

**FY2024 Labor-HHS-Education and Related Agencies Appropriations
Full Committee
Managers' Package**

Sponsor	Location	Purpose of Language
Report Language		
Rubio	p. 9	Add language regarding apprenticeships data
Reed	p. 29	Modify language on the collection of non-profit employment data
Hagerty	p. 32, p. 203, and p. 258	Add language regarding voting-related activities
Reed	p. 38	Add language on National Health Service Corps
Rubio	p. 44	Add language on the National Practitioner Data Bank
Merkley	p. 45	Add language to the Maternal and Child Health Block Grant
Van Hollen	p. 46	Add language on Sickle Cell Disease
Van Hollen	p. 66	Add language on youth chronic health
Manchin	p. 146	Add language on confidentiality of substance use disorder patient records
Hagerty	p. 159	Add language on hospitals
Manchin	p. 174	Modify language on child, youth, and family homelessness
Manchin	p. 194	Add language on domestic supply chain of essential medicines/production of antibiotics
Murphy	p. 198	Add language on health outcomes
Shaheen	p. 199	Add language on behavioral health
Shaheen, Britt	p. 199	Add language on breast cancer diagnostics
Rubio	p. 200	Add language on continuous manufacturing
Murphy	p. 202	Add language on mental health parity
Hagerty	p. 203	Add language on Wuhan Institute of Virology
Feinstein	p. 216	Add language under Impact Aid on student weighting
Manchin	p. 229	Modify language on GAO study of substance misuse prevention

Durbin	p. 246 and 247	Reduce funding for Teacher Quality Partnerships and increase funding for Open Textbook Pilot
Rubio	p. 254	Add language on section 117 reporting
Shaheen	p. 255	Add to language on late liquidations
Reed, Murkowski	p. 267	Add language on GAO study of physical condition of library and museum facilities
Hyde-Smith	p. 348 and 352	Strike a CDS project and insert a CDS project

On page 9 of the report at the appropriate place insert the following:

Apprenticeship Grants.—The Committee supports the expansion of apprenticeship opportunities and notes that they can often provide more affordable pathways to high-paying jobs. Not later than 180 days after the enactment of this Act, the Department shall publicly disclose on its website grantees receiving funding under the Apprenticeship Program, the number of apprentices attributable to each grantee, and the respective employment and earnings outcomes of program participants as required under section 116(b)(2)(A)(i) of the Workforce Innovation and Opportunity Act. Additionally, the Department shall report to the Committee on the extent to which it is engaging with the Department of Education to address mismatches between worker skills or their participation in the labor force and employer needs and the steps that the Department has taken or plans to take to study the drivers of skills mismatches, workforce shortages, productivity fluctuations, turnover fluctuations, stagnant wages, and poor working conditions across occupations, industries, and the economy as a whole.

On page 29 in the paragraph on Non-Profit Employment and Wage Data, strike the second sentence and insert:

The Committee directs BLS to report in its fiscal year 2025 CJ the cost and operational steps necessary to provide distinct, public, and quarterly data on non-profit employment.

On Page 32, 203, and 258 in the report, at the appropriate place insert the following:

Voting-Related Activities.—The Committee directs the Secretary to brief the House and Senate Committees on Appropriations no later than 90 days after enactment of this act regarding any strategic plans developed by the Department over the three prior fiscal years outlining the ways that the Department has promoted voter registration, and voter participation.

On Page 38 in the report, at the end of the second paragraph under the header “National Health Service Corps”, insert:

The Committee recognizes the importance of the National Health Service Corps scholarship and loan-repayment programs with Corps members in all 50 States. Therefore, the Committee encourages HRSA to ensure that no State has fewer than five National Health Service Corps awardees in fiscal year 2024 and shall give preference to individuals working in their home State or the State in which they received their education.

On page 44 of the report, at the end of the last paragraph under the header “National Practitioner Data Bank”, insert:

The Committee is aware that limitations may prevent certain health care providers, especially those who predominantly serve seniors, from accessing the National Practitioner Data Bank in a timely manner. HRSA shall evaluate opportunities to expand access to the National Practitioner Data Bank to all Medicare and Medicaid providers, with particular emphasis on providers who serve the senior population.

