

Appropriations Update: House Committee Approves FY 2021 Labor, Health and Human Services, and Education Funding Bill

Lewis-Burke Associates LLC – July 14, 2020

On July 13, the House Appropriations Committee amended and approved its fiscal year (FY) 2021 Labor, Health and Human Services, and Education (Labor-HHS-ED) appropriations bill. This action followed the Labor-HHS-ED Subcommittee's advancement of the bill on July 7.

The bill would provide \$196.5 billion in overall funding for programs at the Departments of Labor, Health and Human Services, and Education. As part of this total, the bill would provide \$24.4 billion in emergency funding for several agencies and programs to further bolster the response to the COVID-19 pandemic. This emergency funding amount includes \$9 billion for the Centers for Disease Control and Prevention (CDC); \$4.5 billion for the Biomedical Advanced Research and Development Authority (BARDA); \$5 billion for the National Institutes of Health (NIH); \$5 billion for the Public Health Emergency Fund; and \$925 million for State Unemployment Insurance.

The bill would provide a total of \$47 billion for NIH, an increase of \$5.5 billion above the FY 2020 enacted level. Within this \$5.5 billion increase, the bill would provide a \$500 million (1.2 percent) increase in annual appropriations and \$5 billion in emergency appropriations available through FY 2025. The Department of Health and Human Services (HHS) would receive \$96.4 billion in appropriations, an increase of \$1.5 billion over the FY 2020 level. The Health Resources and Services Administration would receive \$7.194 billion, an increase of \$157 million (2.2 percent) over FY 2020 levels. The Substance Abuse and Mental Health Services Administration would receive a \$96 million (1.8 percent) increase, totaling \$5.987 billion for FY 2021. For the Department of Education (ED), the bill would provide more than \$73.4 billion in appropriations, a more than \$700 million increase over FY 2020 levels. DOL would receive \$12.7 billion in funding, which is \$252 million more than in FY 2020. The Institute for Museum and Library Services (IMLS) would receive \$252 million in FY 2021, an increase of \$5 million over FY 2020 levels.

The Senate has not yet started consideration of FY 2021 appropriations bills. Senate Republicans are likely to be opposed to the use of emergency funding in their FY 2021 spending bill, setting up a difficult negotiation process. Regardless of any near-term Senate action, Congress is likely to pass a temporary stop-gap funding measure, known as a continuing resolution, to fund all federal agencies past the November election as legislative time and bipartisanship will quickly run out as the end of the fiscal year approaches.

National Institutes of Health (NIH)

The bill would provide a total of \$47 billion for NIH, an increase of \$5.5 billion above the FY 2020 enacted level. Within this \$5.5 billion increase, the bill would provide a \$500 million (1.2 percent) increase in annual appropriations and \$5 billion in emergency appropriations available through FY 2025. The bill notes that this \$5 billion in emergency funding could be used "to offset costs related to reductions in laboratory productivity resulting from interruptions or shutdowns of research activity" in FY 2020. The bill would direct this emergency funding to the Office of the Director (OD) and would require that at least \$2.5 billion of the total amount be distributed across NIH proportionate to each

Institute and Center's (IC) FY 2020 funding level, with each IC receiving an increase of at least 7 percent above the FY 2020 enacted level.

The bill includes \$404 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 Cures legislation. The Committee recommends \$195 million for the **Cancer Moonshot** program; \$500 million for the "**All of Us**" **precision medicine initiative** (\$109 million of this total from Cures); and \$500 million for the **BRAIN Initiative** (\$100 million of this total from Cures).

In the context of the ongoing COVID-19 pandemic, the Committee continues to emphasize its support for the development of a **universal influenza vaccine** and would provide \$240 million for basic, clinical, and translational research in FY 2021, an increase of \$40 million over FY 2020 enacted levels. In addition, the Committee encourages the National Institute of Allergy and Infectious Diseases (NIAID) to expand its research infrastructure to include additional level four biosafety laboratories (BSL-4) in its National Biocontainment Laboratory (NBL) network to conduct research on next generation therapeutics, diagnostics, and vaccines. The Committee also encourages the National Institute of General Medical Sciences (NIGMS) and the Fogarty International Center (FIC) to continue research programs that support the development of tools and models for forecasting emerging infectious diseases.

