 3.071	10,0L
Strengthening Predominantly Black Institutions	10,801	11,341	10,801		-540
Asian-American Pacific Islander	3,600	3,780	3,600		-180
Strengthening Alaska Native and Native Hawaiian-serving Institutions	15,084	15,838	15,084		-754
strengthening Native American-serving Nontribal Institutions	3,600 30,169	3,780 31,677	3,600 30,169		-1508 $-1,508$
the second s	101 000		C1 C 22 C	011.01	10 101
Sudicidal, Ald Tor institutional development	I 003,194	032,827	010,330	I + 13,142 I	— Ib,49I

International Education and Foreign Language. Domestic Programs	108,360 15,576 1,945	108,360 15,576 1,945	108,360 17,576 1,945	+ 2,000	+2,000
Subtortal, International Education and Foreign Language Fund for the Improvement of Postsecondary Education [FIPSE] Postsecondary program for Students with Intelectual Disabilities Postsecondary program for Students with Intelectual Disabilities Inhonity Science and Engineering Improvement Tinbaly Controlled Postsecondary Vocational/Technical Institutions Ederal TRIO Programs Byrd Honors Scholarships Byrd Honors Scholarships Bavits Fellowships Ma Degrees in STEM and Critical Foreign Languages Ma Degrees in STEM and Critical Foreign Languages Demonstration in Disabilities/Higher Education Underground Railorad Program valuation Underground Railorad Program valuation BJ. Stupa Kolympic Scholarships	125,881 159,403 11,000 5,000 9,503 8,162 8,53,089 9,532 1,03	125,881 64,036 11,000 9,503 85,3089 323,212 9,687 31,030 9,687 31,030 6,755 6,755 6,755 8,755	127,881 105,597 13,000 5,000 9,503 8,162 8,162 8,8,000 9,687 31,030 5,000 5,755 6,755 6,755 6,755 6,755 6,755	$\begin{array}{c} + 2,000 \\ - 53,806 \\ + 2,000 \\ + 15,000 \\ - 1,092 \\ - 1,092 \\ - 1,092 \\ - 1,045 \\ - 1,945 \\ - 977 \end{array}$	$\begin{array}{c} + 2,000 \\ + 41,561 \\ + 2,000 \\ + 5,000 \\ + 15,000 \\ + 42,000 \\ + 58,000 \\ \end{array}$
Total, Higher educationHOWARD UNIVERSITY	2,255,665	2,094,825	2,243,895	- 11,770	+ 149,070
Academic Program	202,431 3,600 28,946	202,431 3,600 28,946	202,431 3,600 28,946		
Total, Howard University	234,977 461 354	234,977 461 354	234,977 461 354		

LIN THOUSANDS OF DOHARS	oliarsj				
ftem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- (+ or -)
				2010 appropriation	Budget estimate
HBCU Loan Subsidies	20,228	20,228	20,228		
Total, HBCU Capital Financing Program	20,582	20,582	20,582		
INSTITUTE OF EDUCATION SCIENCES [IES]					
Research, development, and dissemination	200,196	260,696	240,696	+ 40,500	-20,000
Regional Educational Laboratories	70,650	69,650	72,650	+ 2,000 + 2,000	+3,000
Research in special education	71,085 11,460 58 250	71,085 11,460 65 000	71,085 11,460 65,000	+ 6.750	
				6 	
National Assessment	130,121 8,723	135,121 8,723	135,121 8,723	+ 5,000	
Subtotal, Assessment	138,844	143,844	143,844	+ 5,000	
Total, IES	659,006	738,756	722,756	+ 63,750	- 16,000
DEPARTMENTAL MANAGEMENT					
PROGRAM ADMINISTRATION. Salariae and Evonnee	118 000	173 213	173 213	± 95 913	
building Modernization	8,200	19,275	19,275	+ 11,075	
Total, Program administration	456,200	492,488	492,488	+ 36,288	
OFFICE FOR CIVIL RIGHTS	103,024	105,700	105,700	+ 2,676	
OFFICE OF THE INSPECTOR GENERAL	60,053	65,238	65,238	+5,185	

