

Appropriations Update: House Appropriations Committee Approves FY 2022 Labor, Health and Human Services, and Education Funding Bill

Lewis-Burke Associates LLC – July 16, 2021

On July 15, the House Appropriations Committee amended and approved the fiscal year (FY) 2022 Labor, Health and Human Services, and Education (Labor-HHS-ED) spending bill by a vote of 33-25. The bill would provide a total of \$237 billion in discretionary funding for the Departments of Labor, Health and Human Services, Education, and related agencies. During the full Appropriations Committee's mark-up, Labor-HHS-ED Subcommittee Chairwoman Rosa DeLauro (D-CT) offered a [Manager's Amendment](#) that made several technical changes to the Subcommittee's bill approved on July 12. Additionally, despite objections by several Republicans during the mark-up over federal support for abortion, the final bill advanced without the Hyde Amendment.

The bill would provide \$120 billion for the Department of Health and Human Services (HHS), which is a \$30 billion increase above the FY 2021 enacted level. Of this amount, the bill would provide \$49.4 billion for the National Institutes of Health (NIH), an increase of \$6.5 billion above the FY 2021 enacted level, with \$3 billion to be included to establish the Advanced Research Project Agency for Health (ARPA-H), provided that Congress enacts legislation to authorize the new agency. Additionally, within HHS, the Centers for Disease Control and Prevention (CDC) would receive \$10.6 billion, a \$2.7 billion increase above the FY 2021 level, and the Health Resources and Services Administration's (HRSA) Title VII Health Professions programs and Title VIII Nursing Workforce Development Programs would receive \$980 million, a \$225 million increase above the FY 2021 enacted level. The bill would also provide \$6,895 for the maximum Pell Grant award, an increase of \$400 above the FY 2021 enacted level and would allow DREAMERS and students with temporary protected status to be eligible for Pell Grants and other federal student aid. Additionally, the bill would provide \$285 million for Department of Labor (DOL) Registered Apprenticeships, an increase of \$100 million above the FY 2021 enacted level and the same as the President's budget request.

House leadership aims to bring the Labor-HHS-ED bill to the floor for consideration, along with six other appropriations bills in a "minibus" package, during the week of July 26.

National Institutes of Health (NIH)

The bill would provide \$49.4 billion for the National Institutes of Health (NIH), an increase of \$6.5 billion (15.1 percent) above the FY 2021 enacted level. Of this amount, \$3.5 billion would be directed to the NIH's base budget, which would support an increase of at least five percent for each NIH Institute and Center (IC). The remaining \$3 billion would be used to establish the **Advanced Research Projects Agency for Health (ARPA-H)**, provided that Congress enacts legislation to authorize the new agency. If Congress chooses to authorize this new initiative, the Committee would make this \$3 billion in funding available for use through FY 2024.

ARPA-H, the Biden Administration's signature biomedical research policy initiative, would focus on accelerating the pace of biomedical innovation by using nontraditional methods (e.g. time-limited and milestone-based contracts; significant program manager autonomy in project selection) to support advanced research and development. In the report accompanying its bill, the Committee notes its

strong support of the ARPA-H proposal and that, for the new agency to be successful, it must be a distinct Institute within NIH that fosters a unique culture and approach to selecting and funding projects. The Committee encourages NIH to focus on the development of treatments and cures for cancer, Alzheimer’s disease, diabetes, and amyotrophic lateral sclerosis (ALS), but notes that other ongoing NIH research activities may be aligned with ARPA-H’s mission. Recognizing this potential overlap between ARPA-H and other NIH research, the Committee encourages NIH to review any “duplication or misalignment of programs” once ARPA-H is established and report on any proposed shifts or reorganization to address such issues.

The bill includes \$496 million for specific initiatives in the NIH Innovation Account authorized in the *21st Century Cures Act* (Cures), consistent with the spending levels enacted in the 2016 Cures legislation. The Committee recommends \$194 million for the **Cancer Moonshot** program; \$541 million for the **All of Us Precision Medicine Program** (\$150 million of this total from Cures); and \$612 million for the **Brain Research through Application of Innovative Neurotechnologies (BRAIN) Initiative** (\$152 million of this total from Cures).

In addition to ARPA-H, several other Biden Administration research priorities for NIH are included in the Committee’s bill. These include \$110 million, an increase of \$100 million above the FY 2021 enacted level, for research on the impacts of **climate change on human health** at the National Institute of Environmental Health Sciences (NIEHS); \$25 million for **firearm injury prevention research**, an increase of \$12.5 million over the FY 2021 enacted level; and \$30 million for research on **maternal health** through the Implementing a Maternal Health and Pregnancy Outcomes Vision for Everyone (IMPROVE) Initiative. The bill would provide \$330 million in new funding for **health disparities research** across several ICs, including \$250 million at National Institute on Minority Health and Health Disparities (NIMHD); \$50 million at the National Heart, Lung, and Blood Institute (NHLBI); \$20 million at the National Institute of Nursing Research (NINR); and \$10 million at the Fogarty International Center (FIC). Beyond this dedicated funding, the Committee emphasizes the importance of research on health disparities across NIH and encourages several ICs to bolster their efforts in this area in FY 2022.

The bill would provide an increase of \$20 million for programs at the National Institute of General Medical Sciences (NIGMS) that are designed to enhance **diversity in the biomedical research workforce**, including the Maximizing Opportunities for Scientific and Academic Independent Careers (MOSAIC), Minority Access to Research Careers (MARC), Bridges to the Baccalaureate, and Undergraduate Research Training Initiative for Student Enhancement (U-RISE) programs.