Like in past years, the Committee continues to articulate support for and prioritization of research into **Alzheimer's Disease and Related Dementias (ADRD)**, providing \$2.9 billion for ADRD research in FY 2021, an increase of approximately \$35 million over current levels. In addition, the Committee continues to support NIH's efforts to combat the **opioid public health crisis** and would provide \$532.6 million for the Helping to End Addiction Long-Term (HEAL) Initiative in FY 2021. Of note, the report accompanying the bill strongly encourages the National Institute on Drug Abuse (NIDA) to create a program to support regional centers of excellence in opioid research and training. These centers would work with states to implement best practices in opioid prescribing, pain management, and provider training, among other topics.

The Committee would provide \$396.6 million for the **Institutional Development Award (IDeA)** program, an increase of \$10 million above the FY 2020 level. IDeA supports research capacity building in states that have historically low levels of NIH funding. The Committee directs NIH to fund the **Clinical and Translational Science Awards (CTSA)** program at the same level as in FY 2020 (\$578.1 million).

The bill would provide \$50 million for **biomedical research facilities** grants to expand, remodel, or renovate research infrastructure. The Committee urges NIH to make awards large enough to support a significant portion of construction costs. In addition, the Committee directs NIH to ensure that at least 25 percent of this funding be allocated to institutions that serve underrepresented groups and populations. In addition, the Committee would provide \$80 million for the National Institute of Minority Health and Health Disparities (NIMHD) program on **Research Centers in Minority Institutions (RCMI)**, an increase of \$5 million above the FY 2020 level. The RCMI program supports infrastructure development at historically minority graduate and health professional schools.

Of note, the bill would retain the **investigator salary cap** at Executive Level II (\$197,300), rejecting the Administration's proposal to lower the cap to Executive Level V (\$160,100). Additionally, the bill

includes legislative language that would prohibit the Trump Administration or HHS from making any changes to **facilities and administrative (F&A) cost policies**, once again.

National Institutes of Health

(in thousands of \$)

	FY 2020 Enacted	FY 2021 Request	FY 2021 House	House vs. FY 2020 Enacted	House vs. FY 2021 Request
NIH, Total*	41,684,000	38,371,491	46,959,000	5,275,000 (12.7%)	8,587,509 (22.4%)
National Cancer Institute (NCI)	6,440,442	5,881,173	6,494,155	53,713 (0.8%)	612,982 (10.42%)
National Heart, Lung, and Blood Institute (NHLBI)	3,624,258	3,298,004	3,655,428	31,170 (0.9%)	357,424 (10.8%)
National Institute of Dental and Craniofacial Research (NIDCR)	477,429	434,559	481,535	4,106 (0.9%)	46,976 (10.8%)
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)	2,114,314	1,924,211	2,132,498	18,184 (0.9%)	208,287 (10.8%)
National Institute of Neurological Disorders and Stroke (NINDS)	2,444,687	2,245,110	2,465,110	20,423 (0.8%)	220,000 (9.8%)
National Institute of Allergy and Infectious Diseases (NIAID)	5,885,470	5,445,886	6,013,087	127,617 (2.2%)	567,201 (10.4%)
National Institute of General Medical Sciences (NIGMS)	2,937,218	2,672,074	2,972,479	35,261 (1.2%)	300,405 (11.2%)
Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)	1,556,879	1,416,366	1,570,269	13,390 (0.9%)	153,903 (10.9%)
National Eye Institute	824,090	749,003	831,177	7,087 (0.9%)	82,174 (11.0%)
National Institute of Environmental Health Sciences (NIEHS)	802,598	730,147	809,501	6,903 (0.9%)	79,354 (10.9%)
National Institute on Aging (NIA)	3,543,673	3,225,782	3,609,150	65,477 (1.8%)	383,368 (11.9%)
National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)	624,889	568,480	630,263	5,374 (0.9%)	61,783 (10.9%)

