



CONSORTIUM of SOCIAL SCIENCE ASSOCIATIONS

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COSSA PRELIMINARY ANALYSIS OF THE FY 2016 HOUSE LABOR, HEALTH AND HUMAN SERVICES, EDUCATION, and RELATED AGENCIES APPROPRIATIONS ACT

June 18, 2015

On June 16, the House Appropriations Subcommittee on Labor, Health and Human Services, and Education (Labor-HHS) released its [draft fiscal year \(FY\) 2016 funding bill](#) and held a [markup](#) the following day. The bill, which funds the Departments of Labor, Health and Human Services, Education, other related agencies, would provide \$153 billion in discretionary funding, \$3.7 billion below the FY 2015 funding level and \$14.6 billion below the President's FY 2016 budget request.

It would provide "targeted" funding to the National Institutes of Health (NIH), the Centers for Disease Control and Prevention (CDC), special education programs, Head Start, and a number of programs aimed at assisting Native American youth. In a [press release](#) accompanying the release of the bill, Labor-HHS Subcommittee Chairman Tom Cole (R-OK) noted that the bill "reflects the values and priorities of the American taxpayer, setting us on a path that will reduce the deficit while funding programs that make meaningful differences in the lives of Americans."

During the markup, the Democratic Subcommittee members offered amendments aimed at restoring funding to several of the programs that would see drastic cuts under the Republican bill, all of which were defeated along party lines. Rep. Lucille Roybal-Allard (D-CA) offered an amendment that would have restored funding for the Agency for Healthcare Research and Quality (AHRQ), which is slated to be eliminated entirely. Overall, the tone of the markup, which was the first in several years for a Labor-HHS bill, was cordial. Chairman Cole noted that he shared the Democrats' concerns about several of the programs that would receive funding cut and expressed hope for a better allocation as the process proceeds.

Below is a preliminary analysis of the funding in the House bill relevant to the social and behavioral sciences. We will know more details when we see the committee report, which we expect will be released next week ahead of an anticipated markup by the full Appropriations Committee.

National Institutes of Health

The draft appropriations bill would provide the NIH with \$31.2 billion, which, according to the Labor-HHS committee press release, is a \$1.1 billion increase above the FY 2015 funding level and \$100 million more than the President's budget request. Included in this sum is \$165 million to support the activities of the "National Children's Study Alternative" (NCS-A). The bill directs the NIH to "submit a spend [sic] plan on NCS-A's next phase" to both the House and Senate Appropriations Committees within 90 days of enactment. You may recall that the NIH, per the recommendation of an Advisory Committee to the Director Working Group, announced in [December 2014](#) its decision to discontinue the National Children's Study (NCS) which was originally authorized in the *Children's Health Act of 2000*. The directive in the bill may reflect the Subcommittee's dissatisfaction with that choice. At a March [Labor-HHS Subcommittee hearing](#) on the President's budget request for NIH, Rep. Lucille Roybal-Allard (D-CA) questioned NIH director Francis Collins on the reasoning behind the study's cancellation.

For the NIH's Common Fund program the bill would provide \$675.6 million. Of the amount provided, \$130 million would support the trans-NIH Precision Medicine Initiative.

In an effort to strengthen privacy protections for human research participants, NIH would be mandated under the bill to "require investigators receiving NIH funding for new and competing research projects designed to

generate and analyze large volumes of data derived from human research participations to obtain a certificate of confidentiality.” The House bill also would provide \$311.8 million for Institutional Development Awards (IDeA) programs and \$480 million for Clinical and Translational Sciences Awards (CTSAs).

The draft measure provides increases for several targeted research initiatives, including Alzheimer’s disease (\$866 million, a \$300 million increase), antibiotic resistance (\$461 million, a \$100 million increase), Brain Research through Application of Innovative Neuro-technologies (BRAIN) initiative (\$150 million, an increase of \$95 million), and the President’s proposed Precision Medicine Initiative (\$200 million, the requested amount).

It is unclear at this time whether the House bill includes language specifically targeting social or behavioral science research. We will know more once the Committee report is released, likely next week.