As in past years, the Committee continues to prioritize support for **Alzheimer’s Disease and Related Dementias (ADRD)** and would provide \$3.4 billion for such research in FY 2022, an increase of \$200 million above the anticipated FY 2021 level. In addition, the Committee continues to support NIH’s efforts to combat the opioid public health crisis and would provide \$810.8 million for the **Helping to End Addiction Long-Term (HEAL) Initiative**, for research related to opioid addiction, the development of non-addictive opioid alternatives, pain management, and addiction treatment at the National Institute on Drug Abuse (NIDA) and the National Institute of Neurological Disorders and Stroke (NINDS).

The Committee would provide \$415 million for the **Institutional Development Award (IDeA)** program, an increase of \$18.4 million above the FY 2021 enacted level. IDeA supports research capacity building in states that have historically low levels of NIH funding. The bill would provide \$616.2 million for the **Clinical and Translational Science Awards (CTSA) program** at the National Center for Advancing Translational Sciences (NCATS), an increase of \$29.3 million above the FY 2021 enacted level. In its

report accompanying the appropriations bill, the Committee notes that the CTSA program was a driving force behind the effort to develop COVID-19 diagnostics, treatments, and vaccines and reiterates previous guidance that NCATS notify the Committee of any planned changes in the CTSA program’s scale, scope, or size of individual awards.

The bill would provide \$250 million, an increase of \$30 million above the FY 2021 enacted level, for basic, translational, and clinical research to develop a **universal influenza vaccine**. Of note, the Committee would provide \$50 million to support research and development of **rapid vaccine development platforms for emerging infectious diseases**. The bill would provide \$15 million, an increase of \$2.5 million above the FY 2021 enacted level, to grow the **Emerging Centers of Excellence in Genomic Sciences** program at the National Human Genome Research Institute (NHGRI).

Within the NIH Office of the Director, the Committee would provide \$49.8 million for the **Office of Behavioral and Social Sciences Research (OBSSR)**, an increase of \$20 million above the FY 2021 enacted level. The Committee notes that it strongly supports the continued strengthening of NIH’s social and behavioral sciences research enterprise. The bill would also provide an increase of \$17.5 million for the Office of Research on Women’s Health (ORWH), bringing funding for ORWH to \$61.5 million in FY 2022.

The bill would provide \$50 million for **biomedical research facilities** grants to expand, remodel, or renovate research infrastructure (awarded using NIH’s C06 grant mechanism). The Committee urges NIH to make awards large enough to support a significant portion of construction costs. Of note, the bill would retain the investigator salary cap at Executive Level II (\$199,300).

National Institutes of Health
(in thousands of \$)

	FY 2021 Enacted	FY 2022 Request	FY 2022 House	House vs. FY 2021 Enacted	House vs. FY 2022 Request
NIH, Total	42,934,000	51,732,713	49,434,000	6,500,000 (15.1%)	2,298,713 (-4.4%)
National Cancer Institute (NCI)	6,559,852	6,733,302	6,992,056	432,204 (6.6%)	258,754 (3.8%)
National Heart, Lung, and Blood Institute (NHLBI)	3,664,811	3,845,681	3,866,828	202,017 (5.5%)	21,147 (0.5%)
National Institute of Dental and Craniofacial Research (NIDCR)	484,867	516,197	519,010	34,143 (7.0%)	2,813 (0.5%)
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)	2,131,975	2,219,298	2,237,625	105,650 (5.0%)	18,327 (0.8%)
National Institute of Neurological Disorders and Stroke (NINDS)	2,513,393	2,783,300	2,799,515	286,122 (11.4%)	16,215 (0.6%)

National Institute of Allergy and Infectious Diseases (NIAID)	6,069,619	6,245,926	6,557,803	488,184 (8.0%)	311,877 (5.0%)
National Institute of General Medical Sciences (NIGMS)	2,991,417	3,096,103	3,139,656	148,239 (5.0%)	43,553 (1.4%)
Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)	1,590,337	1,942,117	1,689,786	99,449 (6.3%)	252,331 (-13.0%)
National Eye Institute (NEI)	835,714	858,535	877,129	41,415 (5.0%)	18,594 (2.2%)
National Institute of Environmental Health Sciences (NIEHS)	814,675	937,107	941,799	127,124 (15.6%)	4,692 (0.5%)
National Institute on Aging (NIA)	3,899,227	4,035,591	4,258,049	358,822 (9.2%)	222,458 (5.5%)
National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)	634,292	680,186	679,410	45,118 (7.1%)	776 (-0.1%)
National Institute on Deafness and Other Communications Disorders (NIDCD)	498,076	511,792	522,758	24,682 (5.0%)	10,966 (2.1%)
National Institute of Mental Health (NIMH)	2,103,708	2,213,574	2,223,085	119,377 (5.7%)	9,511 (0.4%)
National Institute on Drug Abuse (NIDA)	1,479,660	1,852,503	1,860,329	380,669 (25.7%)	7,826 (0.4%)
National Institute on Alcohol Abuse and Alcoholism (NIAAA)	554,923	570,165	582,422	27,499 (5.0%)	12,257 (2.1%)
National Institute on Nursing Research (NINR)	174,957	199,755	200,782	25,825 (14.8%)	1,027 (0.5%)
National Human Genome Research Institute (NHGRI)	615,780	632,973	646,295	30,515 (5.0%)	13,322 (2.1%)
National Institute of Biomedical Imaging and Bioengineering (NIBIB)	410,728	422,039	431,081	20,353 (5.0%)	9,042 (2.1%)
National Institute on Minority Health and Health Disparities (NIMHD)	390,865	652,244	661,879	271,014 (69.3%)	9,635 (1.5%)
National Center for Complementary and Integrative Health (NCCIH)	154,162	184,323	185,295	31,133 (20.2%)	972 (0.5%)

