



Labor, Health and Human Services, and Education: FY2016 Appropriations

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Summary

This report provides an overview of actions taken by Congress and the President to provide FY2016 appropriations for accounts funded by the Departments of Labor, Health and Human Services, and Education, and Related Agencies (LHHS) appropriations bill. This bill provides funding for all accounts funded through the annual appropriations process at the Departments of Labor (DOL) and Education (ED). It provides annual appropriations for most agencies within the Department of Health and Human Services (HHS), with certain exceptions (e.g., the Food and Drug Administration is funded via the Agriculture bill). The LHHS bill also provides funds for more than a dozen related agencies, including the Social Security Administration (SSA).

Continuing Resolution: On September 30, 2015, the Continuing Appropriations Act, 2016, was passed by the House and the Senate and signed into law by the President (P.L. 114-53). The FY2016 continuing resolution (CR) provides appropriations for each of the 12 regular appropriations bills (including LHHS) through December 11, or until full-year appropriations are enacted. With limited exceptions, the CR funds discretionary LHHS programs at FY2015 levels, minus a reduction of less than one percent (-0.2108%). The CR generally funds annually appropriated mandatory spending programs at current law levels, though non-exempt mandatory spending programs remain subject to sequestration in FY2016.

Senate LHHS Action: On June 25, the Senate Appropriations Committee approved its FY2016 LHHS appropriations bill by a vote of 16-14 (S. 1695; S.Rept. 114-74). This bill would provide \$162 billion in discretionary LHHS funds, which is about 1% less than FY2015 enacted levels. In addition, the Senate committee bill would provide an estimated \$718 billion in mandatory funding, for a total of \$880 billion for LHHS as a whole.

- **DOL:** The Senate committee-reported bill would provide roughly \$11.4 billion in discretionary funding for DOL, roughly 5% less than FY2015 enacted.
- **HHS:** The Senate committee-reported bill would provide roughly \$71.0 billion in discretionary funding for HHS, roughly the same as FY2015 enacted.
- **ED:** The Senate committee-reported bill would provide roughly \$65.8 billion in discretionary funding for ED, roughly 2% less than FY2015 enacted.
- **Related Agencies:** The Senate committee-reported bill would provide roughly \$13.7 billion in discretionary funding for LHHS related agencies, roughly 3% less than FY2015 enacted.

House LHHS Action: On June 24, the House Appropriations Committee approved its FY2016 LHHS bill by a vote of 30-21 (H.R. 3020; H.Rept. 114-195). This bill would provide \$161 billion in discretionary LHHS funds, which is about 2% less than FY2015 enacted levels. In addition, the House committee bill would provide an estimated \$718 billion in mandatory funding, for a total of roughly \$879 billion for LHHS as a whole.

- **DOL:** The House committee-reported bill would provide roughly \$11.7 billion in discretionary funding for DOL, roughly 2% less than FY2015 enacted.
- **HHS:** The House committee-reported bill would provide roughly \$71.3 billion in discretionary funding for HHS, roughly the same as FY2015 enacted.
- **ED:** The House committee-reported bill would provide roughly \$64.4 billion in discretionary funding for ED, roughly 4% less than FY2015 enacted.

- **Related Agencies:** The House committee-reported bill would provide roughly \$13.8 billion in discretionary funding for LHHS related agencies, roughly 3% less than FY2015 enacted.

President's Budget Submission: On February 2, 2015, the Obama Administration released the FY2016 President's budget. The President requested \$175 billion in discretionary funding for accounts funded by the LHHS bill, which is about 6% more than FY2015 enacted levels. In addition, the President requested roughly \$718 billion in annually appropriated mandatory funding, for a total of roughly \$893 billion for LHHS as a whole.

- **DOL:** The President requested roughly \$13.2 billion in discretionary funding for DOL, roughly 10% more than FY2015 enacted.
- **HHS:** The President requested roughly \$75.8 billion in discretionary funding for HHS, roughly 7% more than FY2015 enacted.
- **ED:** The President requested roughly \$70.7 billion in discretionary funding for ED, roughly 5% more than FY2015 enacted.
- **Related Agencies:** The President requested roughly \$15.1 billion in discretionary funding for LHHS related agencies, roughly 6% more than FY2015 enacted.

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Introduction

This report provides an overview of FY2016 appropriations actions for accounts traditionally funded in the appropriations bill for the Departments of Labor, Health and Human Services, and Education, and Related Agencies (LHHS). This bill provides discretionary and mandatory appropriations to three federal departments: the Department of Labor (DOL), the Department of Health and Human Services (HHS), and the Department of Education (ED). In addition, the bill provides annual appropriations for more than a dozen related agencies, including the Social Security Administration (SSA).

Discretionary funds represent less than one-quarter of the total funds appropriated in the LHHS bill. Nevertheless, the LHHS bill is typically the largest single source of discretionary funds for domestic non-defense federal programs among the various appropriations bills (the Department of Defense bill is the largest source of discretionary funds among all federal programs). The bulk of this report is focused on discretionary appropriations because these funds receive the most attention during the appropriations process.

The LHHS bill typically is one of the more controversial of the regular appropriations bills because of the size of its funding total and the scope of its programs, as well as various related policy issues addressed in the bill such as restrictions on the use of federal funds for abortion and for research on human embryos and stem cells.

See the **Key Policy Staff** table at the end of this report for information on which analysts to contact at the Congressional Research Service with questions on specific agencies and programs funded in the LHHS bill.

Report Roadmap and Useful Terminology

This report is divided into several sections. The opening section provides an explanation of the scope of the LHHS bill (and hence, the scope of this report), as well as an introduction to important terminology and concepts that carry throughout the report.

Next is a series of sections describing major congressional actions on FY2016 appropriations and (for context) a review of the conclusion of the FY2015 appropriations process.

This is followed by a high-level summary and analysis of proposed appropriations for FY2016, compared to enacted FY2015 funding levels.

The body of the report concludes with overview sections for each of the major components of the bill: DOL, HHS, ED, and Related Agencies. These sections provide selected highlights from FY2016 proposals, compared to enacted FY2015 levels.

Finally, an **Appendix** provides a summary of budget enforcement activities for FY2016. This includes information on the Bipartisan Budget Act of 2015 (P.L. 114-74), the Budget Control Act of 2011 (BCA; P.L. 112-25), and sequestration, as well as procedural efforts related to the budget resolution and subcommittee spending allocations.

Scope of the Report

This report is focused strictly on appropriations to agencies and accounts that are subject to the jurisdiction of the Labor, Health and Human Services, Education, and Related Agencies Subcommittees of the House and the Senate Appropriations Committees (i.e., accounts traditionally funded via the LHHS bill). Department “totals” provided in this report do not

include funding for accounts or agencies that are traditionally funded by appropriations bills under the jurisdiction of other subcommittees.

The LHHS bill provides appropriations for the following federal departments and agencies:

- the Department of Labor;
- most agencies at the Department of Health and Human Services, except for the Food and Drug Administration (provided in the Agriculture appropriations bill), the Indian Health Service (provided in the Interior-Environment appropriations bill), and the Agency for Toxic Substances and Disease Registry (also funded through the Interior-Environment appropriations bill);
- the Department of Education; and
- more than a dozen related agencies, including the Social Security Administration, the Corporation for National and Community Service, the Corporation for Public Broadcasting, the Institute of Museum and Library Services, the National Labor Relations Board, and the Railroad Retirement Board.

Note also that funding totals displayed in this report do not reflect amounts provided outside of the regular appropriations process. Certain direct spending programs, such as Old-Age, Survivors, and Disability Insurance and parts of Medicare, receive funding directly from their authorizing statutes; such funds are not reflected in the totals provided in this report because they are not provided through the regular appropriations process (see related discussion in the “Important Budget Concepts” section).

Important Budget Concepts

Mandatory vs. Discretionary Budget Authority¹

The LHHS bill includes both discretionary and mandatory budget authority. While all discretionary spending is subject to the annual appropriations process, only a portion of mandatory spending is provided in appropriations measures.

Mandatory programs funded through the annual appropriations process are commonly referred to as *appropriated entitlements*. In general, appropriators have little control over the amounts provided for appropriated entitlements; rather, the authorizing statute controls the program parameters (e.g., eligibility rules, benefit levels) that entitle certain recipients to payments. If Congress does not appropriate the money necessary to meet these commitments, entitled recipients (e.g., individuals, states, or other entities) may have legal recourse.²

Most mandatory spending is not provided through the annual appropriations process, but rather through budget authority provided by the program’s authorizing statute (e.g., Old-Age, Survivors, and Disability Insurance). The funding amounts in this report do not include budget authority

¹ For definitions of these and other budget terms, see U.S. Government Accountability Office (GAO), *A Glossary of Terms Used in the Federal Budget Process*, GAO-05-734SP, September 1, 2005, <http://www.gao.gov/products/GAO-05-734SP>. (Terms of interest may include appropriated entitlement, direct spending, discretionary, entitlement authority, and mandatory.)

² Sometimes appropriations measures include amendments to laws authorizing mandatory spending programs and thereby change the amount of mandatory appropriations needed. Because such amendments are legislative in nature, they may violate parliamentary rules separating authorizations and appropriations. For more information, see CRS Report R42388, *The Congressional Appropriations Process: An Introduction*, by (name redacted) .

provided outside of the appropriations process. Instead, the amounts reflect only those funds, discretionary and mandatory, that are provided through appropriations acts.

Note that, as displayed in this report, mandatory amounts for the President's budget submission reflect current law (or current services) estimates; they generally do not include the President's proposed changes to a mandatory spending program's authorizing statute that might affect total spending. (In general, such proposals are excluded from this report, as they typically would be enacted in authorizing legislation.)

Note also that the report focuses most closely on discretionary funding. This is because discretionary funding receives the bulk of attention during the appropriations process. (As noted earlier, although the LHHS bill includes more mandatory funding than discretionary funding, the appropriators generally have less flexibility in adjusting mandatory funding levels than discretionary funding levels.)

Total Budget Authority Provided in the Bill vs. Total Budget Authority Available in the Fiscal Year

Budget authority is the amount of money a federal agency is legally authorized to commit or spend. Appropriations bills may include budget authority that becomes available in the current fiscal year, in future fiscal years, or some combination. Amounts that become available in future fiscal years are typically referred to as *advance appropriations*.

Unless otherwise specified, appropriations levels displayed in this report refer to the total amount of *budget authority provided in an appropriations bill* (i.e., "total in the bill"), regardless of the year in which the funding becomes available.³ In some cases, the report breaks out "current-year" appropriations (i.e., the amount of *budget authority available for obligation in a given fiscal year*, regardless of the year in which it was first appropriated).⁴

As the annual appropriations process unfolds, the amount of current-year budget authority is measured against 302(b) allocation ceilings (budget enforcement caps for appropriations subcommittees that traditionally emerge following the budget resolution process). The process of measuring appropriations against these spending ceilings takes into account *scorekeeping adjustments*, which are made by the Congressional Budget Office (CBO) to reflect conventions and special instructions of Congress.⁵ Unless otherwise specified, appropriations levels displayed in this report do not reflect additional scorekeeping adjustments.

FY2016 Continuing Resolution

None of the FY2016 regular appropriations bills were enacted prior to the start of the fiscal year (October 1, 2015). Instead, on September 30, 2015, the President signed into law a continuing resolution (CR) for FY2016 (P.L. 114-53). The FY2016 CR provides appropriations for each of the 12 regular appropriations bills through December 11, or until full-year appropriations are

³ Such figures include advance appropriations provided in the bill for future fiscal years, but do not include advance appropriations provided in prior years' appropriations bills that become available in the current year.

⁴ Such figures exclude advance appropriations for future years, but include advance appropriations from prior years that become available in the current year.

⁵ For more information on scorekeeping, see CRS Report 98-560, *Baselines and Scorekeeping in the Federal Budget Process*, by (name redacted). See also a discussion of key scorekeeping guidelines included in the joint explanatory statement accompanying the conference report to the Balanced Budget Act of 1997 (H.Rept. 105-217, pp. 1007-1014).

enacted. With limited exceptions, the CR funds discretionary LHHS programs at FY2015 levels, minus a reduction of less than one percent (-0.2108%). The CR generally funds annually appropriated mandatory spending programs at current law levels, though non-exempt mandatory spending programs remain subject to sequestration in FY2016.

For more information about the FY2016 CR, see CRS Report R44214, *Overview of the FY2016 Continuing Resolution (H.R. 719)*, by (name redacted) .

FY2016 LHHS Appropriations Status

Table 1 provides a timeline of major legislative actions toward full-year FY2016 LHHS appropriations. The remainder of this section provides additional detail on these and other steps toward full-year LHHS appropriations.

Table 1. Status of LHHS Appropriations Legislation, FY2016

Subcommittee Markup		House Report	House Passage	Senate Report	Senate Passage	Conf. Report	Conference Report Approval		Public Law
House	Senate						House	Senate	
H.R. 3020	S. 1695	H.Rept. 114-195		S.Rept. 114-74					
6/17/15	6/23/15	6/24/15		6/25/15					
voice vote	voice vote	30-21		16-14					

Source: CRS Appropriations Status Table.

FY2016 LHHS Action in the Senate

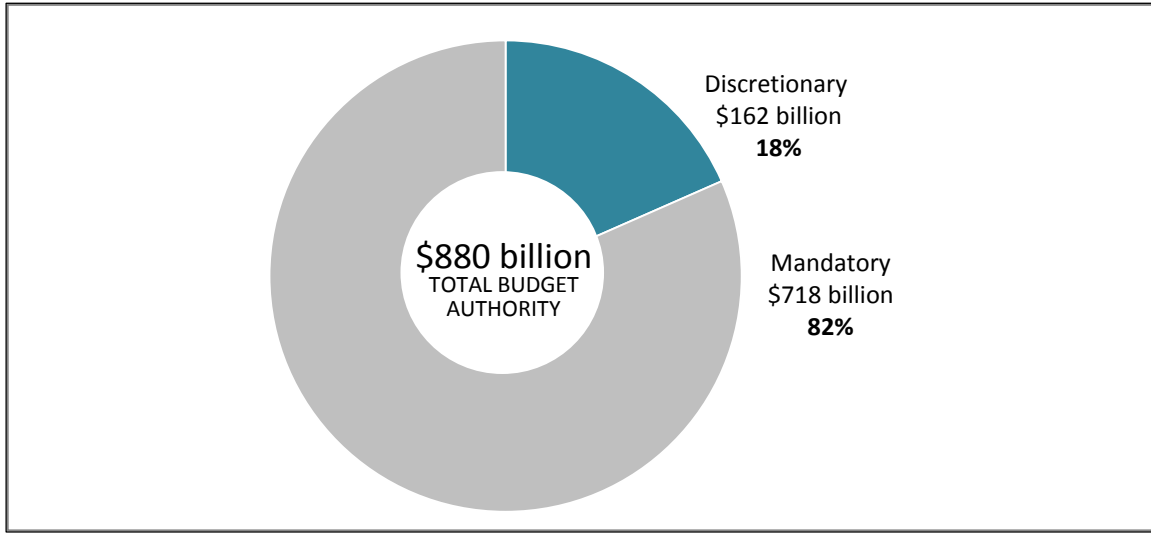
On June 25, the Senate Appropriations Committee approved its FY2016 LHHS appropriations bill by a vote of 16-14 (S. 1695; S.Rept. 114-74). Prior to this, on June 23, the Senate LHHS Subcommittee had approved a draft bill for full committee consideration.

As reported by the full committee, this bill would provide \$162 billion in discretionary LHHS funds. This is about 1% less than FY2015 enacted levels and 7% less than the FY2016 President’s request. In addition, the Senate committee bill would provide an estimated \$718 billion in mandatory funding, for a combined total of \$880 billion for LHHS as a whole.

See **Figure 1** for the breakdown of discretionary and mandatory LHHS appropriations in the FY2016 Senate committee bill.⁶

⁶ While the percentages in this figure were calculated based on amounts in the Senate committee bill, they are generally also illustrative (within two percentage points) of the share of mandatory vs. discretionary LHHS funds in FY2015 (as enacted) and under the other FY2016 proposals.

Figure I. FY2016 Senate Committee-Reported LHHS Appropriations Bill



Source: Amounts for the FY2016 Senate committee bill are generally drawn from (or estimated based on) S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: Details may not add to totals due to rounding. Amounts in this figure (1) reflect all budget authority appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

FY2016 LHHS Action in the House

On June 24, the House Appropriations Committee approved its FY2015 LHHS bill by a vote of 30-21 (H.R. 3020; H.Rept. 114-195). Prior to this, on June 17, the House LHHS Subcommittee had approved a draft bill for full committee consideration.

As reported by the full committee, this bill would provide \$161 billion in discretionary LHHS funds. This is about 2% less than FY2015 enacted levels and 8% less than the FY2016 President's request. In addition, the House committee bill would provide an estimated \$718 billion in mandatory funding, for a combined total of \$879 billion for LHHS as a whole.

FY2016 President's Budget Request

On February 2, 2015, the Obama Administration released the FY2016 President's budget. The President requested \$175 billion in discretionary funding for accounts funded by the LHHS bill, which is about 6% more than FY2015 enacted levels. In addition, the President requested roughly \$718 billion in annually appropriated mandatory funding, for a total of roughly \$893 billion for the LHHS bill as a whole.

