

**FY2017 Labor-HHS-Education and Related Agencies Appropriations  
Full Committee  
Managers Package**

<b>Sponsor</b>	<b>Location</b>	<b>Purpose of Language</b>
<b>Bill Language</b>		
Blunt/Murray	Page 46	340B fee collection
Alexander/Murray	Page 158	Background checks
<b>Report Language</b>		
Udall	Page 43	NHSC health care professional development in rural areas
Udall	Page 45	Scholarships for Disadvantaged Students support in rural areas
Udall/Cassidy	Page 76	Concussion Surveillance
Murphy	Page 77	CDC's Total Worker Health program continuation
Cassidy/Schatz	Page 79	U.S. Public Health Capacity and Needs
Cassidy	Page 99	Otolaryngology
Mikulski	Page 111	NIH Office of Director
Murkowski	Page 143 & page 177	Native American language immersion programs
Boozman/Shelby	Page 155	Antimicrobial Usage, Risks, and Prevention
Kirk	Page 155	Federal Anaphylaxis Policy.
Kirk	Page 162	Trauma Service Availability and Systems Development
Kirk/Durbin	Page 171	Impact Aid
Reed/Collins	Page 210	Reallocates funds from National Leadership Libraries to Grants to States within LSTA
Graham	Page 211	NLRB micro-unions
Lankford	Page 217	Maximize cost savings within the continuing disability reviews at SSA

On Page 46 of the bill, line 7, strike the period after “Center” and insert the following:

: *Provided*, That the Secretary may collect a fee of 0.1 percent of each purchase of 340B drugs from entities participating in the Drug Pricing Program pursuant to section 340B of the PHS Act to pay for the operating costs of such program: *Provided further*, That fees pursuant to the 340B Drug Pricing Program shall be collected by the Secretary based on sales data that shall be submitted by drug manufacturers and shall be credited to this account to remain available until expended.

On page 158 of the bill at the end of title V (before the short title), insert the following:

SEC. \_\_\_\_ (a) A State or local educational agency that receives funds made available under this Act may use such funds to implement section 8546 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7926) and to support the costs of implementing or expanding criminal background checks for school personnel in accordance with State or local law.

(b) Notwithstanding any other provision of law, any local educational agency or school that receives funds under title VII of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7701 et seq.) that are made available under this Act shall not be subject to requirements that are the same or substantially similar to the requirements of section 578 of S. 2943 of the 114th Congress, as reported by the Committee on Armed Services on May 18, 2016.

On page 43 of the report, at the appropriate place, insert the following:

“Nearly three in four Corps members choose to stay in the area in which they serve upon completion of their service, and it is essential to ensure that the Committee is supporting the creation and development of health care professionals in rural areas.”

On page 45 of the report, at the appropriate place, insert the following:

“Increased funding will help to meet the demand for scholarship support to disadvantaged students who have unmet financial need in paying for their health professions education. It is essential that disadvantaged students, particularly those from rural or underserved health professional shortage areas, are given the tools to become effective health care professionals by using their knowledge of rural health care issues and are supported in pursuing education and training.”

On Page 76 of the report, at the appropriate place, insert the following:

*Concussion Surveillance.*—The 2013 NAS study “Sports-Related Concussions in Youth: Improving the Science, Changing the Culture” recommended that CDC establish and oversee a national surveillance system to accurately determine the incidence of sports-related concussions, including youth ages 5 to 21. The Committee is aware of the promising progress CDC has made in creating a comprehensive survey instrument which the agency will be piloting in the coming months to prepare for a national survey in the future. The Committee supports CDC’s work in this area and urges the agency to increase its efforts.

On page 77 of the report, at the appropriate place, insert the following:

*Total Worker Health.*—The Committee commends CDC’s Total Worker Health Program, which aims to promote and protect the health and productivity of the American workforce through research and dissemination of innovative and cost-effective tools and interventions for American businesses. The Committee commends CDC’s work in this area and encourages CDC to continue dissemination of these tools.

On page 79 of the report, at the appropriate place, insert the following:

*U.S. Public Health Capacity and Needs.*—The Committee directs GAO to issue a report within 180 days of the enactment of this Act that reviews the U.S. public health system’s current capacity to respond to infectious disease outbreaks, including federal emergency response. The GAO report shall identify response best practices based on a review of the responses to recent major global infectious disease outbreaks, and provide recommendations about how to ensure that every State public health department has the capacity to provide for a minimum necessary level of public health services. During the course of their review and preparation of recommendations, GAO shall review the 2012 Institute of Medicine report entitled “For the Public’s Health: Investing in a Healthier Future.”

On Page 99 of the report, at the appropriate place, insert the following:

*Otolaryngology.*—The Committee is concerned that research in the study of human temporal bone tissues may be jeopardized by the loss of technical and pathological expertise in this field. Active temporal bone laboratories are largely responsible for the pathologic characterizations of many of the diseases that are treated on a frequent basis, including otosclerosis, Meniere’s disease and chronic otitis media. However, there are other disorders for which the pathology has not been well characterized and the need remains for the active participation of multiple laboratories to develop new techniques to allow for molecular investigations that have not been possible in the past. The Committee urges NIDCD to work with the otolaryngology community to facilitate new and innovative therapies that examine the pathology of the ear and to ensure that hypothesis driven research is retained in pathology centers.