National Center for Advancing Translational Sciences (NCATS)	855,421	878,957	897,812	42,391 (5.0%)	18,855 (2.1%)
John E. Fogarty International Center (FIC)	84,044	96,322	96,842	12,798 (15.2%)	520 (0.5%)
National Library of Medicine (NLM)	463,787	474,864	486,769	22,982 (5.0%)	11,905 (2.5%)
Office of the Director (OD)	2,411,110	2,237,259	2,667,385	256,275 (10.6%)	430,126 (19.2%)
Building & Facilities	200,000	250,000	250,000	50,000 (25.0%)	--
Advanced Research Projects Agency for Health (ARPA-H)	--	6,500,000	3,000,000	3,000,000 --	3,500,000 (-53.8%)

Source: <https://docs.house.gov/meetings/AP/AP00/20210715/113908/HMKP-117-AP00-20210715-SD003.pdf>

Other Department of Health and Human Services (HHS)

The bill would provide around \$120 billion for the Department of Health and Human Services (HHS), which is a \$30 billion increase above the FY 2021 enacted level. Within HHS, roughly \$10.6 billion would be allocated to the Centers for Disease Control and Prevention (CDC), a \$2.7 billion increase above the FY 2021 level; \$980 million for Title VII Health Professions programs and Title VIII Nursing Workforce Development Programs within the Health Resources and Services Administration (HRSA), a \$225 million increase above the FY 2021 enacted level; and \$9.2 billion would go to the Substance Abuse and Mental Health Services Administration (SAMHSA), an increase of about \$3 billion over the FY 2021 enacted level. Other priority areas in the bill include additional support for public health infrastructure, diversity pipeline efforts, mental health and substance use disorder programs, and rural health initiatives.

The **Health Resources and Services Administration (HRSA)** would receive \$8.7 billion, which is a \$1.5 billion increase over the FY 2021 enacted level. The bill would provide the Bureau of Health Workforce within HRSA with \$1.3 billion in funding, a \$340 million increase over the FY 2021 enacted level. Of interest to academic health centers, Title VII Health Professions programs would receive \$665 million and Title VIII Nursing Workforce Development Programs would receive \$314 million, a combined total of \$980 million or a 30 percent increase above the FY 2021 enacted level. Notably, the bill would further support:

- **Several health professions diversity pipeline programs**, including \$20.5 million for the Health Careers Opportunity Program (HCOP), a \$5.5 million increase; \$62 million for the Scholarships for Disadvantaged Students (SDS) program, a \$10.5 million increase; and \$31 million for the Centers of Excellence (COEs), an \$8 million increase above the FY 2021 enacted level, to provide grants to health professions schools and other institutions to serve as a resource for recruitment and training of underrepresented minority students and faculty.
- **Mental health and substance use disorder workforce programs**, including \$181 million for the Behavioral Health Workforce Education and Training (BHWET) program, a \$69 million increase; \$34 million for the Mental and Substance Use Disorder Workforce Training Demonstration program, a \$4 million increase; and \$28 million for the Substance Use Disorder Treatment and Recovery (STAR) Loan Repayment Program, a \$12 million increase above the FY 2021 enacted level.

- **Geriatrics workforce programs**, including \$52 million for the Geriatrics Workforce Enhancement Program (GWEP), a \$10 million increase above the FY 2021 enacted level, which supports training that integrates geriatrics and primary care and develops academic-primary care-community based partnerships.
- **Nursing programs**, including \$82 million for Advanced Nursing Education, a \$6.5 million increase; \$108 million for Nurse Corps Scholarship and Loan Repayment, a \$20 million increase; and \$52 million for the Nursing Education, Practice, Quality, and Retention (NEPQR) program, a \$5 million increase above the FY 2021 enacted level.

Other areas of support in the bill would include \$185 million for National Health Service Corps (NHSC), an increase of \$65 million; \$190 million within the Ryan White HIV/AIDS program for the Ending the HIV Epidemic Initiative, an \$85 million increase; \$868 million for the Maternal and Child Health (MCH) Block Grant, a \$156 million increase; and \$75 million to support Medical Student Education, a \$25 million increase above the FY 2021 enacted level. The funding would support colleges of medicine at public universities located in the “top quintiles of States projected to have a primary care provider shortage,” with a preference given to academic institutions located in states with a large number of federally recognized Tribes and public universities with a “demonstrated public-private partnership.”

The bill would also provide support for several rural health programs, including \$140 million to continue the Rural Communities Opioids Response program, a \$30 million increase; \$12.7 million for the Rural Health Residency Program, an increase of \$2.2 million; and \$7.5 million for the Telehealth Centers of Excellence (COE) program, an increase of \$1 million above the FY 2021 enacted level. The COE program aims to promote the adoption of telehealth programs through establishing training protocols and providing resources to States to integrate telehealth into provider networks with the additional funding aimed at expansion of telemental health services. The bill would further encourage HRSA to “establish a pilot program to expand academic health system telehealth programs aimed at addressing the health inequities of urban populations.” The bill would also include \$367 million in funding for Community Project Funding within the HRSA account, to finance health-related activities through one-time grants. A full list of these projects can be viewed [here](#).