Conclusion of the FY2015 Appropriations Process

On December 16, 2014, President Obama signed into law the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235). The final version of this bill was agreed to in the House on December 11, 2014, and in the Senate on December 13, 2014. The enacted law

provided regular, full-year appropriations for 11 of the 12 annual appropriations bills, including LHHS (see Division G). This law appropriated \$164 billion in discretionary funding for LHHS (not counting emergency Ebola funds), which is roughly comparable to amounts provided in FY2014 (+0.05%) and the FY2015 President's request (-0.1%). In addition, the FY2015 omnibus appropriated \$681 billion in mandatory LHHS funding, for a total of \$846 billion for LHHS as a whole.

Emergency Ebola Appropriations

In addition to non-emergency LHHS appropriations, the omnibus also provided \$2.7 billion in emergency-designated funding to HHS in response to the Ebola outbreak in Africa (see Division G, Title VI).⁷ These funds were distributed as follows:

- \$1.8 billion to the Centers for Disease Control and Prevention (CDC) for activities to enhance domestic preparedness, support overseas operations to end the Ebola epidemic, and prevent the spread of Ebola and other infectious diseases;
- \$238 million to the National Institutes of Health (NIH) for clinical trials on experimental Ebola vaccines and treatments; and
- \$733 million to the Public Health and Social Services Emergency Fund, which is administered within the HHS Office of the Secretary, for drug and vaccine development and domestic hospital preparedness.⁸

Summary of FY2016 LHHS Appropriations

Dollars and Percentages in this Report

Amounts displayed in this report are typically rounded to the nearest million or billion (as labeled). Dollar changes and percent changes discussed in the text of this report are based on unrounded amounts.

Funding levels are generally drawn from (or estimated based on) amounts displayed in the reports accompanying the House and Senate Appropriations Committee-reported FY2016 LHHS bills (H.R. 3020; S. 1695). Throughout this report, these bills are commonly referred to as the House and Senate LHHS "committee bills" for FY2016. Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74.

For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect transfers or reprogramming of funds pursuant to executive authorities, or any other adjustments for comparability.⁹ In addition, amounts for FY2015 generally exclude emergency Ebola funds appropriated to HHS by the FY2015 omnibus (Division G, Title VI), as well as Ebola-related funds provided by the first FY2015 CR (P.L. 113-164).

⁷ This amount does not include Ebola-related funds appropriated to the HHS Food and Drug Administration (FDA) in Division A, Title VIII, of the FY2015 omnibus (P.L. 113-235). The FDA falls within the jurisdiction of the Agriculture appropriations bill, not LHHS. In addition, the amount specified above does not include \$88 million appropriated to HHS for Ebola-related activities in the first FY2015 continuing resolution (P.L. 113-164).

⁸ For more information, see CRS Report R43807, *FY2015 Funding to Counter Ebola and the Islamic State (IS)*, coordinated by (name redacted).

⁹ The recent practice for Congressional Research Service reports on the LHHS bill has been to adjust appropriations amounts in the prior year column (but not any columns for the current year) to reflect sequestration, re-estimates of mandatory spending, transfers, reprogramming, and other adjustments for comparability. This report breaks from that practice due to new display conventions in source documents.

Table 2 displays FY2015 enacted and FY2016 proposed discretionary and mandatory LHHS funding levels, by bill title. The amounts shown in this table reflect total budget authority provided in the bill (i.e., all funds appropriated in the current bill, regardless of the fiscal year in which the funds become available), not total budget authority available for the current fiscal year. (For a comparable table showing current-year budget authority, see **Table A-2** in the **Appendix**.)

Table 2. LHHS Appropriations Overview by Bill Title, FY2015-FY2016

(Total budget authority provided in the bill, in billions of dollars)

Bill Title	FY2015 Enacted	FY2016 Request	FY2016 House Cmte (H.R. 3020)	FY2016 Senate Cmte (S. 1695)
Title I: Labor	13.3	14.5	12.4	12.7
Discretionary	11.9	13.2	11.7	11.4
Mandatory	1.4	1.4	0.7	1.4
Title II: HHS	691.7	732.8	728.9	728.1
Discretionary	71.0	75.8	71.3	71.0
Mandatory	620.7	657.1	657.6	657.1
Title III: Education	70.5	74.1	67.8	69.2
Discretionary	67.1	70.7	64.4	65.8
Mandatory	3.3	3.4	3.4	3.4
Title IV: Related Agencies	70.0	71.3	69.9	69.9
Discretionary	14.2	15.1	13.8	13.7
Mandatory	55.9	56.2	56.2	56.2
Total BA in the Bill	845.6	892.8	879.0	879.9
Discretionary	164.2	174.8	161.2	161.9
Mandatory	681.3	718.0	717.8	718.0
Title VI: Ebola (emergency)^a	2.7	-	-	-
Memoranda:				
Advances for Future Years (provided in current bill) ^b	160.77	158.52	158.52	158.52
Advances from Prior Years (for use in current year) ^b	151.46	160.77	160.77	160.77
Additional Scorekeeping Adjustments ^c	-5.99	-5.52	-6.63	-7.07

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities. FY2015 enacted totals do not include Ebola-related funds provided by the first FY2015 CR (P.L. 113-64) or in Division G, Title VI, of the FY2015 omnibus (P.L. 113-235).

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate

Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills. No amounts are shown for Title V, because this title consists solely of general provisions.

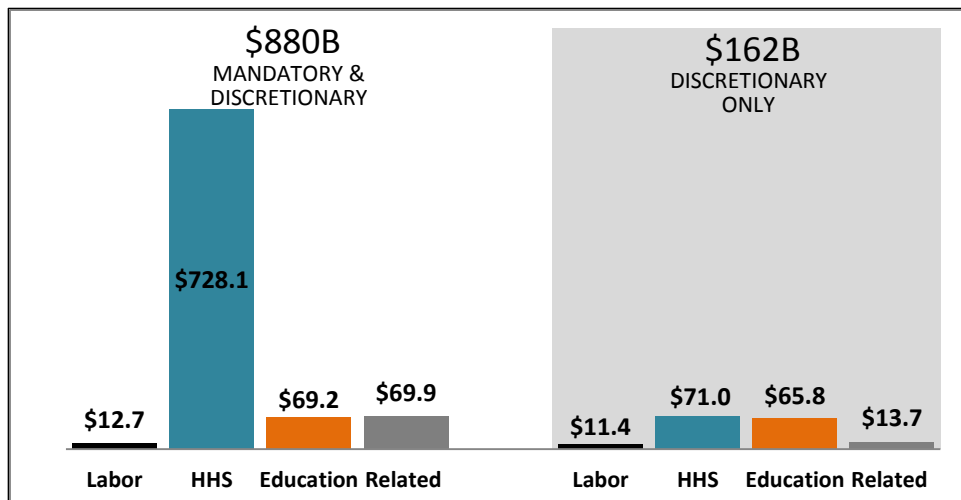
- a. Total does not include \$88 million appropriated to HHS for Ebola-related activities in the first FY2015 CR.
- b. Totals in this table are based on budget authority provided in the bill (i.e., they exclude advance appropriations from prior bills and include advance appropriations from this bill made available in future years). The calculation for total budget authority available in the current year is as follows: Total BA in the Bill minus Advances for Future Years plus Advances from Prior Years.
- c. Totals in this table have generally not been adjusted for further scorekeeping. (To adjust for scorekeeping, add this line to the total budget authority.)

Figure 2 displays the discretionary and mandatory LHHS funding levels, by bill title, as proposed in the FY2016 Senate committee-reported bill. (While the percentages shown were calculated based on amounts in the Senate committee bill, they are generally also illustrative—within one percentage point—of the share of funds directed to each bill title in FY2015 and under the other FY2016 proposals.)

As this figure demonstrates, HHS accounts for 83% of total LHHS appropriations in the Senate committee bill. This is due to the large amount of mandatory funding included in the HHS appropriation, the majority of which is for Medicaid grants to states and payments to health care trust funds. After HHS, ED and the Related Agencies represent the next-largest shares of total LHHS funding, accounting for about 8% apiece. The majority of the ED appropriations are discretionary, while the bulk of funding for the Related Agencies goes toward mandatory payments and administrative costs of the Supplemental Security Income program at the Social Security Administration. Finally, DOL accounts for the smallest share of total LHHS funds: roughly 1%.

When looking only at discretionary appropriations, however, the overall composition of LHHS funding is noticeably different. HHS accounts for a comparatively smaller share of total discretionary appropriations (45%), while ED accounts for a relatively larger share (41%). Together, these two departments represent the majority (84%) of discretionary LHHS appropriations. Meanwhile, DOL and Related Agencies combine to account for a roughly even split of the remaining 16% of discretionary LHHS funds.

Figure 2. FY2016 Senate Committee-Reported LHHS Bill, by Title



Source: Amounts for the FY2016 Senate committee bill are generally drawn from (or estimated based on) S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: Details may not add to totals due to rounding. Amounts in this figure (1) reflect all budget authority appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

Department of Labor (DOL)

Note that all amounts in this section are based on regular LHHS appropriations only. Amounts in this section do not include mandatory funds provided outside of the annual appropriations process (e.g., direct appropriations for Unemployment Insurance benefits payments). All amounts in this section are rounded to the nearest million or billion (as labeled). The dollar changes and percentage changes discussed in the text are based on unrounded amounts.

About DOL

DOL is a federal department comprised of multiple entities that provide services related to employment and training, worker protection, income security, and contract enforcement. Annual LHHS appropriations laws direct funding to all DOL entities (see box for all entities supported by the LHHS bill).¹¹ The DOL entities fall primarily into two main functional areas—workforce development and worker protection. First, there are several DOL entities that administer workforce employment and training programs, such as the Workforce Innovation and Opportunity Act (WIOA) state formula grant programs, Job Corps, and the Employment Service, that provide direct funding for employment activities or administration of income security programs (e.g., for the Unemployment Insurance benefits program).¹² Also included in this area is the Veterans’ Employment and Training Service (VETS), which provides employment services specifically for the veteran population. Second, there are several agencies that provide various worker protection services. For example, the Occupational Safety and Health Administration (OSHA), the Mine Safety and Health Administration (MSHA), and the Wage and Hour Division (WHD) provide different types of regulation and oversight of working conditions. DOL entities focused on worker protection provide services to ensure worker safety, adherence to wage and overtime laws, and contract compliance, among other duties. In

DOL Entities Funded via the LHHS Appropriations Process

Employment and Training Administration (ETA)
Employee Benefits Security Administration (EBSA)
Wage and Hour Division (WHD)
Office of Federal Contract Compliance Programs (OFCCP)
Office of Labor-Management Standards (OLMS)
Office of Workers’ Compensation Programs (OWCP)
Occupational Safety and Health Administration (OSHA)
Mine Safety and Health Administration (MSHA)
Bureau of Labor Statistics (BLS)
Office of Disability Employment Policy (ODEP)
Departmental Management (DM)¹⁰

¹⁰ Departmental Management includes the Veterans Employment and Training Service (VETS), IT Modernization, and the Office of the Inspector General.

¹¹ The Pension Benefit Guaranty Corporation (PBGC) is funded primarily through insurance premiums and related fees from companies covered by the PBGC.

¹² The Workforce Innovation and Opportunity Act (WIOA; P.L. 113-128) became law in July 2014 and reauthorized many of the programs previously authorized by the Workforce Investment Act (WIA). Most of the provisions in WIOA went into effect on July 1, 2015.

addition to these two main functional areas, DOL’s Bureau of Labor Statistics (BLS) collects data and provides analysis on the labor market and related labor issues.

FY2016 DOL Appropriations Overview

Table 3 displays proposed DOL funding levels for FY2016, along with FY2015 enacted levels. Discretionary funds represent the majority of DOL’s annual appropriations, accounting for roughly 90% of FY2015 enacted levels and FY2016 proposed levels. Compared to FY2015, discretionary DOL appropriations would decrease under both the House (-2%) and Senate (-5%) committee bills for FY2016. By contrast, the President’s budget requested an increase in discretionary funding from FY2015 (+10%).

Table 3. DOL Appropriations Overview
(Dollars in billions)

Funding	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Discretionary	11.9	13.2	11.7	11.4
Mandatory	1.4	1.4	0.7	1.4
Total BA in the Bill	13.3	14.5	12.4	12.8

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

Selected DOL Highlights

The following are some DOL highlights from the FY2016 House and Senate committee-reported bills and the FY2016 President’s budget.¹³ **Table 4** displays funding for DOL programs and activities discussed in this section.

Employment and Training Administration (ETA)

ETA administers the primary federal workforce development law, the Workforce Innovation and Opportunity Act (WIOA, P.L. 113-128). The WIOA was signed into law in July 2014, with most provisions going into effect in FY2015.

Title I of the WIOA includes three state formula grants serving Adults, Youth, and Dislocated Workers. The FY2016 House committee-reported bill would provide the same level of funding for these three formula grants as was provided in the FY2015 omnibus (\$2.6 billion), while the FY2016 Senate committee-reported bill would decrease funding for the formula grants by \$132

¹³ DOL budget materials can be found at <http://www.dol.gov/dol/aboutdol/#budget>.

million (-5%) compared to FY2015. By contrast, the President's budget requested an increase of \$89 million (+3%) in total funding for these grants compared to FY2015.

The WIOA allows governors to reserve up to 15% of the funds received from the three state formula grants for a combination of required (e.g., evaluations of state workforce programs) and allowable (e.g., research and demonstration projects) workforce activities. However, the FY2015 omnibus superseded this provision, by lowering the governors' reserve limit to 10% of the WIOA state formula grants. The FY2016 House committee-reported bill would change the reserve limit to 11%, while the Senate committee-reported bill would increase it back to 15% of WIOA state formula grants.

The FY2016 President's budget and the FY2016 House and Senate committee-reported bills proposed changes to the Dislocated Workers Activities National Reserve (DWA National Reserve). The FY2016 President's budget requested an increase in funds for the DWA National Reserve from the FY2015 level of \$221 million to \$241 million to cover a \$20 million set-aside to provide reemployment and training to workers dislocated from coal mines and coal-fired power plants. The FY2016 Senate committee-passed bill would decrease funding for the DWA National Reserve to \$200 million but, like the FY2016 President's budget would direct \$19 million for dislocated coal workers. The FY2016 House committee-passed bill would reduce funding for the DWA National Reserve to \$74 million.

The FY2016 Senate committee-passed bill would move the Office of Disability Employment Policy (ODEP) into ETA and reduce its funding from the FY2015 level of \$39 million to \$24 million.

Finally, while the FY2016 President's budget requested \$100 million for a new Apprentice Grant program, neither the FY2016 Senate nor House committee-passed bills would fund this initiative.

Wage and Hour Division (WHD)

The FY2016 President's budget requested an increase of \$49 million (+22%) for WHD, in support of the WHD's strategic enforcement initiatives, from the FY2015 level of \$228 million. The WHD administers and enforces a range of laws that provide labor standards (e.g., minimum wages, working hours), such as the Fair Labor Standards Act (FLSA), the Davis-Bacon Act (DBA), and the McNamara-O'Hara Service Contract Act (SCA). The FY2016 President's request reflects an emphasis on "strategic enforcement," which involves proactive efforts to monitor and enforce compliance rather than complaint-driven, reactive enforcement. The FY2016 Senate and House committee-passed bills would reduce funding for the WHD by \$18 million (-8%) and \$12 million (-5%), respectively.

Bureau of International Labor Affairs (ILAB)

The FY2016 President's budget requested an increase of \$4 million (+4%) for ILAB, which provides research, advocacy, technical assistance, and grants to promote workers' rights in different parts of the world, from its FY2015 funding of \$91 million. The FY2016 Senate and House committee-passed bills would reduce funding for ILAB by \$61 million (-67%) and \$59 million (-65%), respectively. Language in S.Rept. 114-74 and H.Rept. 114-195 indicate that the proposed reduction in ILAB's FY2016 appropriations is intended to eliminate new international grants, which typically comprise about two-thirds of ILAB's expenditures.

Labor-Related General Provisions

Annual LHHS appropriations acts regularly contain general provisions related to certain labor issues. This section highlights two newly proposed general provisions from one or both of the FY2016 committee-reported bills. (See also the “Selected Related Agencies Highlights” section of this report for a brief discussion of newly proposed restrictions on funding for the National Labor Relations Board contained in the FY2016 House and Senate committee bills.)

The FY2016 Senate and House committee-reported bills contain new (identical) provisions that would prohibit the use of DOL funds made available in the bill to finalize, implement, administer, or enforce a proposed fiduciary rule.¹⁴ Briefly, DOL issued a proposed rule on April 20, 2015, that would expand the definition of “investment advice” within employer-sponsored private-sector pension plans and individual retirement accounts. Individuals who provide financial recommendations that meet the definition of “investment advice” must meet a higher “fiduciary” standard that requires acting solely in the interests of plan participants. As proposed, the rule may increase the number of individuals held to this higher standard.¹⁵ The comment period for this proposed rule ended in September 2015; DOL has not yet published a final rule.