<i>(in millions)</i>	Enacted FY 2015	Proposed FY 2016	FY 2016 House	House vs. FY 2015	House vs. Request
NIH Institutes and Centers					
John E. Fogarty International Center for Advanced Study in the Health Sciences	67.6	69.5	68.6	1.5%	-1.3%
National Cancer Institute	4953.0	5098.5	5081.8	2.6%	-0.3%
National Center for Advancing Translational Sciences	632.7	660.1	643.1	1.6%	-2.6%
National Center for Complementary and Integrative Health	124.1	127.5	127.6	2.8%	0.1%
National Eye Institute	676.7	695.2	698.1	3.2%	0.4%
National Heart, Lung, and Blood Institute	2995.9	3071.9	3035.1	1.3%	-1.2%
National Human Genome Research Institute	498.7	515.5	505.6	1.4%	-1.9%
National Institute on Aging	1197.5	1267.1	1518.4	26.8%	19.8%
National Institute on Alcohol Abuse and Alcoholism	447.2	459.8	456.0	2.0%	-0.8%
National Institute of Allergy and Infectious Diseases	4417.6	4614.8	4512.9	2.2%	-2.2%
National Institute of Arthritis and Musculoskeletal and Skin Diseases	521.5	533.2	528.1	1.3%	-0.9%
National Institute of Biomedical Imaging and Bioengineering	327.2	337.3	338.4	3.4%	0.3%
Eunice Kennedy Shriver National Institute of Child Health and Human Development	1286.9	1318.1	1305.6	1.5%	-0.9%
National Institute on Deafness and Other Communication Disorders	405.2	416.2	412.4	1.8%	-0.9%
National Institute of Dental and Craniofacial Research	397.7	406.7	404.8	1.8%	-0.5%
National Institute of Diabetes and Digestive and Kidney Diseases	1889.1	1938.1	1771.4	-6.2%	-8.6%
National Institute on Drug Abuse	1015.7	1047.4	1050.9	3.5%	0.3%
National Institute of Environmental Health Sciences	744.7	759.1	675.8	-9.3%	-11.0%
National Institute of General Medical Sciences	2372.3	2433.8	2439.4	2.8%	0.2%
National Institute of Mental Health	1433.7	1489.4	1512.9	5.5%	1.6%
National Institute on Minority Health and Health Disparities	270.9	281.5	272.5	0.6%	-3.2%
National Institute of Neurological Disorders and Stroke	1604.6	1660.4	1656.3	3.2%	-0.2%
National Institute of Nursing Research	140.9	144.5	142.7	1.3%	-1.2%
National Library of Medicine	337.3	394.1	341.1	1.1%	-13.4%

Agency for Healthcare Research and Quality

The House includes a provision that would eliminate the Agency for Healthcare Research and Quality (AHRQ):

Sec. 226 (a) Termination.—Effective October 1, 2015, the Agency for Healthcare Research and Quality is terminated.

The bill would allow the HHS Secretary to use FY 2016 funding for the continuation of existing AHRQ grants and would give the NIH, CDC, Office of the National Coordinator for Health Information Technology, and the Office of the Assistant Secretary for Health the authority to take on some of AHRQ’s activities, so long as they are not duplicative of other efforts and on-mission. However, no additional funding is provided to these agencies for this purpose.

The Subcommittee previously voted to eliminate AHRQ in 2012, the last time it met to consider a Labor-HHS bill. As a reminder, AHRQ funds research on the health care system, conducted with the goal of generating evidence to improve the safety, quality accessibility, equitability, and affordability of American health care. Critics of the agency have accused its research of being duplicative of activities conducted by the CDC or NIH, although no other federal agency has the sole mission of conducting health services research. A perennial target, AHRQ’s association with the *Affordable Care Act* (ACA) has only increased criticism by those in Congress who oppose the law.