For FY 2022, the **Centers for Disease Control and Prevention (CDC)** would receive an increase of \$2.7 billion over the FY 2021 enacted level for a total \$10.6 billion. This funding level is \$1 billion above the President’s budget request. For the nation’s public health infrastructure and capacity, the Committee included a new \$1 billion funding line. According to the Committee, the COVID–19 pandemic exposed the inadequacies of the current public health ecosystem and that “flexible, sustainable investments in public health are critical.” This funding is intended to provide CDC with a stable source of non-disease specific funding for state, local, territorial, and federal public health agencies. Additionally, the Public Health Preparedness and Response account would receive an increase of \$20 million for a total of \$862.2 million. Within the total, the Committee recommended \$715 million for Public Health Emergency Preparedness Cooperative Agreements, \$8.2 million for Academic Centers for Public Health Preparedness, and \$139 million for CDC Preparedness and Response.

Key public health initiatives also receiving additional funding:

- Opioid overdose prevention and surveillance would receive \$663 million, an increase of \$188 million above the FY 2021 enacted level.
- The Racial and Ethnic Approach to Community Health (REACH) program would receive \$74 million, an increase of \$10 million above the FY 2021 enacted level.

- \$110 million was included for the CDC Climate and Health program. This was an increase of \$100 million above the FY 2021 enacted level and in line with the budget request. The program assists states and territories with identifying potential health effects associated with climate change and implement plans.
- \$153 million was included for programs focused on the social determinants of health. This was an increase of \$150 million above the FY 2021 enacted level.
- \$75 million, an increase of \$10 million above the FY 2020 enacted level, would be provided for food safety.
- \$115 million, an increase of \$100 million above the FY 2021 enacted level, would be provided for community and youth violence prevention.
- The Committee includes an increase of \$4.5 million that would support provisions of the *Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer's Act* ([P.L. 115-406](#)), for the implementation of the Road Map Series, expanding the number of Centers of Excellence, and building a robust public health infrastructure across the country for Alzheimer's Disease and other dementias.
- With regard to HIV/AIDS, Hepatitis, sexually transmitted diseases, and tuberculosis, the bill would provide \$1.5 billion, a \$187.5 million increase from the FY 2021 level. The majority of the funding (\$1.08 billion) would go to domestic HIV/AIDS prevention and research.
- The Committee would provide CDC with an additional \$12.5 million to expand its firearm injury and mortality prevention research, using a public health approach in collecting data on firearm injury and deaths.
- Public health workforce initiatives would receive \$106 million, a \$50 million increase above the FY 2021 enacted level.
- CDC's Prevention Research Centers program would receive an increase of \$5 million to expand the national network of centers.

The Committee calls on the CDC to engage providers, health care, stakeholders, educators, community organizations, and parents/guardians about the importance of ensuring children receive recommended vaccinations. The Committee is requesting a report within 90 days of enactment detailing a strategy and plan for a public awareness campaign to increase childhood and adult vaccination rates and reduce barriers to routine vaccinations, including vaccine hesitancy. Health data programs would also receive increased funding. The National Center for Health Statistics would receive \$190 million, \$15 million over the FY 2021 enacted level, and the public health data surveillance and analytics programs for CDC and state and local health departments would receive \$150 million, an increase of \$100 million above the FY 2021 enacted level. The Committee also includes a significant increase for emerging and zoonotic infectious disease prevention. Overall, the Committee recommended \$726 million, a \$78 million increase from the FY 2021 level. The majority of the funding would be allocated to the Antibiotic Resistance Initiative at \$176 million and Emerging Infectious Diseases prevention at \$194.9 million.

For the National Institute for Occupational Safety and Health (NIOSH), the Committee recommends \$360.3 million, a \$15 million increase from the FY 2021 enacted level. Of the total, the Committee is calling for \$123 million to be allocated to the National Occupational Research Agenda. The Committee is calling the CDC to study the impact of COVID-19 exposure to workers, particularly those in healthcare, first responders, meat and poultry, corrections, grocery, corrections, and transit industries. The Committee is asking the agency to include in the report a comparative analysis of the higher risk occupations and the rate of COVID-19 deaths in the general population.

The Committee would provide an increase of \$56.5 million for activities related to infectious diseases and the opioid epidemic. The Committee is seeking to have the CDC expand its activities targeting infectious disease and injection drug use, including the implementation of a nationwide syringe services program. The Committee would also provide the CDC with increased funding for its global health programs. Under the bill, the CDC would receive \$842.8 million, an increase of \$250 million from the FY 2021 enacted level, to work with international organizations to prevent and contain diseases and environmental health issues. The CDC is also directed to develop health promotion activities. This funding increase is in addition to the \$750 million provided under the *American Rescue Plan* ([P.L. 117-2](#)) for global disease detection and emergency response.

For the **Substance Abuse and Mental Health Services Administration (SAMHSA)**, the Committee is recommending \$9.2 billion, an increase of \$3.1 billion from the FY 2021 enacted level and \$572.2 million less than the President’s Budget Request. For mental health programs of national significance, the Committee is recommending \$3.2 billion, an increase of \$1.4 billion over the FY 2021 enacted level. The Committee is also recommending \$1.6 billion, an \$825 million increase, for the Mental Health Block Grant (MHBG). This funding for the MHBG is in addition to the \$1.5 billion provided by the *American Rescue Plan* ([P.L. 117-2](#)).