The FY2016 Senate committee-reported bill contains a new provision that would direct the Secretary of Labor to accept private wage surveys as part of the process of determining prevailing wages in the H-2B program, even in instances in which relevant wage data are available from the Bureau of Labor Statistics.¹⁶ The H-2B program allows for the temporary employment of foreign workers in non-agricultural sectors and requires these workers to be paid the “prevailing wage” (i.e., the average wage paid to similar workers in the local area). Under DOL regulations, private employer surveys may be considered only if the employer meets certain conditions. The House committee bill does not include a comparable provision.

Table 4. Detailed DOL Appropriations
(Dollars in millions)

Agency or Selected Program	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
ETA—Mandatory^a	711	664	0	664
ETA—Discretionary	9,014	9,902	8,864	8,683
<u>Discretionary ETA Programs:</u>				
Training and Employment Services:	3,140	3,402	3,003	2,936
Adult Activities Grants to States	777	816	777	737
Youth Activities Grants to States	832	873	832	790
Dislocated Worker Activities (DWA) Grants to States	1,016	1,021	1,016	965
<u>Federally Administered Programs:^b</u>	430	461	291	418
DWA National Reserve	221	241	74	200

¹⁴ See Section 113 of H.R. 3020 and Section 110 of S. 1695.

¹⁵ For more information, see CRS Report R44207, *Department of Labor's 2015 Proposed Fiduciary Rule: Background and Issues*, by (name redacted) and (name redacted)

¹⁶ See Section 111 of S. 1695.

Agency or Selected Program	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Native Americans	46	50	50	41
Migrant and Seasonal Farmworkers	82	82	82	73
Women in Apprenticeship	1	0	0	0
YouthBuild	80	85	82	80
Technical Assistance	0	3	3	1
<u>National Activities:</u>	86	232	88	26
Reintegration of Ex-Offenders	82	95	82	22
Workforce Data Quality Initiative	4	37	6	4
Apprenticeship Grants	0	100	0	0
Job Corps	1,688	1,716	1,688	1,683
Community Service Employment for Older Americans	434	434	434	400
<u>State Unemployment Insurance and Employment Service Operations (SUI/ESO):</u>	3,597	4,138	3,580	3,520
Unemployment Compensation	2,791	2,898	2,760	2,738
Employment Service	684	1,084	684	654
Foreign Labor Certification	62	76	76	62
One-Stop Career Centers	60	80	60	66
State Paid Leave Fund	0	35	0	0
ETA Program Administration	155	177	158	144
Employee Benefits Security Administration	181	207	181	169
<i>Pension Benefit Guaranty Corp, program level (non-add)</i>	(415)	(432)	(432)	(432)
Wage and Hour Division	228	277	216	210
Office of Labor-Management Standards	39	47	42	36
Office of Federal Contract Compliance Programs	106	114	101	96
Office of Workers' Compensation Programs— Mandatory^c	691	698	698	698
Office of Workers' Compensation Programs— Discretionary	113	120	115	110
Occupational Safety & Health Administration	553	592	535	524
Mine Safety & Health Administration	376	395	371	357
Bureau of Labor Statistics	592	633	609	579
Office of Disability Employment Policy	39	38	38	0
Departmental Management	705	855	670	621
Salaries and Expenses	338	376	285	259
<i>International Labor Affairs (non-add)</i>	(91)	(95)	(32)	(30)
Veterans Employment and Training	270	271	271	270

Agency or Selected Program	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
IT Modernization	15	120	30	13
Office of the Inspector General	82	88	85	79
Total, DOL BA in the Bill	13,347	14,542	12,439	12,748
Subtotal, Mandatory	1,401	1,363	698	1,363
Subtotal, Discretionary	11,945	13,180	11,741	11,385
Memoranda				
Total, BA Available in Fiscal Year (current year from any bill)	13,350	14,544	12,582	12,750
Total, BA Advances for Future Years (provided in current bill)	1,793	1,791	1,650	1,791
Total, BA Advances from Prior Years (for use in current year)	1,796	1,793	1,793	1,793

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills. Non-add amounts are displayed in italics and parentheses; these amounts are not part of the appropriations totals.

- a. Mandatory funding within ETA goes to Federal Unemployment Benefits and Allowances (FUBA). FUBA funds Trade Adjustment Assistance for Workers (TAA). At the time the FY2016 House committee bill was reported, authorization of appropriations for TAA had expired. The House committee-reported bill would not appropriate funding for TAA. TAA was subsequently reauthorized by P.L. 114-27 on June 29, 2015.
- b. The subtotal for “Federally Administered Programs” includes \$24 million for the Office of Disability Employment Policy (ODEP), which reflects the FY2016 Senate committee-reported bill’s proposed transfer of ODEP to ETA.
- c. Mandatory programs in the Office of Workers’ Compensation Programs include Special Benefits (comprising the Federal Employees’ Compensation Benefits and the Longshore and Harbor Workers’ Benefits), Special Benefits for Disabled Coal Miners, Energy Employees Occupational Illness Compensation (Administrative Expenses), and the Black Lung Disability Trust Fund.

Department of Health and Human Services (HHS)

Note that all figures in this section are based on regular LHHS appropriations only; they do not include funds for HHS agencies provided through other appropriations bills (e.g., funding for the Food and Drug Administration) or outside of the annual appropriations process (e.g., direct appropriations for Medicare or pre-appropriated mandatory funds provided by authorizing laws, such as the Patient Protection and Affordable Care Act (ACA, P.L. 111-148)).¹⁷ All amounts in this section are rounded to the nearest million or billion (as labeled). The dollar changes and percentage changes discussed in the text are based on unrounded amounts.

About HHS

HHS is a sprawling federal department comprised of multiple agencies working to enhance the health and well-being of Americans. Annual LHHS appropriations laws direct funding to most (but not all) HHS agencies (see **box** for agencies supported by the LHHS bill).¹⁸ For instance, the LHHS bill directs funding to five Public Health Service (PHS) agencies: the Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), Substance Abuse and Mental Health Services Administration (SAMHSA), and Agency for Healthcare Research and Quality (AHRQ).¹⁹ These public health agencies support diverse missions, ranging from the provision of health care services and supports (e.g., HRSA, SAMHSA), to the advancement of health care quality and medical research (e.g., AHRQ, NIH), to the prevention and control of infectious and chronic diseases (e.g., CDC). In addition, the LHHS bill provides funding for annually appropriated components of CMS,²⁰ which is the HHS agency responsible for the administration of Medicare, Medicaid, the State Children's Health Insurance Program (CHIP), and consumer protections and private health insurance provisions of the ACA. The LHHS bill also provides funding for two HHS agencies focused primarily on the provision of social services: the Administration for Children and Families (ACF) and the

HHS Agencies Funded via the LHHS Appropriations Process

Health Resources and Services Administration (HRSA)
Centers for Disease Control and Prevention (CDC)
National Institutes of Health (NIH)
Substance Abuse and Mental Health Services Administration (SAMHSA)
Agency for Healthcare Research and Quality (AHRQ)
Centers for Medicare & Medicaid Services (CMS)
Administration for Children and Families (ACF)
Administration for Community Living (ACL)
Office of the Secretary (OS)

¹⁷ The ACA was subsequently amended by the Health Care and Education Reconciliation Act (P.L. 111-152). These two laws are collectively referred to as the ACA in this report. (Previous CRS reports on the Patient Protection and Affordable Care Act used the acronym PPACA to refer to the statute, but newer reports will use "ACA," in conformance with the more widely used acronym for the law.) For information on funding directly appropriated by the ACA, see the tables in CRS Report R41301, *Appropriations and Fund Transfers in the Affordable Care Act (ACA)*, by (name redacted).

¹⁸ Three HHS public health agencies receive annual funding from appropriations bills other than the LHHS bill: the Food and Drug Administration (Agriculture appropriations bill), the Indian Health Service (Interior-Environment appropriations bill), and the Agency for Toxic Substances and Disease Registry (Interior-Environment appropriations bill).

¹⁹ For more information on HHS PHS agencies, see CRS Report R43304, *Public Health Service Agencies: Overview and Funding (FY2010-FY2016)*, coordinated by (name redacted) and (name redacted).

²⁰ Much of the funding for CMS activities is directly appropriated in authorizing legislation, and thus is not subject to the annual appropriations process.

Administration for Community Living (ACL). ACF’s mission is to promote the economic and social well-being of vulnerable children, youth, families, and communities. ACL was formed with a goal of increasing access to community supports for older Americans and people with disabilities. ACL is a relatively new agency within HHS—it was established in April 2012 by bringing together the Administration on Aging, the Office of Disability, and the Administration on Developmental Disabilities (renamed the Administration on Intellectual and Developmental Disabilities) into one agency.²¹ Finally, the LHHS bill also provides funding for the HHS Office of the Secretary (OS), which encompasses a broad array of management, research, oversight, and emergency preparedness functions in support of the entire department.

FY2016 HHS Appropriations Overview

Table 5 displays proposed FY2016 funding levels for HHS, along with FY2015 enacted levels. In general, discretionary funds account for about 10% of HHS appropriations in the LHHS bill. Compared to FY2015, discretionary appropriations for HHS would remain relatively flat under both the House (+0.5%) and Senate (+0.1%) committee-reported bills for FY2016. Meanwhile, the President requested an increase in discretionary funding from FY2015 (+7%).

Table 5. HHS Appropriations Overview

(Dollars in billions)

Funding	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Discretionary	71.0	75.8	71.3	71.0
Mandatory	620.7	657.1	657.6	657.1
Total BA in the Bill	691.7	732.8	728.9	728.1
Title VI Ebola (emergency)	2.7	-	-	-

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities. FY2015 enacted totals do not include Ebola-related funds provided by the first FY2015 CR (P.L. 113-64) or in Division G, Title VI, of the FY2015 omnibus (P.L. 113-235).

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

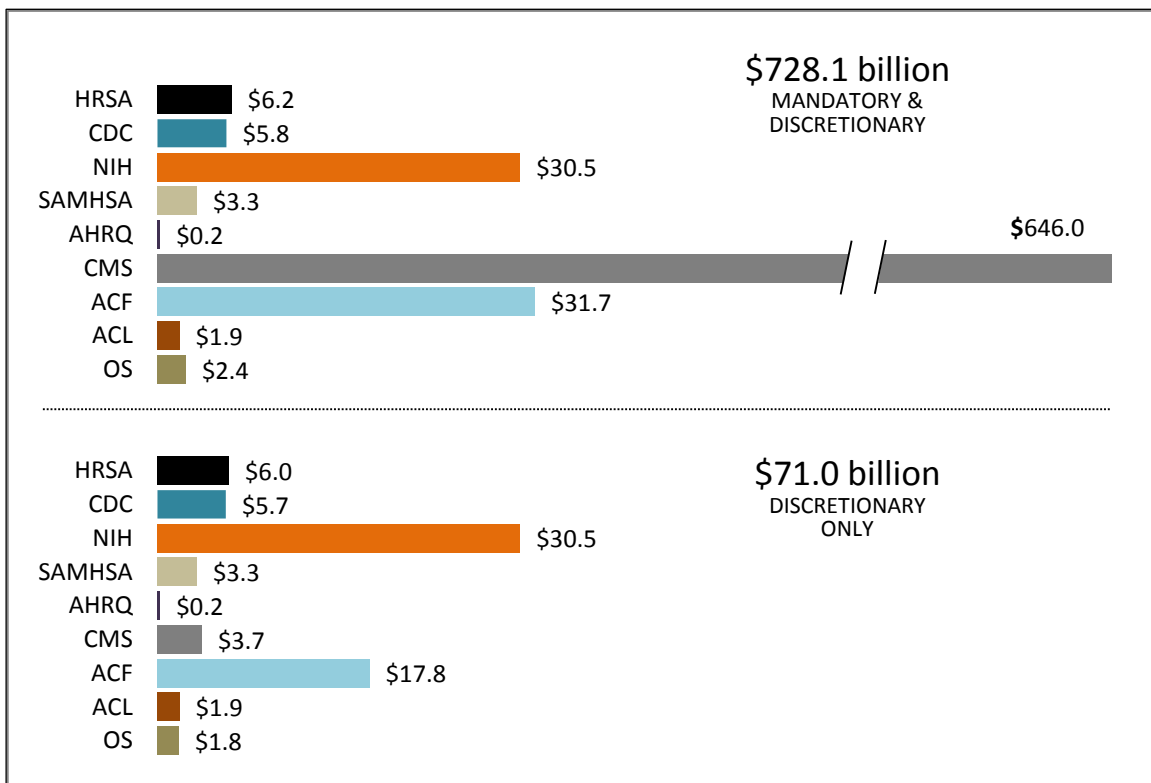
Figure 3 provides an agency-level breakdown of proposed HHS appropriations in the FY2016 Senate committee-reported bill. (While the percentages shown were calculated based on amounts in the Senate committee bill, they are generally also illustrative—within three percentage points—of the share of funds directed to each HHS agency in FY2015 and the other FY2016 proposals.)

²¹ See the HHS Secretary’s press release from April 16, 2012: <http://www.hhs.gov/news/press/2012pres/04/20120416a.html>. For more information on the ACL, see <http://www.hhs.gov/acl/>.

Annual HHS appropriations are dominated by mandatory funding, the majority of which goes to CMS to provide Medicaid benefits and payments to health care trust funds. When taking into account both mandatory and discretionary funding, CMS accounts for 89% of total HHS appropriations in the FY2016 Senate committee bill. ACF and NIH account for the next-largest shares of total HHS appropriations, receiving about 4% apiece.

By contrast, when looking exclusively at discretionary appropriations, funding for CMS constitutes less than 6% of HHS appropriations in the FY2016 Senate committee bill. Instead, the bulk of discretionary appropriations go to the PHS agencies, which combine to account for 64% of discretionary appropriations in the bill. NIH typically receives the largest share of all discretionary funding among HHS agencies (43% in the Senate committee bill), with ACF accounting for the second-largest share (25% in the Senate committee bill).

Figure 3. FY2016 HHS Appropriations, by Agency, in the Senate Committee Bill



Source: Amounts for the FY2016 Senate committee bill are generally drawn from (or estimated based on) S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: Details may not add to totals due to rounding. Amounts in this figure (1) reflect all budget authority appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

Special Public Health Funding Mechanisms

Annual appropriations for HHS public health service agencies are best understood in the context of certain additional funding mechanisms: the Public Health Service Evaluation Set-Aside and the Prevention and Public Health Fund. In recent years, LHHS appropriations have used these funding mechanisms to direct additional support to certain programs and activities.

Public Health Service Evaluation Tap

The Public Health Service (PHS) Evaluation Set-Aside, also known as the PHS Evaluation Tap, is a unique feature of HHS appropriations. The Evaluation Tap, which is authorized by Section 241 of the Public Health Service Act (PHSA), allows the Secretary of HHS, with the approval of appropriators, to redistribute a portion of eligible PHS agency appropriations across HHS for program evaluation purposes.

The PHSA limits the set-aside to not less than 0.2% and not more than 1% of eligible program appropriations. However, LHHS appropriations acts have commonly established a higher maximum percentage for the set-aside and distributed specific amounts of “tap” funding to selected HHS programs. The FY2015 omnibus maintained the maximum set-aside level at 2.5% of eligible appropriations, the same percentage that has been in place since FY2010. The FY2016 President’s budget proposed increasing the set-aside to 3.0% of eligible appropriations, but this proposal was rejected in both the House and Senate committee bills for FY2016. The Senate committee bill would retain the set-aside at 2.5%, while the House committee bill would reduce the set-aside to 2.4% of eligible appropriations *or* \$1.068 billion, whichever is less.²²

Before FY2015, the tap traditionally provided more than a dozen HHS programs with funding beyond their annual appropriations and, in some cases, was the sole source of funding for a program or activity. However, the FY2015 omnibus broke with that precedent by directing tap funds to only about a half dozen programs or activities within just three HHS agencies (NIH, SAMHSA, and OS) and eliminating regular tap transfers to AHRQ, CDC, and HRSA. This was of particular note for AHRQ, since the agency had been funded primarily through tap transfers from FY2003 to FY2014.²³ In FY2015, however, AHRQ received a discretionary appropriation in an annual appropriations act for the first time in more than a decade. In addition, unlike years past, the FY2015 omnibus directed the largest share of tap transfers (\$715 million) to NIH. As a result, NIH went from being by far the largest net donor of tap funds to a net recipient of tap funds. The joint explanatory statement accompanying the FY2015 omnibus explained this shift as being intended to ensure that tap transfers are a “net benefit to NIH rather than a liability” and noted that this change was in response to a growing concern at the loss of NIH funds to the tap.²⁴

Readers should note that, by convention, tables in this report show only the amount of PHS Evaluation Tap funds *received* by an agency (i.e., tables do not subtract the amount of the evaluation tap from donor agencies’ appropriations). That is to say, tap amounts shown in the

²² The last time an appropriations act set the PHS tap percentage at 2.4% was FY2009 (see P.L. 111-8). For proposed FY2016 provisions, see §205 of H.R. 3020 and §204 of S. 1695.