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National Institute on Deafness and Other Communications Disorders (NIDCD)	490,692	446,397	494,912	4,220 (0.9%)	48,515 (10.9%)
National Institute of Mental Health (NIMH)	2,038,374	1,844,865	2,055,303	16,929 (0.8%)	210,438 (11.4%)
National Institute on Drug Abuse (NIDA)	1,462,016	1,431,770	1,474,590	12,574 (0.9%)	42,820 (3.0%)
National Institute on Alcohol Abuse and Alcoholism (NIAAA)	545,373	497,346	550,063	4,690 (0.9%)	52,717 (10.6%)
National Institute on Nursing Research (NINR)	169,113	156,804	170,567	1,454 (0.9%)	13,763 (8.8%)
National Human Genome Research Institute (NHGRI)	606,349	550,116	611,564	5,215 (0.9%)	61,448 (11.2%)
National Institute of Biomedical Imaging and Bioengineering (NIBIB)	403,638	368,111	407,109	3,471 (0.9%)	38,998 (10.6%)
National Institute on Minority Health and Health Disparities (NIMHD)	335,812	305,498	343,700	7,888 (2.3%)	38,202 (12.5%)
National Center for Complementary and Integrative Health (NCCIH)	151,740	138,167	153,045	1,305 (0.9%)	14,878 (10.8%)
National Center for Advancing Translational Sciences (NCATS)	832,888	787,703	840,051	7,163 (0.9%)	52,348 (6.6%)
John E. Fogarty International Center (FIC)	80,760	73,531	86,455	5,695 (7.1%)	12,924 (17.6%)
National Library of Medicine (NLM)	456,911	415,665	460,841	3,930 (0.9%)	45,176 (10.9%)
Office of the Director (OD)	2,239,787	2,086,463	2,324,548	84,761 (3.8%)	238,085 (11.4%)
Building Facilities	50,000	--	50,000	--	--

Source:

<https://appropriations.house.gov/sites/democrats.appropriations.house.gov/files/LHHS%20Report%20-%20GPO%20-%207.8.20.pdf>

*The topline total funding for NIH includes \$5 billion in emergency funding that would be available through FY 2025. Of this amount, \$2.5 billion would be distributed to NIH Institutes and Centers and the remaining \$2.5 billion may be used to offset losses in laboratory productivity due to pandemic related disruptions. For simplicity, the table only includes emergency funding at the topline agency level and not for each Institute or account listed in the table.

Other Department of Health and Human Services (HHS)

The Department of Health and Human Services (HHS) would receive \$96.4 billion in appropriations in FY 2021, an increase of \$1.5 billion over the FY 2020 level. The bill highlights several themes including greater investments in strengthening public health infrastructure, addressing social determinants of health and health disparities, curbing the opioid epidemic, enhancing telehealth, and combatting antibiotic resistance.

The **Centers for Disease Control and Prevention (CDC)** would receive \$7.9 billion, a \$232 million increase above the FY 2020 level. Given the current state of the COVID-19 pandemic in the U.S., the CDC would also receive \$9 billion in emergency appropriations for relevant pandemic-related programs and activities including emergency funding for state and local health departments and laboratories, public health modernization, public health workforce development, vaccination campaigns, and the Infectious Disease Rapid Response Reserve Fund. The bill would also:

- Provide an increase of \$40 million for Influenza Planning and Response activities to address looming concerns around an anticipated double wave of influenza and COVID-19 in the year ahead;
- Invest \$10 million to establish a new Social of Determinants Health Pilot Program, which would award competitive grants to states and localities to develop “social determinants accelerator plans,” as outlined in the *Social Determinants Accelerator Act* (H.R. 4004);
- Provide an additional \$4.5 million to further support provisions in the *BOLD Infrastructure for Alzheimer’s Act* (P.L. 115-406), which established an Alzheimer’s and Related Dementias Public Health Centers of Excellence program;
- Provide a \$5 million increase to expand investments in more states and cities to plan for public health threats caused by climate change;
- Provide a \$12.5 million increase for research on firearm injury and mortality;
- Provide a \$5 million increase for combatting antibiotic resistant bacteria. The bill places a particular emphasis on the importance of utilizing a “One Health” approach and would direct the CDC to develop a National One Health Framework, as well as establish a One Health Federal Interagency Coordination Committee; and
- Level fund several CDC programs of importance to universities including: the Academic Centers for Public Health Preparedness Program, which would receive \$8.2 million; the Prevention Research Centers Program, which would receive \$26 million; and the Education and Research Centers, which would receive \$30 million.

Within the **Health Resources and Services Administration’s (HRSA)** Bureau of Health Workforce (BHW), Title VII Health Professions and Title VIII Nursing Workforce Development Programs would receive a combined total of \$782.5 million, a \$48 million increase above the FY 2020 level. While several BHW programs were level funded, the bill would provide funding increases to a number of Title VII and Title VIII programs including:

- A \$25 million increase for the Behavioral Health Workforce Education and Training program (BHWET);
- A \$5 million increase for the Medical Student Education (MSE) program;
- \$3 million increases for the Advanced Education Nursing and Nurse Corps programs; and

- \$2 million increases for the Public Health and Preventive Medicine; Area Health Education Centers (AHEC); Geriatrics Workforce; Mental and Behavioral Health; and Nursing Workforce Diversity and Nurse Education, Practice, and Retention programs.

The Committee's report also highlights HRSA's diversity pipeline programs, such as the Health Careers Opportunity Program (HCOP) and Scholarships for Disadvantaged Students (SDS) and requests a report from the agency on how these programs can be further strengthened to address mental health disparities. Additional areas of emphasis outlined in the bill for HRSA include \$42 million for telehealth-related activities, a \$13 million increase above the FY 2020 level, and \$980 million for the Maternal and Child Health Bureau, an increase of \$37 million. Additionally, the bill would provide \$1.6 billion to Community Health Centers, which is an increase of \$25 million above the FY 2020 level. This is in addition to mandatory funding previously provided in the *CARES Act* to support COVID-19 testing and treatment at the centers.

Also, the bill would provide \$5.98 billion for the **Substance Abuse and Mental Health Services Administration (SAMHSA)**, an increase of \$96 million over the FY 2020 level. Within SAMHSA, the bill would provide: approximately \$1.761 billion for the Center for Mental Health Services (CMHS), an increase of \$83 million; \$3.848 billion for the Center for Substance Abuse Treatment (CSAT), an increase of \$10 million; and \$209 million for the Center for Substance Abuse Prevention (CSAP), an increase of \$3 million. The bill would also:

- Provide a \$2 million increase for the Minority Fellowship Program, which aims to increase the number of racial and ethnic minorities working in behavioral health fields;
- Provide a \$5 million increase to SAMHSA's Project AWARE program, which provides grants for improvement of mental health literacy among teachers and other youth-facing professionals and encourages SAMHSA to expand and strengthen its programs focused on campus-based prevention and treatment of mental health disorder prevention and treatment;
- Provide a \$5 million increase to train health systems on integration of behavioral healthcare into primary care settings;
- Provide \$2 million for a grant program to train pediatric healthcare providers on Screening, Brief Intervention, and Referral to Treatment (SBIRT) to prevent underage drinking and other substance use among youth populations;
- Encourage SAMHSA to develop programs aimed at countering the rising rate of suicide, including programs on school-based suicide prevention and LGBTQ communities;
- Encourage State Opioid Response Grant awardees to partner with AHECs on statewide education, training, and response to opioid use disorder; and
- Encourage SAMSHA to develop programs focused on substance abuse among populations with high risk of becoming homeless.