Key mental health programs that would receive increases:

- Project AWARE, which provides mental health resources for children and youth would receive \$155.5 million, an increase of \$48.5 million above the FY 2021 enacted level.
- The National Child Traumatic Stress Initiative would receive \$100 million, an increase of \$28.1 million above the FY 2021 enacted level.
- The Zero Suicide Program would receive \$26.2 million, an increase of \$5 million above the FY 2021 enacted level. The Suicide Lifeline would receive \$113.6 million, an increase of \$89.6 million above the FY 2021 enacted level, to support the implementation of the Lifeline’s new 988 number.
- The bill would create a new Mental Health Crisis Response Partnership Pilot Program, which would provide \$100 million to help communities create mobile crisis response teams.

The Committee calls on SAMHSA to place a greater emphasis on mental health disparities and addressing health care disparities experienced by racial and ethnic minorities should be a priority in programs funded by Federal agencies, including programs funded by the Community Mental Health Services Block Grant. The Committee also directs SAMHSA to require states to report receiving funds under the block grants to detail which services are being received by and the outcomes, individuals from racial and ethnic minority groups. The bill also directs SAMHSA to focus on the impact of COVID–19 on the mental health of older Americans. Older adults, who were more susceptible to the virus, experienced increased isolation during the pandemic, which is linked to higher rates of loneliness, depression, suicidal thoughts, and other mental health issues. In disbursing MHBG funds, the Committee is encouraging SAMHSA to work with states to address the impact of increased isolation of seniors. The Committee also encourages SAMHSA to establish a center of excellence program focused on comprehensive mental health treatments, and the development, evaluation, and distribution of evidence-based resources regarding comprehensive treatment recommendations for mental health patients that include supportive services, wrap-around services, and social determinants of health.

The Committee would also place a greater emphasis on substance use prevention and treatment programs including:

- \$2.8 billion, an increase of \$1 billion over the FY 2021 enacted level, for the Substance Abuse Prevention and Treatment Block Grant (SABG).
- \$2 billion for State Opioid Response Grants, an increase of \$500 million over the FY 2021 enacted level.
- \$136.5 million, an increase of \$56.5 million over the FY 2021 enacted level, for Medication Assisted Treatment.
- \$243.5 million, an increase of \$35 million above the FY 2021 enacted level for substance abuse prevention.
- Comprehensive Opioid Recovery Centers, as authorized by section 7121 of the *SUPPORT Act* ([P.L. 115-271](#)), would receive an increase of \$2 million.
- An increase of \$35.4 million for Criminal Justice activities, \$35 million of which is directed to Drug Court activities.
- An increase of \$2.7 million for communities to strengthen their infrastructure for peer recovery support services.

For the **Office of Minority Health (OMH)**, the Committee would recommend \$75.8 million, which is \$14 million above the FY 2021 enacted level and President’s budget request. To continue its work at the Center for Indigenous Innovation and Health Equity, the Committee would provide \$3 million, an increase of \$1 million from FY 2021, and is urging HHS to consider partnering with universities with a focus on Indigenous health research and policy among Native Americans and Alaska Natives, as well as universities with a focus on Indigenous health policy and innovation among Native Hawaiians/Pacific Islanders. The Committee directs OMH to establish a public health pilot program to address structural racism in public health and included \$10 million to fund 20 eligible applicants. Applicants could include public and non-profit entities, including community-based organizations, to build and strengthen coalitions. The Committee expressed concern that current grants to advance health equity and reduce disparities are not as targeted as necessary to address structural racism in public health and promote policies and practices that counter the disparate impact on the health and well-being of communities of color.

The Committee directs the Advisory Committee on Minority Health to issue a report advising HHS on the best efforts to create pipeline programs that start with pre-med students in underserved areas and end in more graduate medical education training programs in those underserved areas. The Committee requests a study by the Advisory Committee on Minority Health with recommendations that can help HHS address vaccine and testing equity in the Hispanic and immigrant communities during the COVID-19 pandemic, not only due to barriers to COVID-19 vaccination and testing, but also lack of reliable information in their languages, misinformation, and fear of deportation. Of note, the Committee praised OMH but expressed concern over its ability to properly address antiracism in healthcare, given its broad mission. The Committee directed the Secretary of HHS to create a report on potentially establishing a National Center on Antiracism and Health Equity within HHS.

For the **Centers for Medicare and Medicaid Services (CMS)**, the bill primarily would provide grant funding to states for their Medicaid programs, and payments to the health care trust funds and programs.

Key CMS discretionary funding recommendations:

- For grants to states for Medicaid, the bill would provide \$368.7 billion, an increase of \$55.8 billion from the FY 2021 enacted level.

- For payments to the health care trust funds, the Committee would provide \$487.8 billion, an increase of \$48.3 billion from the FY 2021 enacted level. Of note, this account includes the general fund subsidy to the Federal Supplementary Medical Insurance Trust Fund for Medicare Part B benefits, and Medicare drug benefits and administration. It also includes reimbursements to the Federal Hospital Insurance Trust Fund for benefits and administrative costs, which have not been financed by payroll taxes or premium contributions.
- The Committee includes \$4.3 billion for program operations, which is \$646 million more than the FY 2021 enacted level. This amount includes \$25.4 million for Research, Demonstration and Evaluation, which was previously funded on its own budget line.