+ 44,149	$\begin{array}{c c} + 2,754,663 \\ (+ 2,754,663) \\ (- 2,754,663) \\ (- 917,071) \\ \end{array}$	+375	+ 11,926 + 13,000	+ 4,604 + 2,596 + 2,596 + 1,000 + 1,000	+ 8,200 + 8,000	+ 20,126 + 21,000	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	+105,253 -42,524	$\begin{array}{c ccccc} + 125,379 & - 21,524 \\ + 74,186 & - 22,476 \\ + 15,000 \\ + 1,300 & - 6,000 \end{array}$
663,426 + 4	70,116,915 + 2,75 (48,210,915) (+ 2,75 (21,906,000)	5,771	111,000 + 1	115,600 49,500 64,000 ++	229,100 +	340,100 + 2	440,000 86,000 86,000 80,000 4,509 4,509 4,503 4,503 4,503 4,503 4,198 11,000 + +	642,300 + 10	982,400 +12 271,186 + 7 103,000 + 1 + 9,000
663,426	71,033,986 (49,127,986) (4 (21,906,000) (2	5,771	98,000	111,100 47,000 63,000	221,100	319,100	488, 033 6, 000 8, 000 8, 000 34, 593 40, 198 13, 000	684,824	1,003,924 293,662 109,000 9,000
619,277	67,362,252 (45,456,252) (21,906,000)	5,396	99,074	110,996 46,904 63,000	220,900	319,974	372,547 60,500 60,500 6,000 6,000 39,500 17,000 7,500	537,047	857,021 197,000 88,000 7,700
Total, Departmental management	Total, Title III, Department of Education Current Year Fiscal year 2012	TITLE IV—RELATED AGENCIES COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED	Domestic Volunteer Service Programs: Volunteers in Service to America [VISTA]	National Senior Volunteer Corps: Foster Grandparents Program Senior Companion Program	Subtotal, Senior Volunteers	Subtotal, Domestic Volunteer Service Programs	National and Community Service Programs: AmeriCorps State and National Grants	Subtotal, National and Community Service Programs	Total, Operating expenses

[In thousands of dollars]

ltem	2010 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- (+ or -)	
				2010 appropriation	Budget estimate	
fotal, Corporation for National and Community Service	1,149,721	1,415,586	1,365,586	+ 215,865	-50,000	
CORPORATION FOR PUBLIC BROADCASTING: Fiscal year 2013 (current) with fiscal year 2012 comparable Fiscal year 2012 advance with fiscal year 2011 comparable [NA] Fiscal year 2011 advance with fiscal year 2010 comparable [NA] Fiscal Stabilization Grants, current funded	445,000 (430,000) (420,000) 25,000	460,000 (445,000) (430,000)	460,000 (445,000) (430,000)	+ 15,000 (+ 15,000) (+ 10,000) - 25,000		
Digitalization program, current funded	36,000 25,000	36,000	36,000	- 25,000		
Subtotal, fiscal year 2010 appropriation	86,000	36,000	36,000	-50,000		obc
FEDERAL MEDIATION AND CONCILIATION SERVICE FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION	46,652 10,358	48,025 13,105	48,025 15,755	+1,373 +5,397	+2,650	,
INSTITUTE OF MUSEUM AND LIBRARY SERVICES MEDICARE PAYMENT ADVISORY COMMISSION	282,251 11,800	265,869 13,100	270,619 12,700	-11,632 + 900	+4,750 - 400	
NATIONAL GOUNCIL ON DISABILITY NATIONAL HEALTH CARE WORKFORCE COMMISSION	3,2/1	3,337	3,33/ 3.000	+ 466 + 3.000	+ 3.000	
NATIONAL LABOR RELATIONS BOARD	283,400	287,100	287,100	+3,700		
MATIONAL MEDIATION BOARD OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION	13,463 11,712	13,772	13,//2 12,051	+ 309 + 339		
RAILROAD RETIREMENT BOARD						
Dual Benefits Payments Account	64,000	57,000	57,000	- 7,000		
	000'0	000'0	000'0			
Subtotal, Dual Benefits	61,000	54,000	54,000	- 7,000		
Federal Payment to the RR Retirement Account Limitation on Administration	150 109,073 0 1 86	150 110,573 036	150 110,573 0026	+ 1,500		
	- 0,100 -	- 000.0	0,000	- ^^/+		