²³ FY2009 was an exception, as AHRQ received a one-time appropriation from the American Recovery and Reinvestment Act that year. In recent years, AHRQ has also received some transfers from the Prevention and Public Health Fund and the Patient-Centered Outcomes Research Trust Fund, though these transfers were generally much smaller than the transfers AHRQ received from the tap. For more information, see CRS Report R44136, *The Agency for Healthcare Research and Quality (AHRQ) Budget: Fact Sheet*, by (name redacted).

²⁴ Joint Explanatory Statement, Proceedings and Debates of the 113th Congress, Second Session, *Congressional Record*, vol. 160, no. 151, Book II, December 11, 2014, p. H9832.

following tables are *in addition* to amounts shown for budget authority, but the amounts shown for budget authority have not been adjusted to reflect potential “transfer-out” of funds to the tap.

Prevention and Public Health Fund

The ACA authorized and directly appropriated mandatory funding for three multi-billion dollar trust funds to support programs and activities within the PHS agencies.²⁵ One of these, the Prevention and Public Health Fund (PPHF, ACA Section 4002, as amended), is intended to provide support each year to prevention, wellness, and related public health programs funded through HHS accounts.²⁶ The ACA directly appropriated \$2 billion in mandatory funds for the PPHF in FY2016, but this amount was later reduced to \$1 billion by the Middle Class Tax Relief and Job Creation Act of 2012 (P.L. 112-96), which decreased total PPHF appropriations by \$6.25 billion over the course of FY2013-FY2021. In addition, the FY2016 PPHF appropriation is also subject to a 6.8% reduction due to sequestration of nonexempt mandatory spending (for more information on sequestration, see the budget enforcement discussion in the **Appendix**).

PPHF funds are intended to supplement (sometimes quite substantially) the funding that selected programs receive through regular appropriations, as well as to fund new programs, particularly those newly authorized by the ACA. The ACA instructs the Secretary to transfer amounts from the PPHF to agencies for prevention, wellness, and public health activities. The President’s annual budget request sets out the intended distribution and use of PPHF funds for that fiscal year. The Secretary determined how to distribute these funds for FY2010 through FY2013. However, the annual appropriations acts for FY2014 and FY2015, and accompanying report language, explicitly directed the distribution of PPHF funds and prohibited the Secretary from making further transfers in those years.²⁷ The FY2016 House and Senate committee bills and accompanying reports continue the practice of explicitly directing PPHF funds.

The CDC commonly receives the largest share of PPHF funds, including in FY2015, when the CDC received \$887 million from the PPHF. The CDC would continue to be the largest recipient of PPHF funds under FY2016 proposals by the Administration (\$914 million), as well as the House (\$914 million) and Senate (\$893 million) appropriations committees. The FY2015 enacted and FY2016 proposed PPHF transfers are displayed in the HHS tables below; the PPHF amounts in these tables are *in addition* to amounts shown for budget authority provided in the bill.

Selected HHS Highlights by Agency

This section begins with a series of HHS highlights, by agency, from the FY2016 House and Senate committee-reported bills and the FY2016 President’s budget.²⁸ These summaries are followed by a brief overview of significant provisions from annual HHS appropriations laws that restrict spending in certain controversial areas, such as abortion and stem cell research. Finally,

²⁵ For more information, see CRS Report R41301, *Appropriations and Fund Transfers in the Affordable Care Act (ACA)*, by (name redacted) .

²⁶ For more information about the PPHF, see Appendix C in CRS Report R43304, *Public Health Service Agencies: Overview and Funding (FY2010-FY2016)*, coordinated by (name redacted) and (name redacted) .

²⁷ See, for FY2015, Explanatory Statement Submitted by Mr. Rogers of Kentucky Regarding H.R. 83, Division G—Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2015, General Provisions, “Prevention and Public Health Transfer Table,” *Congressional Record*, vol. 160 (December 11, 2014), p. H9839.

²⁸ HHS budget materials can be found at <http://www.hhs.gov/budget/>.

the section concludes with two tables (**Table 6** and **Table 7**) presenting more detailed information on FY2015 enacted and FY2016 proposed funding levels for HHS.

HRSA

Both the FY2016 House and Senate committee bills would provide less funding to HRSA than the FY2015 omnibus (\$6.1 billion). Compared to FY2015 enacted, the House committee bill would decrease funding by \$301 million (-4.9%) and the Senate committee bill would decrease funding by \$108 million (-1.8%). Both the House and Senate bills were also lower than the President's budget request (\$6.2 billion), by \$413 million and \$221 million, respectively.²⁹

Much of the difference between the FY2016 House and Senate committee bills and the President's budget request is due to differences in proposed FY2016 funding for the Title X Family Planning Program. The FY2016 House committee bill would eliminate funding for the Family Planning Program authorized in Title X of the PHSA. In addition, Section 229 would prohibit any funds appropriated in the bill from being used to carry out Title X of the PHSA. The FY2016 Senate committee bill would provide \$258 million for the Title X Family Planning Program, a reduction of 10% compared to the FY2015 enacted amount.

CDC

For CDC, the FY2016 House committee bill would provide \$128 million more (+2.1%) and the FY2016 Senate committee bill would provide \$221 million less (-3.7%) than the non-emergency appropriations provided in the FY2015 omnibus (\$6 billion). The House committee bill would provide the same amount as the FY2016 President's budget request (\$6.1 billion), while the Senate committee bill would provide \$348 million less than the President's request.

Compared to FY2015 enacted, the FY2016 House and Senate committee bills would both provide funding increases for Emerging and Zoonotic Diseases (+30.5% and +10.1%, respectively) and Injury Prevention and Control (+24.0% and +10.3%, respectively). The FY2016 House and Senate committee bills would decrease funding for Environmental Health (-12.5% and -20.5%, respectively) and Chronic Disease Prevention and Health Promotion (-23.7% and -20.3%, respectively). The actual decrease for the latter is lessened by slight increases in mandatory PPHF funds directed to this program.

Continuing the practice started in the FY2015 omnibus, the FY2016 House and Senate committee bills would not direct any PHS tap funds to CDC. However, both the House and Senate committee bills would increase PPHF transfers to the CDC slightly from the FY2015 omnibus (+3.0% and +0.6%, respectively).

NIH

NIH would receive an increase of about 3% or more in total discretionary budget authority under each of the FY2016 proposals, compared to FY2015.³⁰ In addition, under each FY2016 proposal, NIH would receive an increase of 19% or more in PHS tap transfers, all of which would be directed to the National Institute of General Medical Sciences (NIGMS). The increase in tap

²⁹ For more information, see CRS Report R44054, *Health Resources and Services Administration (HRSA) FY2016 Budget Request and Funding History: Fact Sheet*, by (name redacted) .

³⁰ For additional information, see the NIH section of CRS Report R43944, *Federal Research and Development Funding: FY2016*, coordinated by (name redacted) . For additional NIH funding history, see CRS Report R43341, *NIH Funding: FY1994-FY2016*, by (name redacted) .

funding would be paired with a decrease in discretionary budget authority for NIGMS under each of the FY2016 proposals, though the combined total of tap transfers and discretionary budget authority would provide a net increase of 3% or more to NIGMS under each proposal.

In general, each of the NIH Institutes and Centers would receive a net increase under FY2016 proposals. The House and Senate committee bills would direct the largest percentage increases to the National Institute on Aging (+27% and +29%, respectively), calling for an appropriation of roughly \$1.5 billion. Out of this amount, the House report calls for NIH to reserve \$886 million for Alzheimer's disease research. The Senate report, while identifying Alzheimer's disease as an area of key interest, retains the "long-standing tradition" of not reserving specific amounts for particular diseases or research areas, instead deferring to NIH and its scientific advisory panels to allocate funding to different research areas within individual Institutes and Centers.³¹

Notably, the Senate committee bill would make significant changes to the HHS Nonrecurring Expenses Fund (NEF) that would benefit NIH. The NEF was established by the Consolidated Appropriations Act, 2008 (P.L. 110-161, Division G, Title II, §223), to enable the HHS Secretary to collect certain unobligated balances of expired discretionary funds appropriated to HHS from the General Fund.³² Under current law, funds transferred into the NEF are available to the Secretary for capital acquisitions across HHS, including facilities infrastructure and information technology. However, the Senate committee bill would instead make NEF funds available only to the Office of the Director at NIH for purposes of carrying out NIH activities (see §220). The House committee bill, meanwhile, would terminate the NEF altogether, and would rescind remaining unobligated balances (see §225).

SAMHSA

For SAMHSA discretionary budget authority in FY2016, the President's budget proposed \$3.4 billion (\$78 million or 2% less than the FY2015 enacted amount), the House committee bill proposed \$3.6 billion (\$169 million or 5% more than in FY2015), and the Senate committee bill proposed \$3.3 billion (\$159 million or 5% less than in FY2015).³³ All three FY2016 proposals would provide additional SAMHSA funding to address opioid addiction.³⁴

The President's budget and the Senate committee bill would bolster SAMHSA's discretionary budget authority with transfers from the PHS Evaluation Tap: \$211 million under the President's budget and \$134 million under the Senate committee bill. (For comparison, in FY2015, \$134 million were transferred to SAMHSA from the PHS Evaluation Tap). Additionally, the President's budget and the Senate committee bill would transfer funds to SAMHSA from the PPHF: \$58 million under the President's budget and \$12 million under the Senate committee bill. (For comparison, in FY2015, \$12 million were transferred to SAMHSA from PPHF). Meanwhile, the House committee bill would not transfer any funds to SAMHSA from either the PHS Evaluation Tap or PPHF, but would provide a higher discretionary appropriation than either the President's budget or the Senate committee bill.

³¹ S.Rept. 114-74, p. 95.

³² Most accounts receive appropriations from the "general fund" at the U.S. Treasury. This term refers to all federal money not allocated by authorizing law to any other fund account, such as federal trust funds for Medicare.

³³ For more information, see CRS Report R43968, *SAMHSA FY2016 Budget Request and Funding History: A Fact Sheet*, by (name redacted)

³⁴ In addition to opioid-related proposals at SAMHSA, there are also opioid-related proposals for activities at other HHS agencies, including CDC and NIH.

AHRQ

The FY2016 House committee bill calls for the termination of AHRQ.³⁵ The bill would allow other HHS agencies to carry out certain activities currently carried out by AHRQ. However, discretionary HHS appropriations for FY2016 would be prohibited from being used for patient-centered outcomes research. As a result, any such research currently carried out by AHRQ could not be funded with discretionary dollars for FY2016, even if the research activities were transferred to other HHS agencies. The House committee bill would also rescind all unobligated AHRQ funding, along with \$100 million out of the \$116 million in mandatory funding scheduled to be transferred to AHRQ in FY2016 from the Patient-Centered Outcomes Research Trust Fund (PCORTF), which was established and directly appropriated by the ACA.³⁶ Transfers to AHRQ from the PCORTF are to be used to disseminate the results of patient-centered outcomes research. Finally, the House committee bill would also transfer administration of the U.S. Preventive Services Task Force (USPSTF) from AHRQ to the Assistant Secretary for Health, while making revisions to USPSTF's authorizing statute.

In contrast, both the FY2016 Senate committee bill and the President's budget would continue to fund AHRQ. The Senate committee bill would reduce AHRQ's discretionary budget authority to \$236 million (\$128 million less than FY2015), with no tap transfers. The President requested \$276 million in discretionary budget authority for AHRQ, along with \$88 million in tap transfers. Under both the Senate committee bill and the President's budget, AHRQ is still scheduled to receive \$116 million in previously appropriated mandatory PCORTF funds in FY2016.

CMS

The Health Care Fraud and Abuse Control (HCFAC) account at CMS would receive the same discretionary budget authority as FY2015 (\$672 million) in the FY2016 House committee bill, but would receive an increase of \$34 million (+5%) in both the FY2016 Senate committee bill and the President's budget. Of the total amounts proposed for HCFAC, \$311 million would be considered a base amount, with remaining funds to be provided through a budget cap adjustment authorized by the Balanced Budget and Emergency Deficit Control Act of 1985, as amended.

The House and Senate committee bills would reduce discretionary budget authority for the CMS Program Management account compared to FY2015 enacted. This account supports program operations (e.g., claims processing, information technology investments, provider and beneficiary outreach and education, and program implementation), as well as federal administration and other activities. The House committee bill would provide \$3.3 billion (-9%) and the Senate committee bill would provide \$3.0 billion (-17%) for this account. These funding levels are also less than the FY2016 President's request of \$4.2 billion. The House committee bill would prohibit funds made available to this account from being used to support the CMS Center for Consumer Information and Insurance Oversight (CCIIO) or its activities. The House committee bill would also prevent funds from being used for research, demonstrations, and evaluation. The Senate committee bill does not include comparable restrictions.

Both the House and Senate committee bills would continue the general provision, first included in the FY2015 omnibus, preventing certain funds from being used to make risk corridor payments

³⁵ For more information on AHRQ's FY2016 budget request and funding history, see CRS Report R44136, *The Agency for Healthcare Research and Quality (AHRQ) Budget: Fact Sheet*, by (name redacted) .

³⁶ For more information on the PCORTF, see Appendix D of CRS Report R43304, *Public Health Service Agencies: Overview and Funding (FY2010-FY2016)*, coordinated by (name redacted) and (name redacted) .

associated with health insurance exchanges (or marketplaces).³⁷ The ACA requires HHS to administer a risk corridor program for qualified health plans offered through health insurance exchanges in calendar years 2014-2016. Through this program, HHS must make payments to insurers who experience high losses, while insurers who experience high gains must remit a portion of those gains to HHS.³⁸ The House and Senate committee bills for FY2016 would prohibit HHS from making risk corridor payments with funds appropriated to the CMS Program Management account from the Federal Hospital Insurance Trust Fund or the Federal Supplemental Medical Insurance Trust Fund, or with funds transferred to the Program Management account from other accounts funded in the LHHS bill.

The House and Senate committee bills for FY2016 also propose new general provisions intended to limit funds from being used to support other aspects of ACA implementation. For instance:

- Section 229 of the Senate committee bill would prohibit certain funds from being used to support the operation of health care exchanges established pursuant to Section 1311 of the ACA.³⁹ Specifically, the bill would prohibit HHS from using funds made available in the bill from the Federal Hospital Insurance Trust Fund or the Federal Supplemental Medical Insurance Trust Fund, or funds transferred to the CMS Program Management account from other accounts funded in the bill. The House committee bill does not include a comparable provision.
- Section 230 of the House committee bill would prohibit any funds appropriated in the bill from being used for health insurance “navigator” programs required by Section 1311 of the ACA. Navigators conduct public education activities to help consumers and small businesses make informed decisions about insurance.⁴⁰ The Senate committee bill does not include a comparable provision.

ACF

ACF would receive relatively flat discretionary budget authority in FY2016 under the House (+0.3%) and Senate (+0.2%) committee bills, compared to ACF’s FY2015 enacted funding level of \$17.8 billion. By contrast, the FY2016 President’s budget requested a \$2.0 billion (+11%) increase in discretionary ACF appropriations. The largest share of the President’s proposed increase (\$1.5 billion) would go to the Head Start program, for a total proposed funding level of \$10.1 billion.⁴¹ This funding level would support the Administration’s plan to lengthen the Head Start program day and program year, expand Early Head Start-Child Care Partnerships, provide

³⁷ See §227 in Division G of P.L. 113-235 for the FY2015 provision. FY2016 provisions can be found in §224 of H.R. 3020 and §228 of S. 1695.

³⁸ On October 1, 2015, CMS announced that for calendar year 2014, collections from insurers who had experienced high gains (\$362 million) fell short of the amount needed to pay insurers who had experienced high losses (\$2.87 billion). A CMS press release stated, “As a result, consistent with our guidance, insurers will be paid approximately 12.6% of their risk corridors payment requests at this time.” This means that HHS will pay insurers who had experienced high losses \$0.126 for every \$1.00 owed. The remaining amount owed to insurers who experienced high losses in 2014 would be paid with collections from insurers who had experienced high gains for calendar year 2015 and, if necessary, calendar year 2016. For more information, see <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2015-Fact-sheets-items/2015-10-01.html>.

³⁹ For more information on federal funding for exchanges, see CRS Report R43066, *Federal Funding for Health Insurance Exchanges*, by (name redacted) and (name redacted) .

⁴⁰ For more information on health insurance navigators, see CRS Report R43243, *Health Insurance Exchanges: Health Insurance “Navigators” and In-Person Assistance*, by (name redacted)

⁴¹ For more information on Head Start, see CRS Report RL30952, *Head Start: Background and Funding*, by (name redacted).

cost-of-living adjustments to existing Head Start grantees, and offer start-up or transition funding when new Head Start grantees are selected through re-competition. The House and Senate committee bills would both support smaller increases to Head Start than the President requested (+2% and +1%, respectively).

ACL

Compared to the FY2015 enacted level of \$1.7 billion, ACL would receive an increase in discretionary budget authority under each of the FY2016 proposals: the President's budget requested a 25% increase, the House committee bill would provide a 16% increase, and the Senate committee bill would provide an 11% increase.