Several additional agencies and programs within HHS would also receive increases, including the **Agency for Healthcare Research and Quality (AHRQ)** which would receive \$380 million in discretionary funding, a \$35 million increase over the FY 2021 enacted level. Priority areas highlighted in the bill would include no less than \$10 million to support efforts to combat antimicrobial resistance; an increase of \$3 million to support investigator-initiated research grants focused on health equity and an additional \$1 million in related research supplements; and \$5 million to expand research related to opioid use and misuse. Additionally, the **Administration for Community Living (ACL)** would receive \$2.9 billion, an \$840 million increase above the FY 2021 enacted level. Within ACL, the bill would provide \$34 million for the Alzheimer’s disease program which would expand competitive matching grants to states to encourage innovation and coordination across Alzheimer’s related programs and services. The bill would also provide \$47 million to support University Centers for Excellence in Development Disabilities, a \$5 million increase above the FY 2021 enacted level. Additionally, the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) would receive \$128 million to enhance knowledge-generation programs that support individuals with disabilities. This is almost a \$12 million increase over the FY 2021 enacted level. The **Administration for Children and Families (ACF)** would receive about \$47 billion a \$6.4 billion increase above the FY 2021 level. Notably, the Early Childhood Education programs would receive about \$20 billion, including \$7.4 billion for the Child Care and Development Block Grant, \$12.2 billion for Head Start, and \$450 million for Preschool Development grants. The bill would also provide \$450 million for the Refugee Support Services (RSS) program, \$243 million above the FY 2021 enacted level and \$3.4 billion for the Unaccompanied Children Program (UCP), which is over \$2 billion above the FY 2021 enacted level.

Department of Health and Human Services (Other)

(In millions of \$)

	FY 2021 Enacted	FY 2022 Request	FY 2022 House	House vs. FY 2021 Enacted	House vs. FY 2022 Request
Health Resources and Services Administration (HRSA)	7,207	7,813	8,724	1,517 (21%)	911 (11.7%)
Title VII	490	577	665	175 (35.7%)	88 (15.3%)
Title VIII	264	268	314	50 (18.9%)	46 (17.2%)
Substance Abuse and Mental Health Services Administration (SAMHSA)	6,016	9,734	9,160	3,144 (52.3%)	-574 (5.9%)
Mental Health Services	1,792	2,937	3,161	1,369 (76.4%)	224 (7.6%)

Substance Abuse Treatment	3,855	6,409	5,512	1,657 (43%)	-897 (14%)
Substance Abuse Prevention	208	217	244	36 (17.3%)	27 (12.4%)
Agency for Healthcare Research and Quality (AHRQ)	338	380	380	42 (12.4%)	--
Centers for Disease Control and Prevention (CDC)	7,875	9,553	10,571	2,696 (34.2%)	1,018 (10.7%)
Chronic Disease Prevention and Health Promotion	1,277	1,453	1,557	280 (21.9%)	104 (7.2%)
National Institute for Occupational Safety and Health (NIOSH)	345	345	360	15 (4.3%)	15 (4.3%)
Environmental Health	223	333	343	120 (53.8%)	10 (3%)
Administration on Community Living (ACL)	2,206	2,954	3,047	841 (38.1%)	93 (3.1%)
National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)	113	119	125	12 (10.6%)	6 (5%)
Administration for Children and Families (ACF)	41,190	46,943	47,624	6,434 (15.6%)	681 (1.5%)
Office of the National Coordinator for Health IT (ONC)	62	87	87	25 (40.3%)	--
Biomedical Advanced Research and Development Authority (BARDA)	597	823	823	226 (37.9%)	--

Source: <https://docs.house.gov/meetings/AP/AP00/20210715/113908/HMKP-117-AP00-20210715-SD003.pdf>

Department of Education (ED)

The Department of Education (ED) would receive more than \$102 billion in appropriations, which matches what is proposed in the President's budget request and is \$29.2 billion more than in Fiscal Year 2021. Programs receiving significant increases include Title I for K-12, the Pell Grant program, the Federal Work-Study program, and programs for Minority-Serving Institutions (MSIs), among other programs.

At the K-12 level, the Title I program, which supports schools serving students from low-income backgrounds, would increase by \$19.5 billion compared to FY 2021. Other K-12 provisions include:

- \$2.2 billion, an increase of \$150 million when compared to FY 2021 for **Title II professional development** programs for educators;
- \$254 million, an increase of \$60 million compared to FY 2021 for the **Education Innovation and Research (EIR)** program, including \$112 million for social and emotional learning (SEL) and an encouragement for ED to use EIR to improve educator preparation;
- \$90 million, an increase of \$10 million compared to FY 2021 for the **Supporting Effective Educator Development (SEED)** program, with a direction for ED to support projects that

increase the number of teachers with computer science certifications and projects that support professional development to help teachers incorporate SEL into their classrooms;

- \$96 million for the **Promise Neighborhoods** program, which is \$15 million more than FY 2021 funding, with a directive for ED to include support for planning grants;
- \$1 billion for the **Mental Health Services Professional Demonstration Grants** program, which would support the hiring of school counselors, social workers, psychologists, or other mental health professionals qualified to provide school-based mental health services;
- \$250 million for the **Personnel Preparation** program, which is almost \$160 million more in FY 2021, to address the shortage of teachers for students with disabilities; and
- \$443 million, a \$413 million increase compared to FY 2021, for **full-service community schools**.

For **Pell Grants**, the bill would provide \$6,895 for the maximum individual Pell Grant award for the 2022-2023 school year, a \$400 discretionary increase over the current maximum award level, which reflects the budget request. The bill would also extend Pell Grant eligibility to DACA eligible recipients. Contrasting with the President's proposed flat budgets for the **Supplemental Education Opportunity Grants (SEOG)** program and **Federal Work-Study (FWS)** program, the bill would support increases for the programs, providing \$1.03 billion and of \$1.43 billion, respectively. Similarly, the **TRIO Programs** would be provided an increase of \$200 million over current levels, up to \$1.3 billion and the Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP) would receive \$408 million, a \$40 million increase over the FY 2021 enacted level.