The bill would also provide \$343 million to the **Agency for Healthcare Research and Quality (AHRQ)**, a \$5 million increase above the FY 2020 level. No less than \$10 million would support AHRQ activities to combat antimicrobial resistance. Additional priority areas outlined in the bill include cardiovascular clinical outcomes, infectious disease, and minimizing racial bias in health technology.

Like previous fiscal years, the **Office of the National Coordinator for Health IT (ONC)** would remain flat funded at \$60 million. Report language lays out two new initiatives for ONC in FY 2021, including:

- Conducting a report to be submitted within a year of enactment on the state of electronic medical records across hospitals in the country and
- Conducting a report on COVID-19 coordination activities, “the extent to which computable information is being shared with local, State, and Federal authorities, identified barriers to interoperable exchange of electronic surveillance data, and strategies that can be put in place to improve the surveillance technology infrastructure.”

In addition, the Committee’s report would instruct ONC to examine existing health IT infrastructure and the barriers to integration and modernization. Mirroring last year’s actions, the Committee also expressed its concern with inconsistent patient data matching capabilities. The report thus “encourages the Secretary [of the Department of Health and Human Services] to provide technical assistance to private-sector-led initiatives to develop a coordinated national strategy that will promote patient safety by accurately identifying patients to their health information.”

Further, the bill would provide level funding of \$561.7 million to the **Biomedical Advanced Research Development Authority (BARDA)**. Within this funding, the Committee would encourage BARDA to form public-private partnerships to advance domestic advanced manufacturing of active pharmaceutical ingredients; expand current programs to address antifungal-resistant pathogens; invest in research and development regarding antimicrobial resistance; and support vaccine development using recombinant DNA technology, among other priorities. The bill would also provide BARDA with \$4.5 billion in emergency supplemental funding, including \$3.5 billion for research and manufacturing of vaccines and therapeutics, \$500 million for antibacterial research and development, and \$500 million for construction and renovation of manufacturing facilities.

The bill would provide \$4 billion to the **Centers for Medicare and Medicaid Services (CMS)** for program management and administrative costs. Specifically, the bill would:

- Direct the Secretary of HHS to allocate at least \$100 million funded from health insurance user fees to fund insurance navigator and educational activities as authorized by the *Patient Protection and Affordable Care Act (ACA)*;
- Direct CMS to comply with the October 2019 court ruling that rolled back the CMS site-neutral cuts and provide backpay to impacted entities;
- Encourage CMS to use its regulatory authority to ensure access to telehealth and equitable reimbursement payments;
- Direct CMS to compile publicly available statistics on Disproportionate Share Hospitals (DSH), including Medicaid inpatient utilization rate and low-income utilization rate;
- Direct CMS to report on impacts to patients who previously received services from the limited wraparound coverage pilot program;
- Direct CMS to work with hospitals and other care providers to develop regulatory and payment reforms intended to improve integration of behavioral and primary care;
- Direct HHS to report on any payments through the CMS Medicare Accelerated and Advanced Payments Program to hospitals owned by private-equity entities and to consider requiring that such entities must not lay off or furlough employees as a requirement to receive funding under this program;
- Encourage CMS to test a care model that integrates pharmacists in the healthcare delivery team;

- Encourage CMS to partner with HRSA on expanding nutrition education in medical school and graduate medical education curricula; and
- Direct HHS to explore various waivers that can enable the use of Medicaid funding to provide affordable housing or resident services to homeless patients.