The President's budget requested \$20 million in new funding for Nutrition Innovation Demonstration grants under Nutrition Services Programs, \$15 million in new funding for a Family Support Initiative under Family and Native American Caregiver Support Services, a \$21 million increase to expand and support Adult Protective Services under Elder Rights Support Activities, and a \$38 million increase for Home and Community-Based Supportive Services for older individuals "to increase services to the increasing number of the population in need." Neither the House committee bill nor the Senate committee bill would provide the additional funds for these proposals.

The Workforce Innovation and Opportunity Act called for several programs to be transferred from ED to HHS/ACL: Independent Living; the National Institute on Disability, Independent Living, and Rehabilitation Research; and Assistive Technology. In FY2015, funding for these programs was appropriated to ED, but transferred to ACL. All FY2016 proposals call for these funds to be appropriated to ACL: the FY2016 President's budget requested \$245 million, the House committee bill would provide \$238 million, and the Senate committee bill would provide \$226 million. The President's budget and the House committee bill would also provide a \$10 million (33%) increase for ACL Program Administration, in part to cover administrative costs related to these programs.

The House committee bill and the Senate committee bill would eliminate discretionary funding for the Senior Medicare Patrol Program (-\$8.9 million), but the program would continue to receive mandatory funding outside the appropriations process from the Medicare Trust Funds.

Funding Restrictions Related to Certain Controversial Issues

Annual LHHS appropriations regularly contain broad restrictions related to certain controversial issues. For instance, annual LHHS appropriations acts commonly include provisions limiting the use of federal funds for abortions, use of human embryos for research, needle exchange programs, and gun control advocacy.

Abortions: Annual LHHS appropriations acts generally include provisions limiting the circumstances under which LHHS funds (including Medicaid funds) may be used to pay for abortions. Under current provisions, (1) abortions may be funded only when the life of the mother is endangered or in cases of rape or incest; (2) funds may not be used to buy a managed care package that includes abortion coverage, except in cases of rape, incest, or endangerment; and (3) federal programs and state and local governments that receive LHHS funding are prohibited from discriminating against health care entities that do not provide or pay for abortions or abortion services.⁴² The FY2016 House and Senate committee bills would retain these existing restrictions.

⁴² The current provisions are commonly referred to as the Hyde and Weldon Amendments and may be found at §506 (continued...)

In addition, the House committee bill would include a new provision (Section 530) based on the Health Care Conscience Rights Act (H.R. 940). Among other things, this provision would amend the ACA to specify that individuals/employers would not have to purchase/sponsor coverage of abortions or other items or services to which they have a moral or religious objection.

Human Embryos: Annual LHHS appropriations commonly include a provision prohibiting LHHS funds (including NIH funds) from being used to create human embryos for research purposes or for research in which human embryos are destroyed.⁴³ The House and Senate committee bills would both retain these existing restrictions.

Needle Exchange: Annual LHHS appropriations generally include a provision prohibiting LHHS funds from being used for needle exchange programs.⁴⁴ The House and Senate bills would revise the current provision, by allowing funds to be used for needle exchange programs under the following conditions: (1) federal funds may not be used to purchase the needles, but may be used for other aspects of such programs; (2) the state or local jurisdiction must demonstrate, in consultation with CDC, that they are experiencing, or at risk for, a significant increase in hepatitis infections or an HIV outbreak due to injection drug use; and (3) the program must be operating in accordance with state and local law.

Gun Control: Annual LHHS appropriations generally include provisions prohibiting the use of certain funds for activities that advocate or promote gun control. At one time, these restrictions applied only to CDC, but have subsequently been expanded. Since FY2012, these restrictions have applied to all LHHS funds, as well as funds transferred from the PPHF.⁴⁵ The House and Senate committee bills would both retain these existing restrictions.

ACA Implementation: Since FY2011, annual LHHS appropriations have included provisions limiting or altering the ability of HHS to implement various aspects of the ACA.⁴⁶ The content and scope of these provisions has evolved over time. Most recently, the House committee bill for FY2016 would, among other things, prohibit LHHS appropriations from being used to “implement, administer, enforce, or further” any provision of the ACA, with limited exceptions (Section 524). The Senate committee bill does not include a comparable provision. Certain other ACA-related provisions are discussed elsewhere in this report (e.g., see the CMS section for a discussion of limitation provisions related to risk corridor payments, health insurance exchanges, and navigators).

HHS Detail Tables

The tables below provide more detailed information on FY2015 enacted and FY2016 proposed funding levels for HHS. **Table 6** presents total HHS funding levels by agency. **Table 7** presents discretionary funding levels for a selection of HHS programs, projects, or activities, by agency.

(...continued)

and §507 of P.L. 113-235, Division G. For additional information, see CRS Report RL33467, *Abortion: Judicial History and Legislative Response*, by (name redacted) .

⁴³ The current provision is commonly referred to as the Dickey Amendment and may be found at §508 of P.L. 113-235, Division G. For additional information, see CRS Report RL33540, *Stem Cell Research: Science, Federal Research Funding, and Regulatory Oversight*, by (name redacted) and (name redacted) .

⁴⁴ The current provision can be found at §521 of P.L. 113-235, Division G.

⁴⁵ The current provisions can be found at §217 (HHS) and §503(c) (all LHHS, plus PPHF transfers) of P.L. 113-235, Division G.

⁴⁶ For more information, see CRS Report R44100, *Use of the Annual Appropriations Process to Block Implementation of the Affordable Care Act (FY2011-FY2016)*, by (name redacted) and (name redacted) .

Table 6. HHS Appropriations Totals by Agency
(Dollars in millions)

HHS Agency	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
HRSA	6,347	6,462	6,049	6,241
Mandatory BA	235	237	237	237
Discretionary BA	6,112	6,225	5,812	6,004
CDC^a	6,023^b	6,151	6,151	5,803
Mandatory BA	55	55	55	55
Discretionary BA	5,968 ^b	6,096	6,096	5,747
<i>Evaluation Tap Funding^c</i>	0	0	0	0
<i>PPHF^d</i>	887	914	914	893
NIH^a	29,369^b	30,237	30,174	30,494
Discretionary BA	29,369 ^b	30,237	30,174	30,494
<i>Evaluation Tap Funding^c</i>	715	847	1,010	940
SAMHSA	3,474	3,396	3,643	3,315
Discretionary BA	3,474	3,396	3,643	3,315
<i>Evaluation Tap Funding^c</i>	134	211	0	134
<i>PPHF^d</i>	12	58	0	12
AHRQ	364	276	0	236
Discretionary BA	364	276	0	236
<i>Evaluation Tap Funding^c</i>	0	88	0	0
CMS	611,435	647,251	646,297	646,033
Mandatory BA	607,093	642,300	642,300	642,300
Discretionary BA	4,342	4,951	3,998	3,734
ACF	30,567	33,709	32,222	31,717
Mandatory BA	12,776	13,888	14,380	13,888
Discretionary BA	17,791	19,821	17,842	17,829
ACL^e	1,673	2,096	1,944	1,861
Discretionary BA	1,673	2,096	1,944	1,861
<i>PPHF^d</i>	28	28	18	27
Office of the Secretary	2,443^b	3,254	2,381	2,383
Mandatory BA	562	586	586	586
Discretionary BA	1,881 ^b	2,668	1,794	1,796
<i>Evaluation Tap Funding^c</i>	65	188	58	47
Total, HHS BA in the Bill	691,695^b	732,831	728,861	728,083
Mandatory	620,721	657,066	657,558	657,066
Discretionary	70,974^b	75,765	71,302	71,017

HHS Agency	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Title VI Ebola (emergency)	2,742^f	-	-	-
CDC	1,771 ^f	-	-	-
NIH	238 ^f	-	-	-
Office of the Secretary	733 ^f	-	-	-
Memoranda				
Total, BA Available in Fiscal Year (current year from any bill)	681,885	730,381	726,410	725,632
Total, BA Advances for Future Years (provided in current bill)	116,732	119,183	119,183	119,183
Total, BA Advances from Prior Years (for use in current year)	106,922	116,732	116,732	116,732

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities. FY2015 enacted totals do not include Ebola-related funds provided by the first FY2015 CR (P.L. 113-64) or in Division G, Title VI, of the FY2015 omnibus (P.L. 113-235).

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations (e.g., department totals do not include funding for the Food and Drug Administration, the Indian Health Service, or the Agency for Toxic Substances and Disease Registry, all of which are funded by other bills); and (4) do not include appropriations that occur outside of appropriations bills.

- a. Each year, CDC and NIH also receive funding in the Interior-Environment appropriations bill as part of their overall budget authority.
- b. FY2015 enacted does not include emergency Ebola funds provided by Division G, Title VI, of the FY2015 omnibus (P.L. 113-235) or, where applicable, Ebola funds provided by the first FY2015 CR (P.L. 113-64).
- c. By convention, this table shows only the amount of PHS Evaluation Tap funds received by an agency, not the amount of tap funds donated by an agency. That is to say, tap amounts shown in this table are *in addition to* amounts shown for budget authority, but the amounts shown for budget authority have not been adjusted to reflect potential “transfer-out” of funds to the tap.
- d. PPHF funds are not appropriated in the LHHS bill, but are shown here for illustrative purposes as they may be used to supplement the funding selected agencies and programs receive through the appropriations process. Amounts shown for PPHF in this table are *in addition to* amounts shown for budget authority.
- e. FY2015 enacted does not include amounts appropriated to ED for the Rehabilitation Act and the Assistive Technology Act that were required to be transferred to HHS. However, these funds are included in ACL totals for FY2016.
- f. The amounts shown here were appropriated as emergency funds in Division G, Title VI, of the FY2015 omnibus (P.L. 113-235). These amounts are not included in HHS totals in this table. These amounts do not include applicable Ebola-related funds provided by the first FY2015 CR (P.L. 113-64).

Table 7. HHS Discretionary Appropriations for Selected Programs or Activities, by Agency
(Dollars in millions)

Agency or Selected Program	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
HRSA				
Community Health Centers	1,491	1,491	1,491	1,491
National Health Service Corps	0	287	0	0
Health Professions (Title VII)	83	86	83	74
Health Professions, Nursing (Title VIII)	232	232	232	221
Children's Hospitals Graduate Medical Education	265	100	265	270
Maternal & Child Health Block Grant	637	637	638	615
Autism and Other Developmental Disorders	47	47	47	47
Healthy Start	102	102	102	102
Ryan White AIDS Programs	2,319	2,323	2,319	2,294
Healthcare Systems Bureau	103	110	106	103
Rural Health Programs	147	128	147	151
Family Planning (Title X)	286	300	0	258
CDC				
Immunization and Respiratory Diseases	573	538	608	573
<i>PPHF^b</i>	210	210	150	210
HIV/AIDS, Viral Hepatitis, STDs, TB Prevention	1,118	1,162	1,118	1,091
Emerging and Zoonotic Infectious Diseases	353	645	461	389
<i>PPHF^b</i>	52	55	52	52
Chronic Disease Prevention and Health Promotion	747	578	570	595
<i>PPHF^b</i>	452	480	527	458
Birth Defects and Developmental Disabilities	132	64	134	133
<i>PPHF^b</i>	0	68	0	0
Public Health Scientific Services	481	475	497	471
<i>PPHF^b</i>	0	64	0	0
Environmental Health	166	142	146	132
<i>PPHF^b</i>	13	37	15	13
Injury Prevention and Control	170	257	211	188
National Institute for Occupational Safety and Health	335	283	341	306
Global Health ^c	417	448	427	412
SAMHSA				
Mental Health Programs of Regional & National Significance (PRNS)	367	334	384	367
<i>Evaluation Tap Funding^a</i>	0	5	0	0

Agency or Selected Program	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
<i>PPHF</i>	12	38	0	12
Mental Health Block Grant	462	462	483	462
<i>Evaluation Tap Funding^a</i>	21	21	0	21
Children's Mental Health	117	117	117	117
Grants to States for the Homeless	65	65	55	40
Protection and Advocacy	36	36	36	36
Substance Abuse Treatment PRNS	362	291	377	282
<i>Evaluation Tap Funding^a</i>	2	30	0	2
Substance Abuse Block Grant	1,741	1,741	1,820	1,691
<i>Evaluation Tap Funding^a</i>	79	79	0	79
Substance Abuse Prevention PRNS	175	194	190	183
<i>Evaluation Tap Funding^a</i>	0	16	0	0
Health Surveillance and Support	150	156	182	138
<i>Evaluation Tap Funding^a</i>	31	59	0	31
<i>PPHF^b</i>	0	20	0	0
AHRQ				
Research on Health Costs, Quality, and Outcomes	229	0	238	151
<i>Evaluation Tap Funding^a</i>	0	88	0	0
Medical Expenditure Surveys	65	69	0	39
Program Support	70	72	0	45
CMS				
CMS Program Management	3,670	4,245	3,326	3,028
Health Care Fraud and Abuse Control	672	706	672	706
ACF				
Low Income Home Energy Assistance Program	3,390	3,190	3,365	3,390
Refugee and Entrant Assistance Programs	1,560	1,625	1,430	1,405
Child Care and Development Block Grant	2,435	2,805	2,435	2,585
Head Start	8,598	10,118	8,790	8,698
Child Welfare Services	269	269	269	269
Adoption Opportunities	39	43	39	39
Community Services Block Grant	674	674	674	674
ACL				
Home & Community-Based Supportive Services	348	386	348	348
Family and Native American Caregiver Support Services	152	172	153	152
Nutrition Services Programs	815	875	821	815

Agency or Selected Program	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Aging Network Support Activities	10	10	10	7
Alzheimer's Disease Demonstrations	4	4	6	4
PPHF ^b	15	15	13	15
Elder Rights Support Activities	8	29	8	8
Limb Loss	3	3	3	3
Developmental Disabilities Programs	162	169	162	154
Office of the Secretary				
General Departmental Management	448	493	361	302
Evaluation Tap Funding ^a	65	66	58	47
Office of Nat'l Coord. for Health Information Technology	60	0	60	60
Evaluation Tap Funding ^a	0	92	0	0
Office of the Inspector General	71	83	75	71
Public Health and Social Services Emergency Fund ^d	1,175	1,910	1,172	1,227
Evaluation Tap Funding ^a	0	30	0	0

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities. FY2015 enacted totals do not include Ebola-related funds provided by the first FY2015 CR (P.L. 113-64) or in Division G, Title VI, of the FY2015 omnibus (P.L. 113-235).

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations (e.g., department totals do not include funding for the Food and Drug Administration, the Indian Health Service, or the Agency for Toxic Substances and Disease Registry, all of which are funded by other bills); and (4) do not include appropriations that occur outside of appropriations bills.

- a. By convention, this table shows the amount of PHS Evaluation Tap funds received by an agency for a particular program or activity separately from the budget authority appropriated for that program or activity. Tap amounts are *in addition to* amounts shown for budget authority, though the amounts shown for budget authority have not been adjusted to reflect potential "transfer-out" of funds to the tap.
- b. PPHF funds are not appropriated in the LHHS bill, but are shown here for illustrative purposes as they may be used to supplement the funding selected agencies and programs receive through the appropriations process. Amounts shown for PPHF in this table are *in addition to* amounts shown for budget authority.
- c. The amount shown as FY2015 enacted (\$417 million) does not include \$30 million appropriated for Ebola-related activities in the first FY2015 CR (P.L. 113-164).
- d. The amount shown as FY2015 enacted (\$1.175 billion) does not include the \$733 million in emergency Ebola funds provided by Division G, Title VI, of the FY2015 omnibus or the \$58 million in Ebola-related funds provided in the first FY2015 CR (P.L. 113-164).

Department of Education (ED)

Note that all amounts in this section are based on regular LHHS appropriations only. Amounts in this section do not include mandatory funds provided outside of the annual appropriations process (e.g., certain direct appropriations for Federal Direct Student Loans and Pell Grants). All amounts in this section are rounded to the nearest million or billion (as labeled). The dollar changes and percentage changes discussed in the text are based on unrounded amounts.

About ED

Federal policymakers established the federal Department of Education (ED) in 1980.⁴⁷ Its mission is to “promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.”⁴⁸ Typically, about three-quarters of ED appropriations go either to local educational agencies—which primarily use the funds to provide educational and related services for economically disadvantaged or disabled children—or to low-income postsecondary students in the form of Pell grants, which pay for college.⁴⁹ The remainder of ED’s budget provides for a wide range of activities, including (but not limited to) support for minority-serving institutions; educational research; and career, technical, and adult education.

The federal government provides roughly 11% of overall funding for elementary and secondary education in the United States. The majority of school funding comes from states and local districts, which have primary responsibility for the provision of elementary and secondary education.⁵⁰ With regard to higher education, the federal government supports roughly 69% of all direct aid provided to students to finance their postsecondary education.⁵¹

FY2016 ED Appropriations Overview

Table 8 displays proposed ED funding levels for FY2016, along with FY2015 enacted levels. Discretionary funds represent the majority of ED’s annual appropriations, accounting for roughly 95% of FY2015 enacted levels and FY2016 proposals.⁵² Compared to FY2015, discretionary ED appropriations would decrease under both the House (-4%) and Senate (-2%) committee-reported bills for FY2016. By contrast, the President’s budget requested an increase in discretionary funding from FY2015 (+5%).