The bill proposes a \$15 million increase for the **Title VI International Education and Foreign Language Studies** programs, for a total of \$93 million and calls for support of a Native American Language Resource Center. The bill would also increase by \$2 million funding for the **Graduate Assistance in Areas of National Need (GAANN)** program at a level of \$25.5 million, and the Committee report encourages ED to integrate the humanities and computer science in the next GAANN grant competition. The bill would substantially increase funding for the **Child Care Access Means Parents in School (CCAMPIS)** program to \$95 million, an increase of \$40 million above the FY 2021 enacted level.

Reflecting President Biden's priority to support Minority-Serving Institutions and Historically Black Colleges and Universities (HBCUs), the House bill would provide significant increases for those institutional programs. The Title V **Developing Hispanic Serving Institutions (Developing HSIs)** program would see a \$88 million or 60 percent increase above the FY 2021 enacted level and the **Promoting Post-Baccalaureate Opportunities for Hispanic Americans (PPOHA)** program would see a \$15 million or 108 percent increase above the enacted level. Additionally, the **Strengthening Institutions Program (SIP)** would see an \$100 million increase over FY 2021 enacted to a funding level of \$209 million and the **Strengthening Asian American and Native American Pacific-Islander-Serving Institutions (AANAPISI)** program would receive \$20 million, a \$15 million increase. The bill would provide \$130 million for the Teacher Quality Partnerships grant program, in line with President Biden's budget request and \$80 million over the FY 2021 enacted level. New this year, the bill calls for \$20 million for **the Augustus F. Hawkins Centers of Excellence** program for HBCUs and MSIs to establish centers supporting diverse teacher preparation programs.

The Committee bill would also increase funding for the **Institute of Education Sciences (IES)**, the Department's education research arm, providing \$762 million for the Institute, a \$120 million increase above the FY 2021 enacted levels and \$25 million over the budget request. In addition to sizable

increases to research and demonstration, the Committee report notes inclusion of \$25 million to conduct the 2024 NAEP Civics assessment to ensure “a sufficient sample size to provide State-level data for each State to better understand student performance in civics.”

Under the **Fund for the Improvement of Postsecondary Education (FIPSE)** account, which would be provided \$168 million in total, the Committee bill would provide \$15 million to support the **Centers of Excellence for Student Veteran Success** program that had been restarted in the FY 2020 appropriations after a hiatus. Under FIPSE, the bill would also continue funding of \$12 million to support the **Open Textbook Pilot** program. Additionally, the report notes funding of \$10 million for the **Modeling and Simulation** education training program, \$1 million for the **Transitioning Gang-Involved Youth to Higher Education** program, and \$8 million for the **Basic Needs of Students** grant program. Newly proposed grant programs under the bill include: \$5 million for a **Center of Excellence in Spatial Computing** designation, \$5 million for a **Menstrual Products** access program, \$5 million for a **Distributed Higher Education Digital Infrastructure Pilot** to support MSIs with digital infrastructure. FIPSE is also the placeholder account under the bill for \$92 million in higher education related community project funding requests from Members of Congress.

Career and Technical Education (CTE) would see a \$158 million increase when compared to FY 2021 and would be funded at \$1.5 billion. \$115 million would support CTE national programs, which would support the Biden Administration’s proposals for the Innovation and Modernization grants. These grants would support K-12 school districts focused on youth work-based learning and industry credential attainment efforts.

ED would also be directed to respond to several policy directives. These include updating Congress on the impact of COVID-19 on the ability of applicants to qualify for the Public Service Loan Forgiveness Program. ED would also be directed to coordinate with the Department of Labor, the Department of Defense, and other federal agencies to establish a Defense Education and Workforce Pipeline Strategy. The Committee also noted concern with the staffing shortages at the National Center for Education Statistics. The Government Accountability Office would also be directed to provide a report on the infrastructure needs of HSIs.

Department of Education
(in thousands of \$)

	FY 2021 Enacted	FY 2022 Request	FY 2022 House	House vs. FY 2021 Enacted	House vs. FY 2022 Request
Elementary and Secondary Education*					
Promise Neighborhoods	81,000	91,000	96,000	15,000 (18.5%)	5,000 (5.5%)
Education Innovation and Research	194,000	194,000	254,000	60,000 (30.9%)	60,000 (30.9%)
Personnel Preparation	90,200	250,000	250,000	159,800 (177.2%)	--
CTE National programs	7,421	115,421	115,421	108,000 (1455.3%)	--
Student Financial Assistance*					
Pell Grant†	6,495	6,895	6,895	400 (6.2%)	--