<i>(in millions)</i>	Enacted FY 2015	Proposed FY 2016	FY 2016 House	House vs. FY 2015	House vs. Request
Agency for Healthcare Research and Quality	363.7	363.7	0.0	-100.0%	-100.0%
Patient Safety	76.6	76.0	0.0	-100.0%	-100.0%
Health Services Research, Data, and Dissemination	112.2	112.3	0.0	-100.0%	-100.0%
Health Information Technology	28.2	22.9	0.0	-100.0%	-100.0%
U.S. Preventive Services Task Force	11.6	11.6	0.0	-100.0%	-100.0%
Medical Expenditure Panel Surveys	65.4	68.9	0.0	-100.0%	-100.0%

Centers for Disease Control and Prevention

The measure provides \$7 billion for the CDC, \$140 million above the FY 2015 funding level. This sum includes \$6.1 billion in appropriated funds and \$914.3 million in transfers from the Prevention and Public Health Fund.

The bill provides \$70 million for “an evidence-based prescription drug overdose prevention program” within the Injury Prevention and Control account, \$2 million above the President’s budget request.

Under the bill, the CDC’s Chronic Disease Prevention and Health Promotion activities would be cut by more than half compared to FY 2015. This program funds efforts related to tobacco prevention and control, obesity prevention, heart disease and stroke, diabetes, and cancer screening, among others. The committee report will have more detail on how these cuts will be distributed; but during the markup, Ranking Member Rosa DeLauro (D-CT) described a \$110 million cut to the CDC’s tobacco programs.

<i>(in millions)</i>	Enacted FY 2015	Proposed FY 2016	FY 2016 House	House vs. FY 2015	House vs. Request
Centers for Disease Control and Prevention	\$6.0 billion	\$6.1 billion	\$6.1 billion	1.7%	0.0%
HIV, Viral Hepatitis, STI, and TB Prevention	1117.6	1161.7	1117.6	0.0%	-3.8%
Chronic Disease Prevention, Health Promotion	1198.2	1058.1	570.5	-52.4%	-46.1%
Environmental Health	179.4	178.5	145.6	-18.9%	-18.4%
Injury Prevention and Control	170.4	257.0	211.3	24.0%	-17.8%
Occupational Safety and Health	334.9	283.4	341.1	1.9%	20.4%
Global Health	416.5	448.1	426.9	2.5%	-4.7%
Public Health Preparedness and Response	1352.6	1381.8	1460.8	8.0%	5.7%

Administration for Children and Families

The draft bill would provide \$17.8 billion in discretionary funding for the Administration for Children and Families (ACF), an increase of \$50 million above the FY 2015 funding level but \$1.9 billion below the President's budget request. For Head Start, the bill would provide \$9.8 billion, an increase of \$192 million, and of that sum the bill would target \$150 million to Early Head Start and \$42 million to provide a cost-of-living-allowance increase to Head Start grantees.

Institute of Education Sciences

For the Institute of Education Sciences (IES), the draft bill provides \$409.9 million, in contrast to the President's request of \$675.9 million and the FY 2015 funding level of \$576.9 million. If enacted, the funding would be used to link statewide elementary and secondary data systems with early childhood, postsecondary, and workforce data systems, or to further develop such systems. Up to \$6 million may be used for awards to support activities to improve data coordination, quality, and use at the local, State, and national levels. In addition, the bill provides \$137.2 million for activities authorized by the *National Assessment of Education Progress Authorization Act*.

<i>(in millions)</i>	Enacted FY 2015	Proposed FY 2016	FY 2016 House	House vs. FY 2015	House vs. Request
Institute of Education Sciences	573.9	675.9	410.0	-28.6%	-39.3%

Bureau of Labor Statistics

The Labor-HHS bill would give the Bureau of Labor Statistics \$609 million, \$544 million in discretionary funds and \$65 million in transfers from the Unemployment Trust Fund. The amount would be a slight increase from FY 2015, but remains \$23.7 million below the President's budget request. The funding level in the bill does not keep pace with inflation, which could force BLS to reduce or eliminate programs.

<i>(in millions)</i>	Enacted FY 2015	Proposed FY 2016	FY 2016 House	House vs. FY 2015	House vs. Request
Bureau of Labor Statistics	592.2	632.7	609.0	2.83%	-3.75%