⁴⁷ Although ED (in its current incarnation) became a department in 1980, the department dates its origins to 1867. See, U.S. Department of Education, “About ED: The Federal Role in Education,” *ed.gov* website, accessed on October 29, 2015, at <http://www2.ed.gov/about/overview/fed/role.html>.

⁴⁸ U.S. Department of Education, “About ED,” *ed.gov* website, accessed on October 7, 2015, at <http://www2.ed.gov/about/landing.jhtml>.

⁴⁹ For more information on these programs, see CRS Report RL33960, *The Elementary and Secondary Education Act, as Amended by the No Child Left Behind Act: A Primer*, by (name redacted) ; CRS Report R42070, *The Education of Students with Disabilities: Alignment Between the Elementary and Secondary Education Act and the Individuals with Disabilities Education Act*, by (name redacted) and (name redacted) ; and, CRS Report R43351, *The Higher Education Act (HEA): A Primer*, by (name redacted) .

⁵⁰ U.S. Department of Education, *FY2015 Education Budget Summary and Background Information*, Appendix 5, <http://www2.ed.gov/about/overview/budget/budget15/summary/appendix5.pdf>.

⁵¹ See the College Board’s *Trends in Student Aid 2014*, p. 10, <http://trends.collegeboard.org/sites/default/files/2014-trends-student-aid-final-web.pdf>.

⁵² The only mandatory ED funding provided in this bill is for Vocational Rehabilitation State Grants.

Table 8. ED Appropriations Overview
(Dollars in billions)

Funding	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Discretionary	67.1	70.7	64.4	65.8
Mandatory	3.3	3.4	3.4	3.4
Total BA in the Bill	70.5	74.1	67.8	69.2

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

Selected ED Highlights

The following are some ED highlights from the FY2016 House and Senate committee-reported bills and the FY2016 President’s budget.⁵³ **Table 9** tracks funding levels discussed in this section.

Education for the Disadvantaged

The Administration requested \$16.6 billion for programs and activities supported in the Education for the Disadvantaged account in FY2016. This amount is \$1.1 billion (+7%) more than the FY2015 enacted level of \$15.5 billion. The House committee bill would provide \$14.9 billion in FY2016—\$666 million (-4%) less than the FY2015 level. The Senate committee bill would provide \$15.5 billion, or \$80 million (-1%) less.

Within the Education for the Disadvantaged total, the Administration requested \$15.4 billion in FY2016 for Grants to Local Educational Agencies (LEAs) under Title I-A of the Elementary and Secondary Education Act (ESEA).⁵⁴ The Administration’s FY2016 request is \$1.0 billion (+7%) more than the FY2015 enacted funding level of \$14.4 billion. The House report recommends the FY2015 level; the Senate report recommends \$14.6 billion, or \$150 million (+1%) more.

The House report recommends no funds for School Improvement Grants or Striving Readers. The Senate report would provide \$450 million for School Improvement Grants—which is \$56 million (-11%) below the FY2015 enacted funding level and \$106 million (-19%) below the request—and no funds for Striving Readers.

⁵³ ED budget materials can be found at <http://www2.ed.gov/about/overview/budget/budget15/index.html?exp=0>.

⁵⁴ Title I-A is the largest K-12 education program administered by ED. Most LEAs receive funding under this program. For more information, see CRS Report RL33960, *The Elementary and Secondary Education Act, as Amended by the No Child Left Behind Act: A Primer*, by (name redacted) ; and CRS Report R44164, *ESEA Title I-A Formulas: In Brief*, by (name redacted) .

Innovation and Improvement

For FY2016, the Administration requested \$1.6 billion in discretionary funding for programs and activities supported in the Innovation and Improvement account.⁵⁵ This amount is \$499 million (+45%) more than the FY2015 enacted funding level of \$1.1 billion.⁵⁶ The Administration's request includes a 150% (+\$180 million) increase in the Investing in Innovation Fund, a 52% (+\$120 million) increase in the Teacher Incentive Fund, and a 48% (+\$122 million) increase in Charter School Grants—over FY2015 enacted funding levels.

The House committee bill would provide \$275 million for Innovation and Improvement in FY2016, an \$827 million (-75%) reduction from the FY2015 enacted funding level and \$1.3 billion (-83%) less than the Administration's request. The House report recommends directing the entire \$275 million to Charter School Grants (9% more than the FY2015 enacted level) and would eliminate funding for all other programs and activities in the account.

The Senate committee bill would provide \$695 million for the Innovation and improvement account in FY2016, which is \$407 million (-37%) less than the FY2015 enacted level and \$907 million (-57%) less than the Administration's request. Like the House report, the Senate report would provide an increase in funding for Charter School Grants (\$273 million total; 8% more than the FY2015 enacted level); and would eliminate the Investing in Innovation Fund, as well as the Transition to Teaching and School Leadership programs. The Senate recommends reducing funding for, but not eliminating, the Teacher Incentive Fund, Magnet Schools Assistance, Advanced Placement, and the Fund for the Improvement of Education. The Senate report would maintain the FY2015 enacted funding level for Ready-to-Learn Television.

Preschool Development Grants

The FY2015 enacted funding level for the Fund for the Improvement of Education (FIE) within the Innovation and Improvement account included \$250 million in funding for Preschool Development Grants. In FY2016, the Administration requested increasing discretionary funding for Preschool Development Grants to \$750 million. However, the House and Senate proposals for FY2016 both recommend eliminating PDG funding altogether.

In addition, the Administration once again requested \$1.3 billion in mandatory funding for a Preschool for All initiative. Under the President's proposal, these funds would be provided outside the appropriations process and, as such, are not included in the ED totals in this report.

The Administration proposed to group funding for PDG and the Preschool for All initiative into a new "school readiness" budget account at ED, but this construct was not adopted in either the House or Senate committee bill for FY2016. In some cases, this may lead to different account totals across budget and appropriations documents.

Safe Schools and Citizenship Education

The Administration requested \$350 million for programs and activities supported in the Safe Schools and Citizenship Education account in FY2016. This amount is \$126 million (+57%) more than the FY2015 enacted funding level of \$223 million. The House committee bill would provide \$57 million for this account in FY2016, and would direct all of these funds to the

⁵⁵ The Administration also requested an additional \$1.00 billion in mandatory funding for the proposed, Teaching for Tomorrow program. However, these funds would be provided outside the appropriations process and, as such, are not included in the totals in this report.

⁵⁶ For the sake of consistency with source materials, the FY2015 enacted funding level for Innovation and Improvement used in this report includes \$250 million in Preschool Development Grant funding in the FIE account. ED's congressional budget justification includes these grant funds in a different account (School Readiness); therefore, account totals, year-over-year calculations, and request-to-recommendation comparisons in this report may differ from amounts reported elsewhere. See text box titled, "Preschool Development Grants," for additional explanation.

Promise Neighborhoods program. (The House report explicitly recommends eliminating funding for all other activities in this account.) The Senate committee bill would provide \$120 million for this account in FY2016, which is \$103 million (-46%) less than the FY2015 enacted funding level. The Senate report recommends reductions in funding for most Safe Schools and Citizenship programs and would eliminate funding for one (Physical Education).

Special Education

The Administration requested \$12.8 billion for programs and activities supported in the Special Education account in FY2016. This amount represents a \$300 million (+2%) increase over the FY2015 enacted funding level of \$12.5 billion. The House report recommends \$13.0 billion, or \$502 million (+4%) more than the FY2015 level; the Senate report would provide \$12.6 billion, or \$114 million (+1%) more.

Within the total, the Administration requested increases of 14% or more for Preschool Grants (+\$50 million) and Grants for Infants and Families (+\$65 million), and requested a 2% increase for the larger, Grants to States program (+\$175 million).⁵⁷ The House report, on the other hand, recommends no increases over the prior year for Preschool Grants and Grants for Infants and Families, but would increase Grants to States by 4% (+\$502 million). The Senate report recommends a 3% increase for both Preschool Grants (+\$10 million) and Grants for Infants and Families (+\$15 million), and a 1% increase in Grants to States (+\$100 million).

Pell Grants

The Administration seeks \$22.5 billion in funding for the Pell Grant program in FY2016. This amount is equal to both the FY2015 enacted funding level and to the Senate committee bill. The House committee bill would provide \$22.1 billion, which is \$370 million (-2%) less than the FY2015 enacted level.

Under all FY2016 proposals (request, House committee bill, and Senate committee bill), the discretionary base maximum award for award year (AY) 2016-2017⁵⁸ is projected to remain at \$4,860 and the total maximum award for which a student may be eligible is projected to be \$5,915.⁵⁹

⁵⁷ The Individuals with Disabilities Education Act (IDEA) Part B State Grants provide federal funding for elementary and secondary education for children with disabilities. As a condition for the receipt of these funds, states are required to provide a free and appropriate public education (i.e., specially designed instruction that meets the needs of a child with a disability).

⁵⁸ The Pell Grant award year begins July 1 of each year and ends June 30 of the subsequent year. For example, AY2016-2017 begins on July 1, 2016 and ends June 30, 2017.

⁵⁹ The maximum Pell Grant a student may receive is a combination of the discretionary base maximum award amount (established in the annual discretionary appropriations process) and the annual increase (or add-on) to this amount funded through mandatory appropriations (specified in Title IV of the Higher Education Act of 1965, as amended (P.L. 89-329)). This report does not track the mandatory add-on as it is not established through annual appropriations, which are the focus of this report. For more information about the Pell Grant program, see CRS Report R42446, *Federal Pell Grant Program of the Higher Education Act: How the Program Works and Recent Legislative Changes*, by (name redacted).

Table 9. Detailed ED Appropriations
(Dollars in millions)

Agency, Program, Project, or Activity	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Education for the Disadvantaged	15,536	16,593	14,870	15,456
Grants to Local Educational Agencies	14,410	15,410	14,410	14,560
School Improvement Grants	506	556	0	450
Striving Readers	160	160	0	0
Migrant State Grants	375	375	375	365
Neglected and Delinquent State Grants	48	48	48	46
Evaluation	1 ^a	0	0 ^a	0 ^a
Special Programs for Migrant Students	37	45	37	35
School Readiness/Preschool Development Grants	0^b	750^c	0	0
Impact Aid	1,289	1,289	1,299	1,289
School Improvement Programs	4,403	4,693	3,501	4,135
State Grants for Improving Teacher Quality	2,350	2,350	1,681	2,246
Mathematics and Science Partnerships	153	203	0	141
Educational Technology State Grants	0 ^d	200 ^d	0	0
Supplemental Education Grants	17	17	17	17
21 st Century Community Learning Centers	1,152	1,152	1,152	1,035
State Assessments/Enhanced Assessment Instruments	378	403	300	350
Education for Homeless Children and Youth	65	72	65	65
Training and Advisory Services (Civil Rights)	7	7	7	7
Education for Native Hawaiians	32	33	33	32
Alaska Native Education Equity	31	32	32	31
Rural Education	170	170	170	170
Comprehensive Centers	48	55	44	40
Indian Education	124	174	144	124
Innovation and Improvement	1,102	1,602	275	695
Investing in Innovation Fund	120	300	0	0
Teacher and Principal Pathways (proposed legislation) ^e	0	139 ^f	0	0
Transition to Teaching	14	0 ^f	0	0
School Leadership	16	0 ^f	0	0
Charter School Grants	253	375	275	273
Magnet Schools Assistance	92	92	0	85
Fund for the Improvement of Education (FIE)	323 ^b	167 ^g	0	63 ^h
Teacher Incentive Fund (Excellent Educator Grants)	230	350	0	225
Ready-to-Learn Television	26	26	0	26

Agency, Program, Project, or Activity	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Next Generation High Schools (proposed legislation) ^e	0	125	0	0
Advanced Placement	28	28	0	23
Safe Schools and Citizenship Education	223	350	57	120
Promise Neighborhoods	57	150	57	37
National Programs	70	90	0	60
Elementary and Secondary School Counseling	50 ⁱ	50	0	23
Carol M. White Physical Education Program	47 ⁱ	60	0	0
English Language Acquisition	737	773	737	712
Special Education	12,522	12,822	13,025	12,637
Grants to States, Part B	11,498	11,673	12,000	11,598
Preschool Grants	353	403	353	363
Grants for Infants and Families	439	504	439	454
IDEA National Activities	233 ⁱ	243 ⁱ	233	222 ⁱ
Rehabilitation Services and Disability Research	3,710^k	3,532	3,530	3,488
Vocational Rehabilitation State Grants (mandatory)	3,335 ^k	3,392	3,392	3,392
Client Assistance State Grants	13	13	13	12
Training	30	30	30	24
Demonstration and Training Programs	6	6	6	0
Protection and Advocacy of Individual Rights (PAIR)	18	18	18	18
Supported Employment State Grants	28	31	28	0
Helen Keller National Center for Deaf/Blind Youth and Adults	9	10	10	9
Independent Living	135	33 ^l	33	33
National Institute on Disability and Rehabilitation Research	104	0 ^l	0	0
Assistive Technology	33	0 ^l	0	0
Special Institutions for Persons with Disabilities	212	212	215	214
American Printing House for the Blind	25	25	25	25
National Technical Institute for the Deaf	67	67	68	69
Gallaudet University	120	120	121	120
Career, Technical, and Adult Education	1,708	1,916	1,701	1,670
Basic State Grants/Secondary & Technical Education	1,118	1,318	1,118	1,118
National Programs	7	9	4	4
State Grants/Adult Basic and Literacy Education	569	569	569	540
National Leadership Activities	14	20	10	8
Student Financial Assistance	24,198	24,198	23,828	24,129
<i>Pell maximum grant (non-add)</i>	5	5	5	5
Pell Grants	22,475	22,475	22,105	22,475

Agency, Program, Project, or Activity	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Federal Supplemental Educational Opportunity Grants	733	733	733	704
Federal Work Study	990	990	990	950
Student Aid Administration	1,397	1,582	1,447	1,362
Higher Education	1,925	2,072	1,909	1,784
Aid for Institutional Development	530 ^m	532 ^m	544	514
International Education and Foreign Language	72	76	72	47
Fund for the Improvement of Postsecondary Education (FIPSE)	68	200	0	0
Postsec. Programs for Students with Intellectual Disabilities	12	12	12	10
Minority Science and Engineering Improvement	9	9	9	9
Tribally Controlled Postsecondary Voc. & Tech. Institutions	8	8	9	8
Federal TRIO Programs	840	860	900	840
GEAR UP	302	302	323	302
Graduate Assistance in Areas of National Need	29	29	25	20
Teacher Quality Partnerships	41	0 ⁿ	0	34
Child Care Access Means Parents in School	15	15	15	0
GPRA Data/HEA Program Evaluation	0	30	0	0
Howard University	222	222	222	220
College Housing & Academic Facilities Loans^o	0	0	0	0
HBCU Capital Financing Program	19	19	19	19
Institute of Education Sciences	574	676	410	563
Departmental Management	569	664	569	549
Total, ED BA in the Bill	70,471	74,139	67,757	69,165
Subtotal, Mandatory	3,335	3,392	3,392	3,392
Subtotal, Discretionary	67,136	70,747	64,365	65,773
Memoranda				
Total, BA Available in Fiscal Year (current year from any bill)	70,471	74,139	67,616	69,165
Total, BA Advances for Future Years (provided in current bill)	22,597	22,597	22,738	22,597
Total, BA Advances from Prior Years (for use in current year)	22,597	22,597	22,597	22,597

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: BA = Budget Authority. N/A = not available. STEM = Science, Technology, Engineering, and Mathematics. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on

Appropriations; and (4) do not include appropriations that occur outside of appropriations bills. Non-add amounts are displayed in italics and parentheses; these amounts are not part of the appropriations totals.