		1			
		+ 221,000	+ 513,000 - 221,000 - 292,000	- 513,000	
+ 1,000 + 6,033,000 + 11,000 + 333,000	+ 6,371,000 - 600,000 + 5,771,000 - 2,600,000	+ 3,171,000 + 593,640 + 121,860 + 1,863 + 675,000	+ 1,392,363 - 143,000 - 342,000	- 485,000 + 25,000	+ 25,000 + 932,363
21,404 52,635,000 60,000 3,775,000	56,513,000 -16,000,000 40,513,000 13,400,000	53,913,000 53,913,000 6,185,840 2,227,860 2,300 1,863 3,775,000	12,192,863		186,000 12,378,863
21,404 52,635,000 60,000 3,775,000	56,513,000 - 16,000,000 40,513,000 13,400,000	53,913,000 5,964,840 2,227,860 1,863 3,483,000	11,679,863 221,000 292,000	513,000 185,000 1,000	186,000 12,378,863
20,404 46,602,000 49,000 3,442,000	50,142,000 - 15,400,000 34,742,000 16,000,000	50,742,000 5,592,200 2,106,000 2,300 3,100,000	10,800,500 143,000 342,000	485,000 160,000 1,000	161,000 11,446,500
SOCIAL SECURITY ADMINISTRATION [SSA] Payments to Social Security Trust Funds	Subtotal, SSI program level	Total, SSI program LIMITATION ON ADMINISTRATIVE EXPENSES (LAE.) LIMITATION ON ADMINISTRATIVE EXPENSES (LAE.) OASDI Trust Funds Social Security Advisory Board Security Advisory Board Social Security Advisory Board Social Security and capabilities SSI	Subtotal, regular LAE	Subtotal, additional CDR funding	Subtotal, User fees

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ltem	2010 appropriation	Budget estimate	Committee	Senate Committee recommendation compared with $(+ \text{ or } -)$	commendation com- (+ or -)
				2010 appropriation	Budget estimate
OFFICE OF THE INSPECTOR GENERAL [IG]					
Federal Funds	29,000	30,000	30,000	+ 1,000	
Trust Funds	73,682	76,122	76,122	+ 2,440	
Total, IG	102,682	106,122	106,122	+ 3,440	
Adjustment: Trust fund transfers from general revenues	-3,442,000	-3,775,000	-3,775,000	-333,000	
Total, SSA	58,869,586	62,644,389	62,644,389	+ 3,774,803	
Federal funds	50,952,404	54,152,267	54,152,267	+3,199,863	
Current year	(34,952,404)	(40,752,267)	(40,752,267)	(+5,799,863)	
New advances, 1st quarter	(16,000,000)	(13,400,000)	(13,400,000)	(-2,600,000)	
Trust funds	7,917,182	8,492,122	8,492,122	+574,940	
Total, Title IV, Related Agencies	61,397,019	65,391,764	65,351,764	+ 3,954,745	- 40,000
Federal Funds	53,350,778	56,767,033	56,727,433	+ 3,376,655	-39,600
Current Year	(36,905,778)	(42,907,033)	(42,867,433)	(+5,961,655)	(-39,600)
Fiscal year 2012 Advance	(16,000,000)	(13,400,000)	(13,400,000)	(-2,600,000)	
Fiscal year 2013 Advance	(445,000)	(460,000)	(460,000)	(+15,000)	
Trust Funds	8,046,241	8,624,731	8,624,331	+578,090	-400
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¹ Formerly community-based Job training grants. ² Two-yeer availability. ³ Includes Mine Safety and Health. ⁴ Budget request reflects current law per the CBO. The proposal budget request is to change the Pell grant program to mandatory and includes a request of \$1,738,197,000.

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