On Page 111 of the report, at the appropriate place, insert the following:

*Infrastructure.*—The Committee understands that Federal agencies such as NIH need to maintain and upgrade parts of their physical infrastructure every year. The NIH facilities budget has been relatively flat since 2009. Over time, only the most essential maintenance and repairs for health and safety have been addressed, leaving an increasing backlog of projects requiring attention. To ensure the Committee is informed of NIH’s critical facility needs and inform future infrastructure budgets, the Committee has included up to \$1,000,000 for NIH to enter into a contract with the National Research Council, Division of Engineering and Physical Sciences, to prepare a report that assesses the capital needs of NIH’s main campus. The report should identify facilities in greatest need of repair, describe the work needed to bring them up to current standards, and include cost estimates for each project. The Committee directs NIH to provide the report with its recommendations to the House and Senate Committees on Appropriations no later than one year from the date of the contract agreement on the statement of work between NIH and the National Research Council.

On page 143 of the report, strike the last paragraph under the heading “Native American Programs” and on page 177 of the report, strike the last sentence under the heading “National Activities”.

On page 155 of the report at the appropriate place, insert the following:

*Antimicrobial Usage, Risks, and Prevention.*—The Committee is deeply concerned about the continued misuse of dangerous chemicals and unapproved animal drugs in aquaculture production in developing countries. Findings highlighted in a November 30, 2008, report by the Food and Drug Administration [FDA] cited clear scientific evidence that the application of certain compounds during the various stages of production may result in carcinogenic, mutagenic and other negative effects to human health. The Secretary, in coordination with FDA, CDC, and other relevant Federal agencies, is directed to submit to the Committees on Appropriations within 180 days after enactment of this Act a report on the current risks of unapproved substances used in foreign imported aquaculture and an updated assessment of the human health impacts associated with these risks.

On page 155 of the report, at the appropriate place, insert the following:

*Federal Anaphylaxis Policy.*—The Committee recognizes that immediate access to epinephrine is the primary and most effective treatment for anaphylaxis. It is also critically important that epinephrine be readily available wherever allergic triggers for anaphylaxis are present. Access to epinephrine auto-injectors within the first 5 minutes of an anaphylactic event can be life-saving. The Committee encourages Federal Occupational Health to engage with patient groups, healthcare professionals and manufacturers to develop recommendations for a program to address treatment for anaphylaxis in federal buildings, parks, and other federally-controlled facilities.

On page 162 of the report, at the appropriate place, insert the following:

*Trauma Service Availability and Systems Development.*—The Committee continues to support efforts to improve trauma center sustainability and service availability in rural, exurban, suburban, and urban locations. The Committee encourages ASPR to develop a proposal for how trauma center improvements could be made in these areas to address problems with trauma care resiliency and reach to unserved populations. In doing so, ASPR should incorporate its analysis of the ability of existing trauma care infrastructure to respond to mass casualty events in a variety of geographic locations previously requested by the Committee.

On page 171 of the report under the heading “Basic Support Payments” insert at the appropriate place the following:

The Committee is concerned that the Department is not notifying school districts in a timely advanced manner of changes in their Impact Aid eligibility status. Hold harmless provisions in ESEA and timely enactment of appropriations bills would provide school districts with adequate time to adjust to significant changes in funding. The Committee directs the Department to enhance its communication with school districts about significant payment decreases likely in the coming school-year, particularly those that are likely to enter hold harmless provisions for a given school-year.

On page 210 of the report, in the table of budget activity, under the Committee Recommendation for “Grants to States account”, strike “\$155,789,000” and insert “\$156,103,000”; For the “National Leadership: Libraries” account, strike “\$13,720,000” and insert “\$13,406,000”

On page 211 of the report, at the appropriate place under the heading “National Labor Relations Board” in Title IV, insert the following:

”The Committee is aware of concerns expressed by some employers that employee professional development and mobility may be hindered by having collective bargaining units that are limited to distinct departments within a workplace. The Committee requests the NLRB to report back to the Committee regarding these concerns, and any suggestions to ensure that cross-training and career advancement may continue between employees in departments who are represented by a union, and employees in departments who are not represented by a union.”

On page 217 of the report, at the appropriate place, insert the following:

*Prioritizing Continuing Disability Reviews to Maximize Cost Savings.*—While the Committee commends SSA on its continued Program Integrity efforts towards becoming current with regards to the Continuing Disability Review (CDR) backlog, a recent GAO report found that SSA’s CDR prioritization models fail to maximize potential cost savings to the trust funds and the Treasury. Within one year, and every three years thereafter, the Committee directs SSA to review and update the models for prioritization of CDRs with the primary intent of efficiently and effectively maximizing lifetime cost savings to the Federal government, both for the DI trust fund and Treasury. A detailed, cost-based explanation for the model’s prioritization of different CDR types and justification for any updates made should be included in the annual CDR Report to Congress.