- a. Instead of providing a defined appropriation for evaluation, in FY2015 policymakers authorized ED to reserve up to 0.5% of each ESEA appropriation in the bill (except titles I and III) for evaluation purposes (P.L. 113-235, Section 307). The House and Senate Appropriations committees recommend the same for FY2016.
- b. The FY2016 Administration budget request called for the establishment of a line item for Preschool Development Grants/School Readiness, and to establish and fund preschool programs within this line item. As such, ED's congressional budget justification reports \$250 million in FY2015 enacted funding in this new item. However, the FY2015 omnibus did not provide a stand-alone appropriation for Preschool Development Grants. Rather, it directed \$250 million toward these grants from the Fund for the Improvement of Education (FIE) within the Innovation and Improvement account. For consistency with source materials, this table includes the \$250 million Preschool Development Grant program as an item in the FIE within the Innovation and Improvement account in FY2015.
- c. In addition to the amounts shown in this table, the FY2016 President's budget also called for \$1.3 billion in mandatory funding for a Preschool for All program. These funds are not shown in this table because the proposal calls for them to be provided directly through authorizing legislation, outside of the annual appropriations process.
- d. This line item has not been funded since FY2010. ED's congressional budget justification indicates that the Administration seeks to revive and revise this program, which was previously authorized under ESEA, Title II, Part D, Subparts 1 and 2.
- e. Although this report generally excludes funding levels associated with proposed legislation, some such items have been included here to ensure compatibility and comparability with source materials.
- f. The FY2016 request proposed to consolidate and expand Transition to Teaching and School Leadership into a new Teacher and Principal Pathways program. In addition, the Teacher Quality Partnership program (within the Higher Education account) would be transferred to the new Teacher and Principal Pathways program (within Innovation and Improvement). (See note n.)
- g. The FY2016 request proposed funding for Programs of National Significance, Arts in Education, and Leveraging What Works (proposed legislation) within the Fund for the Improvement of Education. In FY2015, this item included \$250 million in funding for Preschool Development Grants. (See note b.)
- h. The Senate report recommends \$63 million for this account in FY2016. These funds would provide support for Innovative Approaches to Literacy, Arts in Education, Javits Gifted and Talented Students, and Presidential and Congressional History Teaching Academies.
- i. For the sake of consistency with source materials, these accounts show unadjusted totals from FY2015 as included in the House report. However, budget materials from the Department of Education include a one-time, \$2,948 thousand reprogramming of funds (in FY2015) from Physical Education to Elementary and Secondary School Counseling.
- j. Although the FY2016 ED congressional budget justification treats funding for the Special Olympics as a stand-alone item, both the FY2015 omnibus and the FY2016 Senate report include such funding within IDEA National Activities. As such, in this table, funding for the Special Olympics is included in the IDEA National Activities line item in the FY2015 enacted, FY2016 request, and FY2016 Senate Committee recommendation columns. The House report is silent on funding for the Special Olympics.
- k. Totals for Rehabilitation Services and Vocational Rehabilitation State Grants have not been adjusted to account for sequestration effects under the Budget Control Act of 2011 (P.L. 112-25). As a mandatory funding program, the Vocational Rehabilitation State Grants program was subject to a \$243 million reduction under sequestration in FY2015.
- l. P.L. 113-128 (Workforce Innovation and Opportunity Act) transferred the National Institute on Disability and Rehabilitation Research, Assistive Technology, and portions of the Independent Living program from ED to HHS.
- m. Consistent with source materials, the total funding levels shown here include amounts provided to Aid for Hispanic-Serving Institutions and exclude amounts provided to Minority Science and Engineering Improvement. ED's congressional budget justification does the opposite; it includes Minority Science and Engineering Improvement and excludes Aid for Hispanic-Serving Institutions in the Aid for Institutional Development totals.
- n. The FY2016 request proposed to consolidate the Teacher Quality Partnership Program (within Higher Education) into a new Teacher and Principal Pathways program within the Innovation and Improvement account. (See note f.)

- o. The funding level for College Housing and Academic Facilities Loans is \$435,000 in FY2015 and in both the House and Senate committee bills for FY2016. The President requested \$450,000 for FY2016. These amounts round to \$0 in millions (the unit of measure used in this table).

Related Agencies

Note that figures in this section are based on regular LHHS appropriations only; they do not include funds provided outside the annual appropriations process (e.g., direct appropriations for Old-Age, Survivors, and Disability Insurance benefit payments by the Social Security Administration). All amounts in this section are rounded to the nearest million or billion (as labeled). The dollar changes and percentage changes in the text are based on unrounded amounts.

FY2016 Related Agencies Appropriations Overview

Table 10 displays proposed FY2016 funding levels for LHHS related agencies, along with FY2015 enacted levels. In general, discretionary funds account for only about 20% of total related agencies appropriations. Compared to FY2015, discretionary appropriations for LHHS related agencies would decrease under both the House (-3%) and Senate (-3%) committee-reported bills for FY2016. By contrast, the President requested an increase in discretionary funding from FY2015 (+6%).

Table 10. Related Agencies Appropriations Overview

(Dollars in billions)

Funding	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Discretionary	14.2	15.1	13.8	13.7
Mandatory	55.9	56.2	56.2	56.2
Total BA in the Bill	70.0	71.3	69.9	69.9

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

In general, the largest share of funding appropriated to related agencies in the LHHS bill goes to the Social Security Administration (SSA).⁶⁰ When taking into account both mandatory and discretionary funding, the SSA accounts for 97% of the entire related agencies appropriation in FY2015 and the FY2016 proposals. The bulk of mandatory SSA funding from the LHHS bill supports the Supplemental Security Income (SSI) program, which provides means-tested benefits to disabled children and adults and to persons age 65 and older.

⁶⁰ For additional information on the SSA budget, see CRS Report R41716, *Social Security Administration (SSA): Budget Issues*, by (name redacted) .

When looking exclusively at discretionary funding, SSA remains the largest component of the related agencies appropriation, constituting at least 84% of discretionary funds in FY2015 and the FY2016 proposals. The majority of discretionary SSA funding covers administrative expenses for Social Security, SSI, and Medicare.⁶¹

After the SSA, the next-largest agency of the related agencies appropriation is the Corporation for National and Community Service (CNCS), which accounts for less than 2% of all funding in FY2015 and in the FY2016 proposals. Typically, each of the remaining related agencies receives less than \$1 billion from the annual LHHS appropriations bill. For more information, see **Table 11**.

Selected Related Agencies Highlights

The FY2016 President's request for the **SSA Limitation on Administrative Expenses (LAE)** account, which provides the administrative funding for all the SSA programs and operations except the Office of the Inspector General (OIG), was \$12.5 billion. Of this amount, just over \$1.4 billion was requested for program integrity activities including continuing disability reviews (CDRs) and SSI redeterminations of eligibility, with \$273 million set aside from the base LAE funding and \$1.2 billion in additional funding above the discretionary funding caps set by the Budget Control Act of 2011 (BCA; P.L. 112-25). Neither of the bills reported by the House or Senate committees would provide SSA with its full request for LAE. The House committee bill would provide a total of \$11.8 billion for LAE and the Senate committee bill would provide \$11.6 billion. The Senate committee bill would give the SSA a larger amount than the House committee bill for program integrity activities, but a lesser amount for the Office of the Inspector General.

The FY2016 Senate and House committee bills contain several general provisions related to the **National Labor Relations Board (NLRB)**, an independent board that enforces provisions in the National Labor Relations Act.⁶² Specifically, the Senate and House committee bills both

- retain a provision from the FY2015 omnibus that would prohibit any funds appropriated to the NLRB in the bill, or any prior appropriations act, from being used to issue a directive or regulation to provide employees a means of voting through any electronic means in an election determining representation for collective bargaining;
- include a new provision that would prohibit any funds made available by the bill from being used to implement or enforce any rule that amends current regulations related to filing and processing petitions in collective bargaining procedures;
- include a new provision that would prohibit certain funds from being used to investigate, issue, enforce, or litigate any administrative action related to changing the interpretation or application of the "joint employer" standard in effect as of January 1, 2014;⁶³ and

⁶¹ SSA assists HHS in administering portions of the federal Medicare program. For more information on this, see Social Security Administration, *Justifications of Estimates for Appropriations Committees, Fiscal Year 2014*, February 2013, <http://ssa.gov/budget/FY14Files/2014FJ.pdf>.

⁶² The NLRB provisions described here may be found in Sections 406-409 of H.R. 3020 and S. 1695.

⁶³ The House committee bill would prohibit any funds made available in the bill from being used for these purposes; the Senate committee bill would prohibit any funds made available in the bill or any bill making appropriations to the NLRB or any other federal agency from being used for these purposes. For more information on the the "joint employer" standard, see CRS Legal Sidebar WSLG1407, *Joint Employers and the National Labor Relations Board's "Restated" Standard*, by (name redacted) .

- include a new provision that would prohibit any funds made available by the bill from being used in any way to change the standard for initial bargaining unit determination that differs from the standard set in a recent court decision.⁶⁴

Table 11. Detailed Related Agencies Appropriations Table

(Dollars in millions)

Agency, Program, Project, or Activity	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Committee for Purchase from People Who Are Blind or Severely Disabled	5	5	5	5
Corporation for National and Community Service (CNCS)	1,055	1,184	688	844
<u>Selected CNCS Programs/Initiatives:</u>				
Volunteers in Service to America (VISTA)	92	97	92	90
National Senior Volunteer Corps	202	202	202	197
AmeriCorps State and National Grants	335	425	318	270
National Civilian Community Corps	30	31	0	30
National Service Trust	210	237	50	145
Corporation for Public Broadcasting (CPB)	445	445	445	445
Federal Mediation and Conciliation Service	46	49	49	48
Federal Mine Safety and Health Review Commission	17	17	17	16
Institute of Museum and Library Services (IMLS)	228	237	228	228
Medicare Payment Advisory Commission (MedPAC)	12	12	12	11
Medicaid and CHIP Payment and Access Commission (MACPAC)	8	9	8	7
National Council on Disability	3	3	3	3
National Labor Relations Board (NLRB)	274	278	200	247
National Mediation Board	13	13	13	13
Occupational Safety and Health Review Commission	12	13	13	11
Railroad Retirement Board (RRB)	151	157	147	147
Dual Benefits (minus tax receipts)	31	27	27	27
Federal Payment to RR Retirement Account (mandatory) ^a	0	0	0	0
Limitation on Administration	111	120	111	111
Inspector General	8	9	8	8
Social Security Administration (SSA)^b	67,780	68,800	68,101	67,902
Payments to Social Security Trust Funds (mandatory)	16	20	20	20
Supplemental Security Income (SSI) (mandatory)	55,854	56,157	56,154	56,157

⁶⁴ For background on bargaining unit determination, see CRS Report RL32930, *The National Labor Relations Act (NLRA): Union Representation Procedures and Dispute Resolution*, by (name redacted) .

Agency, Program, Project, or Activity	FY2015 Enacted	FY2016 Request	FY2016 House Cmte	FY2016 Senate Cmte
Limitation on Administrative Expenses (incl. user fees)	10,410	11,074	10,422	10,182
Program Integrity	1,396	1,439	1,396	1,439
Office of Inspector General	103	110	109	103
Total, Related Agencies BA in the Bill	70,048	71,264	69,929	69,927
Subtotal, Mandatory	55,871	56,178	56,175	56,178
Subtotal, Discretionary	14,177	15,086	13,754	13,749
Memoranda				
Total, BA Available in Fiscal Year (current year from any bill)	70,548	75,964	74,629	74,627
Total, BA Advances for Future Years (provided in current bill)	19,645	14,945	14,945	14,945
Total, BA Advances from Prior Years (for use in current year)	20,145	19,645	19,645	19,645

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities.

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills.

- a. Actual amount of mandatory federal payments to the Railroad Retirement account is roughly \$150,000 in each column, which rounds to \$0 in millions (the unit of measure used in this table).
- b. The Social Security trust funds are considered off-budget, but the Supplemental Security Income (SSI) program, SSA administrative expenses, and certain related SSA activities are included in appropriations for LHHS and Related Agencies.

Appendix. Budget Enforcement Activities

The framework for budget enforcement under the congressional budget process has both statutory and procedural elements.⁶⁵ The statutory elements include the discretionary spending limits and mandatory spending sequester derived from the Budget Control Act of 2011 (BCA; P.L. 112-25) and the Balanced Budget and Emergency Deficit Control Act of 1985 (BBEDCA; P.L. 99-177). The procedural elements are primarily associated with the budget resolution and limit both total discretionary spending and spending under the jurisdiction of each appropriations subcommittee.

Readers should note that budget enforcement requirements for FY2016 have been affected by the Bipartisan Budget Act of 2015 (P.L. 114-74), which was signed into law on November 2, 2015. Among other things, this law increased the statutory discretionary spending limits for FY2016 and FY2017, and extended the mandatory sequester to FY2025. The discussion below reflects these changes.

Budget Control Act and Sequestration

The BCA provides budget process mechanisms to reduce mandatory spending and further reduce discretionary spending over an extended period.⁶⁶ For mandatory spending, reductions are to occur through sequestration in each of FY2013-FY2025.⁶⁷ For discretionary spending, reductions occurred through sequestration in FY2013, but are to be achieved through lower discretionary spending limits for each of FY2014-FY2021. The BCA does not call for sequestration of discretionary spending in FY2014-FY2021 unless one or both of the statutory discretionary spending limits (defense and nondefense) is breached. The LHHS bill only includes funding in the nondefense category.

FY2016

On February 2, 2015, concurrent with the release of the President's Budget, President Obama issued the required FY2016 sequestration order, calling for nonexempt mandatory spending to be reduced on October 1, 2015.⁶⁸ The Office of Management and Budget (OMB) estimated that the FY2016 sequestration percentages would equal 2% of nonexempt Medicare spending and 6.8% of other nonexempt nondefense mandatory spending, for a total reduction of \$18 billion in FY2016.⁶⁹ (OMB also estimated a 9.3% reduction, totaling \$758 million, in nonexempt defense mandatory spending, but this is not applicable to LHHS funds.)

⁶⁵ For more information on budget enforcement in the context of FY2016 appropriations, see CRS Report R44062, *Congressional Action on FY2016 Appropriations Measures*, by (name redacted) .

⁶⁶ The BCA initially imposed limits on discretionary spending for each of FY2012-FY2021. Further reductions to discretionary spending were triggered when the Joint Committee on Deficit Reduction did not report legislation to achieve a specified amount of budgetary savings. These further reductions are discussed above.

⁶⁷ As originally enacted, mandatory sequestration was scheduled to run through FY2021, but this period has subsequently been incrementally extended to FY2025 by P.L. 113-67, P.L. 113-82, and P.L. 114-74.

⁶⁸ The White House, *Sequestration Order for Fiscal Year 2016*, February 2, 2015, available at <https://www.whitehouse.gov/the-press-office/2015/02/02/sequestration-order-fiscal-year-2016>.

⁶⁹ *OMB Report to the Congress on the Joint Committee Reductions for Fiscal Year 2016*, February 2, 2015, https://www.whitehouse.gov/sites/default/files/omb/assets/legislative_reports/sequestration/2016_jc_sequestration_report_speaker.pdf. See the report's appendix for an itemized list of budget accounts that (continued...)

The BCA does not require sequestration of discretionary spending in FY2016, unless one or both of the statutory discretionary spending limits is breached. As amended by the Bipartisan Budget Act of 2015 (P.L. 114-74), the FY2016 statutory spending limits are \$548.091 billion for defense spending and \$518.491 billion for nondefense spending, for a combined total of \$1.067 trillion. The Bipartisan Budget Act of 2015 increased the defense and nondefense discretionary limits by \$25 billion apiece, compared to the previous FY2016 statutory limits.

According to the Congressional Budget Office (CBO), the annualized discretionary spending levels in the FY2016 CR (P.L. 114-53) equal about \$520.385 billion in defense discretionary spending and \$496.197 billion in nondefense discretionary spending, for a combined total of \$1.017 trillion.⁷⁰ Neither of these spending levels exceed the amended discretionary spending limits for FY2016, so no discretionary sequester would be required at these levels.

Cap Adjustments, Exemptions, and Special Rules

The BCA allows for certain adjustments to the discretionary spending limits for FY2012-FY2021. For LHHS, the most notable of these is for increases to the nondefense limit (up to a point) to accommodate new budget authority for specified program integrity initiatives at HHS and the Social Security Administration (SSA). The Bipartisan Budget Act of 2015 amended the list of SSA activities that may be covered by this “cap adjustment” to include costs associated with work-related continuing disability reviews, Cooperative Disability Investigations, and fraud prosecutions by U.S. Attorneys. The Bipartisan Budget Act of 2015 also revised the amount of the allowable SSA adjustment amounts to be more generous in FY2017-FY2019, but less generous in FY2021.⁷¹

In addition, although sequestration largely consists of automatic, across-the-board spending reductions, the law exempts a limited number of programs from sequestration and subjects others to special rules. The LHHS bill contains several programs that are exempt from sequestration, including Medicaid, payments to health care trust funds, Supplemental Security Income, Special Benefits for Disabled Coal Miners, retirement pay and medical benefits for commissioned Public Health Service officers, foster care and adoption assistance, and certain family support payments. The LHHS bill also contains several programs that are subject to special rules under sequestration, such as unemployment compensation, certain student loans, health centers, and portions of Medicare.⁷²

(...continued)

include mandatory spending subject to sequestration in FY2016, the dollar amounts subject to sequestration (based on OMB’s current law baseline), the percentage by which they would be reduced, and the dollar amount of the reduction. While the report displays reductions at the *account* level, the sequester itself is implemented at the *program, project, or activity* level.

⁷⁰ CBO Cost Estimate of H.R. 719, the TSA Office of Inspection Accountability Act of 2015, As Passed by the House on September 24, 2015, With a Further Amendment (SA 2689, the Continuing Appropriations Act, 2016), issued on September 25, 2015, <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/costestimate/sa2689tohr719.pdf>

⁷¹ For more information, see CRS Report R44250, *Social Security and Social Security Disability Insurance (SSDI) Provisions in the Bipartisan Budget Act of 2015*, by (name redacted)

⁷² For more information, see CRS Report R42050, *Budget “Sequestration” and Selected Program Exemptions and Special Rules*, coordinated by (name redacted)

Budget Resolution and 302(b) Suballocations

The procedural elements of budget enforcement generally stem from requirements under the Congressional Budget Act of 1974 (P.L. 93-44) that are associated with the adoption of an annual budget resolution. Through this process, the Appropriations Committee in each chamber receives a procedural limit on the total amount of discretionary budget authority for the upcoming fiscal year, referred to as a 302(a) allocation. The Appropriations Committee subsequently divides this allocation among its 12 subcommittees. These subcommittee-level spending limits are referred to as 302(b) suballocations. The 302(b) suballocations restrict the amount of budget authority available to each subcommittee for the agencies, projects, and activities under its jurisdiction, effectively acting as a cap on each of the 12 regular appropriations bills. Enforcement of the 302(a) allocation and 302(b) suballocations occurs through points of order.