On page 45, after the first paragraph under the header “Maternal and Child Health [MCH] Block Grant”, insert:

Stillbirth Prevention Technical Assistance.—Stillbirth affects one in 175 pregnancies, with more than 21,000 babies stillborn each year. Despite medical advances, the Committee is concerned that the rate of early stillbirth has remained relatively the same over the past 30 years. The Committee directs HRSA to update its materials and guidance to states to clarify that stillbirth prevention activities are an allowable use of funds under title V, Maternal and Child Health Block Grant program. The Committee also urges HRSA to provide technical assistance to states and health care providers in carrying out stillbirth prevention activities.

On page 46 in the report, at the top under the header “Sickle Cell Anemia” insert the following as a new paragraph:

Sickle Cell Disease Data Collection.—The Committee recognizes that more than 100,000 Americans have sickle cell disease, which disproportionately affects patients of color and, every year, over 2,000 infants in the United States are born with this condition. Supporting sickle cell disease research helps identify and examine barriers to quality care services for patients living with sickle cell disease, including transportation barriers for patients seeking trained specialists in urban and rural communities. The Committee directs HRSA to submit a report to the Committee within a year of enactment of this act on current Federal efforts to: expand data collection through the Sickle Cell Anemia Demonstration Program and the Data Coordination Center; support existing programs that provide transition support for sickle cell disease patients who are aging out of pediatric care and receiving adult care; provide training, technical assistance, and educational opportunities; support education and advocacy programs that engage populations affected by sickle cell disease; disseminate information on health and community services; and improve access to care and treatment decision-making processes. The Committee encourages HRSA, in collaboration with the National Center for Birth Defects and Developmental Disabilities at the CDC, to support sickle cell disease surveillance activities.

On page 66 of the report, after the paragraph titled “Chronic Disease Education and Awareness [CDEA] Program,” insert the following:

Chronic Disease Research on Children, Adolescents, and Young Adults.—The Committee recognizes that children, adolescents, and young adults living with chronic conditions can be disproportionately affected by barriers to access to quality health care services. An estimated 39,800,000 adults between ages of 18 and 34 years have at least one chronic condition and about 16,500,000 adults in this age group have more than one condition. Limited access to quality care often results in a lack of awareness among health care providers, limited treatment options, and adverse health outcomes for children, adolescents, and young adults living with chronic conditions. The Committee directs the National Center for Chronic Disease Prevention and Health Promotion to submit a report to the Committee within a year of enactment of this act on the current state of Federal research on children, adolescents, and young adults living with chronic conditions, including information on disease prevalence, an evaluation of existing data collection programs for chronic conditions affecting this population, barriers to available treatment options, and related health outcomes. The report should also identify remaining knowledge gaps among health care providers and patients in understanding of chronic conditions affecting children, adolescents, and young adults, and recommendations for filling these gaps. Further, the Committee encourages CDC, in collaboration with NIH, to continue to support education, outreach, and awareness to promote early and accurate diagnosis of chronic conditions among children, adolescents, and young adults.

On page 146 of the report, after the paragraph titled “Comprehensive Opioid Recovery Centers,” insert the following:

Confidentiality of Substance Use Disorder Patient Records.—The Committee appreciates SAMHSA and the Office for Civil Rights [OCR] developing proposed rules updating the Confidentiality of Substance Use Disorder Patient Records. This action holds the potential to reduce drug overdose rates and help coordinate treatment for those with substance use disorder. The Committee directs SAMHSA and OCR to complete the rulemaking process as soon as is practicable in order to improve treatment and save lives.

On page 159 of the report, after the paragraph titled “Diabetes Self-Management Training”, insert the following:

Disproportionate Share Hospital [DSH] Payments.—The Committee recognizes that the Federal Medicaid statute generally requires DSH payments to hospitals treating large numbers of low-income patients in every State except Tennessee, whose DSH allotment is currently scheduled to cease after fiscal year 2025. The Committee encourages CMS to provide the necessary and adequate data to Congress to ensure a long-term Medicaid DSH allotment for Tennessee in the near future.