SEOG	880,000	880,000	1,028,000	148,000 (16.8%)	148,000 (16.8%)
Federal Work-Study	1,190,000	1,190,000	1,434,000	244,000 (20.5%)	244,000 (20.5%)
Higher Education*					
Title V Aid for Developing HSIs [†]	148,732	236,732	236,732	88,000 (59.2%)	--
Promoting Post-Baccalaureate Opportunities for Hispanic Americans	13,845	28,845	28,845	15,000 (108.3%)	--
Strengthening Institutions	109,007	209,007	209,007	100,000 (91.7%)	--
Strengthening Historically Black Colleges (HBCUs)	337,619	402,619	402,619	65,000 (19.3%)	--
Strengthening Asian American- and Native American Pacific Islander-serving Institutions (AANAPISI)	5,120	20,120	20,120	15,000 (293.0%)	--
Strengthening Native American-Serving Nontribal Institutions [‡]	5,120	12,120	12,120	7,000 (136.7%)	--
Title VI International Education and Foreign Language Studies	78,164	78,164	93,164	15,000 (19.2%)	15,000 (19.2%)
TRIO Programs	1,097,000	1,297,761	1,297,761	200,761 (18.3%)	--
GEAR UP	368,000	408,000	408,000	40,000 (10.9%)	--
GAANN	23,547	23,547	25,547	2,000 (8.5%)	2,000 (8.5%)
Teacher Quality Partnerships	52,092	132,092	132,092	80,000 (153.6%)	--
Child Care Access Means Parents in Schools	55,000	95,000	95,000	40,000 (72.7%)	--
Institute of Education Sciences	642,462	737,465	762,465	120,003 (18.7%)	25,000 (3.4%)
Research, Development and Dissemination	197,877	267,880	260,880	63,003 (31.8%)	-7,000 (2.6%)
Research in Special Education	58,500	58,500	59,500	1,000 (1.7%)	1,000 (1.7%)
Regional Education Laboratories	57,022	57,022	59,022	2,000 (3.5%)	2,000 (3.5%)
Statewide Data Systems	33,500	33,500	34,500	1,000 (3.0%)	1,000 (3.0%)

*Categories included for ease of reading the chart.

† The Pell Grant is listed as the total maximum grant award an individual could receive, including mandatory and discretionary funding. It is *not* listed in thousands of dollars.

Source: The House Appropriations Committee Labor, Health, and Human Services appropriations draft bill is available at <https://docs.house.gov/meetings/AP/AP00/20210715/113908/BILLS-117--AP--AP00-FY2022LHSSubcommitteeAppropriationsBill.pdf> and the related Committee report can be found at <https://docs.house.gov/meetings/AP/AP00/20210715/113908/HMKP-117-AP00-20210715-SD003.pdf>.

Department of Labor (DOL)

The Department of Labor (DOL) would receive \$14.7 billion in funding, which is \$2.1 billion more than in FY 2021. The bill would support increased investments in several programs that support workforce development efforts of interest to education entities.

Programs that would receive support include:

- \$435.8 million for the Dislocated Workers National Reserve, which is \$155 million more than FY 2021 funding. \$100 million of this funding would support the **Strengthening Community College Training Grants**, an increase of \$55 million compared to the FY 2021 enacted level. \$100 million would go to support a new **POWER grant** program, which is aimed assisting communities experiencing dislocations occurring in fossil fuel and other energy related industries;
- \$5 million to create an **Automation Impacted Industries Pilot Program** to support demonstration and pilot projects relating to the training needs of workers who are or are likely to be dislocated workers as a result of automation;
- \$150 million for **Reintegration of Ex-Offenders** programs, and increase of almost \$50 million compared to FY 2021;
- \$7 million for the **Workforce Data Quality Initiative**, which is \$1.2 million above the FY 2021 level;
- \$285 million for **Registered Apprenticeships (RA)** grants, which is \$100 million more than the FY 2021 level. DOL would be directed to continue working with intermediaries, support apprenticeships in cybersecurity, advanced manufacturing, arts, and entertainment, and increase the participation of women in apprenticeships. DOL would also be directed to prioritize apprenticeships in the clean energy sector;
- \$20 million for a **Veterans' Clean Energy Training Program**, which would support a competitive grant program to prepare veterans and their spouses for careers in clean energy; and
- \$6.7 million for the Women in Apprenticeship and Nontraditional Occupations (WANTO) program, which is \$5 million more than the funding provided in FY 2021.

DOL would also be directed to develop and pilot programs that facilitate education and training programs in the field of advanced manufacturing.

Department of Labor (in thousands of \$)

	FY 2021 Enacted	FY 2022 Request	FY 2022 House	House vs. FY 2021 Enacted	House vs. FY 2022 Request
Training and Employment Services					
Adult Employment and Training Activities	862,649	899,987	923,174	60,525 (7%)	23,187 (2.6%)
Youth Activities	921,130	963,837	988,604	67,474 (7.3%)	24,767 (2.6%)

National Dislocated Workers Grants	280,859	380,859	435,859	155,000 (55.1%)	55,000 (14.4%)
Apprenticeship Program	185,000	285,000	285,000	100,000 (54.1%)	--
Workforce Data Quality Initiative	6,000	6,000	7,250	1,250 (20.8%)	--
National Youth Employment Program	--	50,000	50,000	--	--
Veterans' Clean Energy Training Program	--	20,000	20,000	--	--

Institute of Museum and Library Services (IMLS)

The **Institute of Museum and Library Services** would receive \$282 million in FY 2022 under the bill, an increase of \$25 million over FY 2021 levels and \$17 million over the budget request. The accompanying report notes inclusion of \$4.5 million for IMLS' activities in "policy, research, and data collection, including functions formerly conducted by the National Commission on Libraries and Information Science." In addition, the report encourages IMLS to support initiatives to preserve and honor the "living memories of Holocaust survivors in an interactive format, which can help educate future generations about the atrocities of the Holocaust."

Sources and Additional Information:

Full Labor-HHS-ED Committee print of the bill:

<https://docs.house.gov/meetings/AP/AP00/20210715/113908/BILLS-117--AP--AP00-FY2022LHSSubcommitteeAppropriationsBill.pdf>

Committee Report accompanying the bill:

<https://docs.house.gov/meetings/AP/AP00/20210715/113908/HMKP-117-AP00-20210715-SD003.pdf>