Final action on the FY2016 budget resolution (S.Con.Res. 11) occurred on May 5, 2015. The joint explanatory statement associated with the budget resolution provided 302(a) allocations for the House and Senate Appropriations Committees that were consistent with the FY2016 statutory discretionary spending limits in place at that time, though these limits were subsequently amended by the Bipartisan Budget Act of 2015.

The House and Senate Appropriations Committees reported initial FY2016 302(b) suballocations based on the overall levels provided by the budget resolution. Suballocations are commonly revised throughout the year to reflect changes in the distribution of funds due across bills resulting from the latest appropriations action and changes in congressional priorities. The formal suballocations are not always publically updated to reflect changes to the distribution across bills.

The House most recently reported revised FY2016 suballocations on June 10. The Senate most recently reported revised suballocations on November 5. However, neither committee has reported revised suballocations that reflect the new discretionary spending limits put in place by the Bipartisan Budget Act of 2015.⁷³

Table A-1 shows the most recently reported FY2016 House and Senate 302(b) suballocations for LHHS, along with comparable FY2015 appropriations levels. Under these suballocations, FY2016 discretionary LHHS appropriations would be reduced by roughly 2%, or nearly \$4 billion, compared to FY2015. While it is likely that FY2016 suballocations will be revised to reflect the new spending limits established by the BBA, it is not clear how much (if at all) this will affect the LHHS suballocation.

Note that compliance with discretionary spending allocations is evaluated based on budget authority *available in the current fiscal year*, adjusted for scorekeeping by the Congressional Budget Office. As such, totals shown in this table may not be comparable to other totals shown in this report. Current-year budget authority totals exclude advance appropriations for future years, but include advance appropriations from prior years that become available in the current year. Advance appropriations are provided to selected LHHS accounts, generally in order to manage specific planning concerns and ensure continuity of operations at the start of a new fiscal year.

⁷³ S.Rept. 114-165 was ordered to be reported after the enactment of the Bipartisan Budget Act of 2015, but the report explicitly states that the allocations therein “have not yet been adjusted” to reflect its enactment.

Table A-1. FY2016 Discretionary 302(b) Suballocations, Along with Comparable FY2015 Appropriations
(Dollars in billions)

FY2015 Comparable	FY2016 House 302(b)	FY2016 Senate 302(b)
156.8	153.1	153.2

Source: Table prepared by the Congressional Research Service. The estimate for FY2015 comparable is based on discretionary LHHS appropriations, as scored by the Congressional Budget Office. The FY2016 302(b) suballocations are as reported in H.Rept. 114-198 (July 10, 2015) and S.Rept. 114-165 (November 5, 2015).

Notes: Amounts reflect current-year discretionary budget authority subject to spending limits (i.e., adjusted for scorekeeping), not total budget authority in the bill. FY2015 comparable excludes funds for program integrity activities (\$1.5 billion) or designated for emergency purposes (\$2.7 billion), for which special rules apply under the Budget Control Act (BCA). CBO has generally scored the committee-reported LHHS bills in the House and Senate as meeting applicable 302(b)s. Both bills include additional program integrity funding subject to special rules under the BCA (\$1.5 billion in H.R. 3020; \$1.6 billion in S. 1695).

Current-Year Budget Authority

Table A-2 displays the total LHHS current-year budget authority under FY2016 proposals, by title, compared to FY2015 enacted levels. The amounts shown in this table reflect total budget authority available for obligation in the fiscal year, regardless of the year in which it was first appropriated.⁷⁴ (For a comparable table showing total budget authority in the bill, rather than current-year budget authority, see **Table 2** in the body of this report.) As mentioned above, it is current-year budget authority (adjusted for scorekeeping by CBO) that is used to determine compliance with discretionary spending allocations.

Table A-2. LHHS Appropriations Overview by Bill Title, FY2015-FY2016
(Current-year budget authority in billions of dollars)

Bill Title	FY2015 Enacted	FY2016 Request	FY2016 House Cmte (H.R. 3020)	FY2016 Senate Cmte (S. 1695)
Title I: Labor	13.35	14.54	12.58	12.75
Discretionary	11.95	13.18	11.88	11.39
Mandatory	1.40	1.36	0.70	1.36
Title II: HHS	681.89	730.38	726.41	725.63
Discretionary	70.97	75.77	71.30	71.02
Mandatory	610.91	654.62	655.11	654.62
Title III: Education	70.47	74.14	67.62	69.16
Discretionary	67.14	70.75	64.22	65.77
Mandatory	3.34	3.39	3.39	3.39
Title IV: Related Agencies	70.55	75.96	74.63	74.63

⁷⁴ These amounts exclude advance appropriations for future years, but include advance appropriations from prior years that became available in the applicable current year.

Bill Title	FY2015 Enacted	FY2016 Request	FY2016 House Cmte (H.R. 3020)	FY2016 Senate Cmte (S. 1695)
Discretionary	14.18	15.09	13.75	13.75
Mandatory	56.37	60.88	60.87	60.88
Total Current Year BA^a	836.25	895.03	881.24	882.17
Discretionary	164.23	174.78	161.16	161.92
Mandatory	672.02	720.25	720.07	720.25
Title VI: Ebola (emergency)^b	2.74	-	-	-
Memoranda:				
Advances for Future Years (provided in current bill) ^c	160.77	158.52	158.52	158.52
Advances from Prior Years (for use in current year) ^c	151.46	160.77	160.77	160.77
Additional Scorekeeping Adjustments ^d	-5.99	-5.52	-6.63	-7.07

Source: Amounts shown for FY2015 enacted, the FY2016 request, and the FY2016 House committee bill are generally drawn from (or estimated based on) H.Rept. 114-195, while amounts for the FY2016 Senate committee bill are generally drawn from S.Rept. 114-74. For consistency with source materials, amounts in this report do not reflect sequestration or re-estimates of mandatory spending programs, where applicable, nor do they reflect any transfers or reprogramming of funds pursuant to executive authorities. FY2015 enacted totals do not include Ebola-related funds provided by the first FY2015 CR (P.L. 113-64) or in Division G, Title VI, of the FY2015 omnibus (P.L. 113-235).

Notes: BA = Budget Authority. Details may not add to totals due to rounding. Amounts in this table (1) reflect all BA appropriated in the bill, regardless of the year in which funds become available (i.e., totals do not include advances from prior-year appropriations, but do include advances for subsequent years provided in this bill); (2) have generally not been adjusted to reflect scorekeeping; (3) comprise only those funds provided (or requested) for agencies and accounts subject to the jurisdiction of the LHHS Subcommittees of the House and the Senate Committees on Appropriations; and (4) do not include appropriations that occur outside of appropriations bills. No amounts are shown for Title V, because this title consists solely of general provisions.

- a. Totals in this table are based on current-year budget authority, meaning budget authority that is available for obligation in a given fiscal year, regardless of the year in which it was first appropriated (i.e., totals exclude advance appropriations for future years, but include advance appropriations from prior years that became available in the applicable current year).
- b. Total does not include \$88 million appropriated to HHS for Ebola-related activities in the first FY2015 CR.
- c. The calculation for total budget authority in the bill (rather than total budget authority available for obligation in the current fiscal year) is as follows: Total Current Year BA minus Advances from Prior Years plus Advances for Future Years.
- d. Totals in this table have generally not been adjusted for further scorekeeping. (To adjust for scorekeeping, add this line to the total budget authority.)

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<u>Department of Labor</u>			
Coordinator, DOL	(name redacted)	7-....	/redacted/@crs.loc.gov
Job training and employment services	(name redacted)	7-....	/redacted/@crs.loc.gov
Mine Safety and Health Administration	Scott Szymendera	7-....	/redacted/@crs.loc.gov
Occupational Safety and Health Admin.	Scott Szymendera	7-....	/redacted/@crs.loc.gov
Office of Workers' Compensation	Scott Szymendera	7-....	/redacted/@crs.loc.gov
Older Americans Act, employment programs	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Pension and welfare benefits	(name redacted)	7-....	/redacted/@crs.loc.gov
Trade adjustment assistance	(name redacted)	7-....	/redacted/@crs.loc.gov
Unemployment compensation	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Veterans employment	(name redacted)	7-....	/redacted/@crs.loc.gov
Wage and hour standards	(name redacted)	7-....	/redacted/@crs.loc.gov
Workforce Investment and Opportunity Act (WIOA)	(name redacted)	7-....	/redacted/@crs.loc.gov
<u>Health and Human Services</u>			
Coordinator, HHS	(name redacted)	7-....	/redacted/@crs.loc.gov
Abortion, legal issues	(name redacted)	7-....	/redacted/@crs.loc.gov
Abortion procedures	(name redacted)	7-....	/redacted/@crs.loc.gov
Agency for Healthcare Research and Quality (AHRQ)	(name redacted)	7-.. ..	/redacted/@crs.loc.gov

Area of Expertise	Name	Phone	Email
AIDS, Ryan White programs	(name redacted)	7-....	/redacted/@crs.loc.gov
Bioterrorism, HHS funding	(name redacted)	7-....	/redacted/@crs.loc.gov
Cancer research	(name redacted)	7-....	/redacted/@crs.loc.gov
Centers for Disease Control and Prevention (CDC)	(name redacted)	7-....	/redacted/@crs.loc.gov
Centers for Medicare and Medicaid Services (CMS)	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
	Barbara English	7-....	/redacted/@crs.loc.gov
Chafee Foster Care Independence and Education/Training Voucher Programs	(name redacted)	7-....	/redacted/@crs.loc.gov
Child abuse and neglect, child welfare	(name redacted)	7-....	/redacted/@crs.loc.gov
Child care and development	(name redacted)	7-....	/redacted/@crs.loc.gov
Children's Health Insurance Program (CHIP; funded in authorizing laws, not LHHS)	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Community Services Block Grant	(name redacted)	7-....	/redacted/@crs.loc.gov
Developmental Disabilities Act	(name redacted)	7-....	/redacted/@crs.loc.gov
Elder abuse and neglect, elder justice	(name redacted)	7-....	/redacted/@crs.loc.gov
Family Planning, Title X	(name redacted)	7-....	/redacted/@crs.loc.gov
Federal health centers	(name redacted)	7-....	/redacted/@crs.loc.gov
Food and Drug Administration (FDA; funded through Agriculture appropriations, not LHHS)	(name redacted)	7-....	/redacted/@crs.loc.gov
Foster care and adoption	(name redacted)	7-....	/redacted/@crs.loc.gov
Global health; international AIDS, TB, and malaria	(name redacted)	7-....	/redacted/@crs.loc.gov
Head Start	(name redacted)	7-....	/redacted/@crs.loc.gov
Health professions/health workforce programs	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Health Resources and Services Administration (HRSA)	(name redacted)	7-....	/redacted/@crs.loc.gov
Immunization	(name redacted)	7-....	/redacted/@crs.loc.gov
Indian Health Service (IHS; funded through Interior-Environment appropriations, not LHHS)	(name redacted)	7-....	/redacted/@crs.loc.gov
Low Income Home Energy Assistance Program (LIHEAP)	(name redacted)	7-....	/redacted/@crs.loc.gov
Maternal and Child Health Block Grant	(name redacted)	7-....	/redacted/@crs.loc.gov
Medicaid	(name redacted)	7-....	/redacted/@crs.loc.gov
Mentoring programs for vulnerable youth	(name redacted)	7-....	/redacted/@crs.loc.gov
Needle exchange, AIDS	(name redacted)	7-....	/redacted/@crs.loc.gov
NIH, health research policy	(name redacted)	7-....	/redacted/@crs.loc.gov

Area of Expertise	Name	Phone	Email
Older Americans Act	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Pandemic/seasonal influenza	(name redacted)	7-....	/redacted/@crs.loc.gov
Prevention and Public Health Fund (directly appropriated by Affordable Care Act, not LHHS)	(name redacted)	7-....	/redacted/@crs.loc.gov
Randolph-Sheppard Act	(name redacted)	7-....	/redacted/@crs.loc.gov
Refugee Resettlement Assistance	(name redacted)	7-....	/redacted/@crs.loc.gov
Runaway and Homeless Youth Act	(name redacted)	7-....	/redacted/@crs.loc.gov
Social Services Block Grant	(name redacted)	7-....	/redacted/@crs.loc.gov
Stem cell research, cloning	(name redacted)	7-....	/redacted/@crs.loc.gov
Substance Abuse and Mental Health Services Administration (SAMHSA)	(name redacted)	7-....	/redacted/@crs.loc.gov
Temporary Assistance for Needy Families (TANF; funded in authorizing laws, not LHHS)	(name redacted)	7-....	/redacted/@crs.loc.gov
<u>Department of Education</u>			
Coordinator, ED	(name redacted)	7-....	/redacted/@crs.loc.gov
Adequate Yearly Progress (AYP) and accountability	(name redacted)	7-....	/redacted/@crs.loc.gov
Adult education and literacy	(name redacted)	7-....	/redacted/@crs.loc.gov
After-school programs	(name redacted)	7-....	/redacted/@crs.loc.gov
Assessment in education	(name redacted)	7-....	/redacted/@crs.loc.gov
Career and technical education	(name redacted)	7-....	/redacted/@crs.loc.gov
Charter schools/school choice	(name redacted)	7-....	/redacted/@crs.loc.gov
College costs and prices	(name redacted)	7-....	/redacted/@crs.loc.gov
Education block grants	(name redacted)	7-....	/redacted/@crs.loc.gov
Elementary and secondary education	(name redacted)	7-....	/redacted/@crs.loc.gov
English language acquisition	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Higher education	(name redacted)	7-....	/redacted/@crs.loc.gov
	(name redacted)	7-....	/redacted/@crs.loc.gov
Impact Aid	(name redacted)	7-....	/redacted/@crs.loc.gov
Indian education	(name redacted)	7-....	/redacted/@crs.loc.gov
International Education Programs	(name redacted)	7-....	/redacted/@crs.loc.gov
Legal issues related to education in general	(name redacted)	7-....	/redacted/@crs.loc.gov
Pell Grants	(name redacted)	7-....	/redacted/@crs.loc.gov
Reading programs	(name redacted)	7-....	/redacted/@crs.loc.gov
Rehabilitation Act	(name redacted)	7-....	/redacted/@crs.loc.gov
Safe & Drug-Free Schools	(name redacted)	7-....	/redacted/@crs.loc.gov

Area of Expertise	Name	Phone	Email
Science, Technology, Engineering, and Mathematics (STEM) Education	(name redacted) (name redacted)	7-.... 7-....	/redacted/@crs.loc.gov /redacted/@crs.loc.gov
Special education, IDEA	(name redacted)	7-....	/redacted/@crs.loc.gov
Special education, IDEA, legal issues	Cynthia Brougher	7-....	/redacted/@crs.loc.gov
Student financial assistance/need analysis	(name redacted) (name redacted)	7-.... 7-....	/redacted/@crs.loc.gov /redacted/@crs.loc.gov
Student loans	(name redacted)	7-....	/redacted/@crs.loc.gov
Teacher recruitment, preparation, & training	(name redacted)	7-....	/redacted/@crs.loc.gov
Title I, Education for the Disadvantaged	(name redacted)	7-....	/redacted/@crs.loc.gov
Vocational rehabilitation	(name redacted)	7-....	/redacted/@crs.loc.gov
<u>Related Agencies</u>			
Coordinator, Related Agencies	Scott Szymendera	7-....	/redacted/@crs.loc.gov
Committee for Purchase from People Who are Blind or Severely Disabled (U.S. Ability One Commission)	(name redacted)	7-....	/redacted/@crs.loc.gov
Corporation for National & Community Service (VISTA, Senior Corps, AmeriCorps)	(name redacted) (name redacted)	7-.... 7-....	/redacted/@crs.loc.gov /redacted/@crs.loc.gov
Corporation for Public Broadcasting	(name redacted)	7-....	/redacted/@crs.loc.gov
Institute of Museum and Library Services	(name redacted)	7-....	/redacted/@crs.loc.gov
National Labor Relations Board	(name redacted)	7-....	/redacted/@crs.loc.gov
National Labor Relations Board, legal issues	(name redacted)	7-....	/redacted/@crs.loc.gov
National Mediation Board	(name redacted)	7-....	/redacted/@crs.loc.gov
Railroad Retirement Board	Scott Szymendera	7-....	/redacted/@crs.loc.gov
Social Security Administration (SSA), administrative expenses	Scott Szymendera	7-....	/redacted/@crs.loc.gov
Supplemental Security Income (SSI)	Scott Szymendera (name redacted)	7-.... 7-....	/redacted/@crs.loc.gov /redacted/@crs.loc.gov

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