On page 174 of the report, in the paragraph titled “Child, Youth, and Family Homelessness,” insert after the second sentence the following:

In particular, the Committee urges ACF to develop a plan to lead and coordinate efforts to provide holistic services to homeless children, youth, and families to break the cycle of homelessness, including by identifying existing resources and gaps.

On page 194 of the report, after the paragraph titled “Supply Chain Risk Assessment,” insert the following:

Domestic Supply Chain of Essential Medicines.—The Committee urges ASPR, in coordination with FDA, to identify opportunities to support the development of capabilities to produce essential medicines in the United States. Particular attention should be paid to the production of antibiotics, which are experiencing drug shortages and are found on FDA’s List of Essential Medicines.

On page 198 of the report, before the paragraph titled “Adult Cellular Therapies”, insert the following:

Addressing Factors Related to Improving Health Outcomes.—The Committee encourages the Secretary to support efforts to coordinate health and social services, enable information sharing on health and social services, and provide technical assistance and related support for entities engaging in efforts to better coordinate health and social services as authorized in Public Law 117-328.

On page 199 of the report, after the paragraph titled “Artificial DNA Synthesis”, insert the following:

Barriers to Behavioral Health Care for Students.—The Committee encourages the Secretary to investigate barriers to continuity of behavioral health care due to State licensing agreements, particularly for students in higher education. The Committee is concerned that students who move or reside out-of-State from their primary behavioral health provider may not be able to maintain access to their provider via telehealth. The Committee directs the Secretary to submit a report within one year of enactment of this act on the circumstances under which providers may be eligible to deliver telehealth services to patients located out-of-State, with their informed consent, including follow up care for patients in higher education with an established therapeutic (patient-provider) relationship. The report should also provide recommendations on how to alleviate such barriers to care.

On page 199 of the report, after the paragraph titled “Brain Aneurysm”, insert the following:

Breast Cancer Diagnostics.—The Committee remains concerned about access to breast cancer diagnostic and supplemental imaging for individuals with commercial insurance, including financial barriers to care, and the financial costs associated with delayed care. The Committee urges the Secretary to work with Congress, and stakeholders to ensure adequate access to diagnostic and supplemental breast imaging, which are integral services of breast cancer screening and early detection. The Committee also requests a report to Congress on existing barriers to breast cancer diagnostic and supplemental imaging, financial costs associated with delayed care relative to breast cancer screenings, actions the Secretary could take to address this issue, and recommendations to Congress on how to alleviate such barriers within 180 days of enactment of this act.

On page 200 of the report, after the paragraph titled “Children’s Interagency Coordinating Council”, insert the following:

Continuous Manufacturing.—The Committee is concerned that the lack of clear standards and realistic quality assessment methods for continuous pharmaceutical manufacturing are creating unnecessary risk for capital investments in advanced manufacturing equipment. The Committee urges the Secretary to issue updated guidance that provides clear standards and realistic quality assessment methods for continuous pharmaceutical manufacturing, such as by creating a monitoring system for finished drug quality performance. Furthermore, the Committee urges the Secretary to hold industry forums with domestic pharmaceutical manufacturers and to make dedicated staff available to assist innovators and drug manufacturers in navigating the regulatory process for new and emerging advanced manufacturing practices and technologies.

On page 202 of the report, after the paragraph titled “Mental Health Grants”, insert the following:

Mental Health Parity.—The Committee encourages the Secretary to support State insurance departments for the implementation of mental health parity as authorized in Public Law 117-328.

On page 203 of the report, after the paragraph titled “Stillbirth Working Group,” insert the following:

Wuhan Institute of Virology.—The Committee is encouraged with the Action Referral Memorandum issued on July 17, 2023, with respect to the suspension and debarment of Wuhan Institute of Virology, Chinese Academy of Sciences Capital Construction from participating in the United States Federal Government programs. The Committee directs the Department to provide a report to the Committee within 30 days of enactment regarding compliance with the Memorandum and ways the Department is ensuring that Federal funds are not awarded to entities that are likely to have failed to comply with Federal biosafety requirements based on evidence that provides cause for suspension under 2 C.F.R § 180.700(a)-(c).