Department of Health and Human Services (Other)

(In thousands of \$)

	FY 2020 Enacted	FY 2021 Request	FY 2021 House	House vs. FY 2020 Enacted	House vs. FY 2021 Request
Health Resources and Services Administration (HRSA)	7,037	6,289	7,194	157 (2.2%)	898 (14.4%)
Title VII	475	167	513	38 (8.0%)	346 (207.2%)
Title VIII	260	83	270	10 (3.8%)	187 (225.3%)
Substance Abuse and Mental Health Services Administration (SAMHSA)	5,882	5,740	5,987	96 (1.8%)	247 (4.3%)
Mental Health Services	1,678	1,696	1,761	83 (4.9%)	65 (3.8%)
Substance Abuse Treatment	3,838	3,808	3,848	10 (0.3%)	40 (1.1%)
Substance Abuse Prevention	206	97	209	3 (1.5%)	112 (115.5%)
Agency for Healthcare Research and Quality (AHRQ)	338	N/A*	343	5 (1.5%)	343 (N/A)
Centers for Disease Control and Prevention (CDC)†	7,750	7,056	7,982	232 (3.0%)	925 (13.1%)
Chronic Disease Prevention and Health Promotion	1,240	813	1,306	66 (5.3%)	493 (60.6)
National Institute for Occupational Safety and Health (NIOSH)	343	190	345	2 (0.6%)	155 (81.6%)
Environmental Health	214	182	237	23 (10.8%)	55 (30.2%)
Administration on Community Living (ACL)	2,171	2,072	2,225	54 (2.5%)	153 (7.4%)
National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)	112	90	112	--	22 (24.4%)
Administration for Children and Families (ACF)	39,523	34,994	41,256	1,733 (11.5%)	6,262 (36.0%)

Office of the National Coordinator for Health IT (ONC)	60	51	60	--	9 (17.6%)
Biomedical Advanced Research and Development Authority (BARDA) ‡	5,671	5,671	5,671	--	--

* Under the budget request, AHRQ would be consolidated into the National Institute for Research on Safety and Quality within NIH.

† In addition, the Committee included \$9 billion in multi-year emergency appropriations for CDC programs and activities, including emergency appropriations for State and local health departments, State and local public health laboratories, global health and global disease detection, vaccination campaigns, public health data modernization, public health workforce development, and the Infectious Diseases Rapid Response Reserve Fund.

‡ In addition, the Committee included \$4.5 billion in emergency appropriations for programs and activities for BARDA.

Department of Education (ED)

The Department of Education (ED) would receive more than \$73.4 billion in appropriations, which is almost \$7 billion more than proposed in the President's budget request and more than \$700 million more than in FY 2020. Programs important to higher education that would receive increases include Pell Grants, Federal Work-Study (FWS), Hispanic Serving-Institutions (HSIs), and Title VI international education programs, among other programs.

For **Pell Grants**, the bill would provide \$6,495 for the maximum individual Pell Grant award for the 2021-2022 school year, a \$150 increase over the current maximum award level. The bill would also provide small increases for the **Supplemental Education Opportunity Grants (SEOG)** program and **Federal Work-Study (FWS)** program, which would be provided \$880 million and of \$1.2 billion, respectively. Similarly, the **TRIO Programs** would be provided a modest increase of \$10 million over current levels, up to \$1.1 billion. The Committee would direct ED to provide inflationary increases for current grantees and to increase the number and size of new awards in the Talent Search and Educational Opportunity Centers grant competitions.

The bill proposes increasing funding for the **Title VI International Education and Foreign Language Studies** programs, including a \$4 million increase, totaling \$80 million for those programs. The bill would also increase funding by \$1 million for the **Graduate Assistance in Areas of National Need (GAANN)** program, for a level of \$24 million, a rejection of the President's proposal to eliminate the program. The Committee would direct the Secretary of Education to consider the inclusion of mental health services as an area of need in the next GAANN grant competition. The bill would also increase funding for the **Child Care Access Means Parents in School (CCAMPIS)** program to \$55 million, an increase of \$2 million above the FY 2020 enacted level.