On page 216 of the report after the paragraph titled “Basic Support Payments” insert the following:

Student Weighting.--The Committee understands that this year one LEA benefitting from increased student weighting for serving a large total student and on-base military and civilian connected student population has experienced a decline in total student population that jeopardizes their eligibility for such student weighting. Such a change could cause a significant reduction in Impact Aid payment. The Committee notes there are other changes impacting LEAs eligibility for Impact Aid and understands the need for continued work to address these issues in a comprehensive manner that reflects the input of all stakeholders. The Department should be prepared to engage in these discussions and seamlessly implement changes.

On page 229 of the report under the heading “GAO Study of Substance Misuse Prevention”, strike the third sentence and insert:

The Committee directs GAO to report on the extent to which States require the use of evidence-based drug education and prevention programs in schools. GAO shall also report on how the Federal Government helps address challenges schools face in implementing such programs, especially in rural areas, and make recommendations on best practices for incorporating educational materials on the harmful impacts of substance misuse and abuse.

On page 246 of the report under “Teacher Quality Partnership Program” replace “\$85,000,000” with “\$83,000,000”.

On page 247 of the report under “Fund for the Improvement of Post-Secondary Education” replace “\$322,979,000” with “\$322,981,000”.

On page 247 of the report under “Open Textbook Pilot” replace “\$5,000,000” with “\$7,000,000”.

On page 254 of the report at the appropriate place insert the following:

Foreign Influence.— Under section 117 of the HEA, institutions of higher education receiving Federal financial assistance are required to disclose gifts from, or contracts with, foreign sources if the value is \$250,000 or more. They must also disclose ownership or control by a foreign source. Such disclosures increase transparency and are in support of national security and academic integrity. The Department makes such information publicly available on its website. The Committee notes the Department provides on its website a repository of guidance and other resources related to section 117 reporting. The Committee strongly urges the Department to work with IHEs to ensure they are fully complying with this statutory requirement and requests an update in the fiscal year 2025 congressional justification on these efforts. Additionally, the Department shall report to the Committee on the presence and influence of Confucius Institutes and any steps it has taken to address undue influence within institutions of higher education.

On page 255 of the report at the end of the paragraph on “Late Liquidation”, insert the following:

The Department shall ensure that its process for ARP ESSER late liquidation requests minimizes the administrative burden on SEAs and LEAs to the extent practicable, including by not requiring excessive documentation. The Committee appreciates the Department’s frequently asked questions, June 26, 2023 clarification, and availability to speak with State or other auditors about the late liquidation process. The Department must also provide explicit clarity outlining how its guidance can be implemented consistent with 2 CFR 200.403(h). The Department shall provide sufficient clarity in its guidance, and predictability in its process, in order to ensure that LEAs are able to enter into contracts for allowable costs as reasonable and necessary during the obligation period regardless of the contract’s liquidation end date, as long as it is within the authorized late liquidation period and the LEA intends to submit an appropriate late liquidation request to the SEA.

On page 267 of the report, after the “Tribal Consortia Eligibility” paragraph insert the following:

Museum and Library Facilities.—The Committee directs the GAO to conduct a study on the physical condition of library and museum facilities in the United States and report preliminary findings to the Committee within 18 months of the date of enactment. The GAO’s study shall examine the availability and condition of library and museum facilities, separated by geographic region including non-contiguous States, urban, rural, and frontier areas, and economically disadvantaged and underserved communities; the physical accessibility of such facilities for individuals with disabilities; the condition of such facilities affected by natural disasters and extreme weather; the condition of such facilities affecting employee and patron health and safety; and what is known about the cost to bring such facilities to a state of good repair.

On page 348 of the report at the appropriate place in the table entitled “Congressionally Directed Spending Items” insert the following project:

“Department of Education – Higher Education – Delta State University, MS, for the purchase of equipment – 1,000,000 – Hyde-Smith”.

On page 352 of the report, strike the row for the project entitled “Mississippi State University, MS, for veterinary education, including technology and equipment”