The Title V **Developing Hispanic Serving Institutions (Developing HSIs)** program and the **Promoting Post-Baccalaureate Opportunities for Hispanic Americans (PPOHA)** program would also have slight increases. The bill would provide a total of \$155 million for Developing HSIs, a \$12 million increase of above the enacted level, and nearly \$14 million for PPOHA. Additionally, the Strengthening Asian American and Native American Pacific-Islander-Serving Institutions (AANAPISI) program would receive

\$4.7 million. Like past years, the Committee bill ignored the President's budget request proposal to consolidate several minority-serving institution programs.

Also, the Committee would increase funding for the **Institute of Education Sciences (IES)**, the Department's education research arm, providing \$630 million for the Institute, a \$7 million increase above the FY 2020 enacted levels. The Committee report rejects the Administration's recommendation to eliminate funding for the IES Regional Educational Laboratories (RELS).

Under the **Fund for the Improvement of Postsecondary Education (FIPSE)** account, which would be provided \$31 million in total, the bill would provide \$7 million to support the **Centers of Excellence for Veterans Student Success** program that had been restarted in the FY 2020 appropriations after a hiatus. The bill would also continue funding of \$7 million to support a new competition for the **Open Textbook Pilot** program. Newly proposed grant programs under the bill include: \$7 million for a **Modeling and Simulation** education training program, \$1 million for a **Transitioning Gang-Involved Youth to Higher Education** program, \$2 million to support a **Center of Educational Excellence** at an undergraduate Historically Black College or University focused on the production of Black teachers, a \$5 million competitive **Basic Needs of Students** grant program to support programming and best practice reports, as well as \$2 million for the operation of the **National Center for Information and Technical Support for Postsecondary Students with Disabilities**.

In addition to providing proposed funding, the bill includes language that would direct ED to carry-out or restrict various policies. Some of these mandates include directing the Department to work with institutions on improving the reporting process around Section 117 foreign gift reporting. Of note, the bill would prevent funding for enacting or enforcing ED's recent final rule related to Title IX compliance related to sexual harassment. The bill also includes new statutory language that would prohibit ED from penalizing institutions of higher education that conduct scientific research on marijuana. The report language includes a directive that would require ED to inform Congress any time it launches a new experimental site or pilot program.

New and expanded initiatives supported by the Committee include bill language that removes a prohibition preventing students who are incarcerated from receiving Pell Grants, and the report reiterates support for ED's Second Chance Pell Experimental Sites initiative. ED would also be directed to report on the number of students who could benefit from using their remaining Pell eligibility to pursue postbaccalaureate studies. Funding would also be provided for the Temporary Extended Public Service Loan Forgiveness (TEPSLF) program, and report language notes support for the "recent announcement to consolidate the PSLF and TEPLSF applications and encourages further actions that help borrowers navigate the program without unnecessary bureaucratic burden."

Several of the bill's K-12 initiatives also benefit higher education. This includes support for the **Comprehensive Centers** and the **Education and Innovation Research (EIR)** program, which would receive \$195 million under the bill and includes Committee report language that would direct ED to consider "all nonprofit institutions of higher education regardless of the category of its tax-exempt designation" as eligible grant entities. The bill also includes language for the **Supporting Effective Educator Development (SEED)** grant program, which supports professional development opportunities for school personnel. That language includes support for Minority Serving Institutions (MSIs) that have a focus on improving teacher diversity and support for evidence-based professional development in civic education. The bill would continue the **Mental Health Demonstration Grant and the Mental Health**

Personnel Grant competitions, which support the training of school counselors, social workers, and psychologists, or other mental health professionals qualified to provide school-based mental health services. Additionally, \$10 million would be provided to support doctoral-level personnel preparation in special education. **Career and Technical Education (CTE)** would see a modest, \$25 million increase and the bill would direct the Department to support cybersecurity education. In addition, ED would be directed to examine the alignment of the postsecondary CTE system with the adult education system, to expand workforce training, and support entrepreneurship and financial literacy education. Further, the bill would direct the Government Accountability Office (GAO) to conduct a study on skill training. The study would examine, among other areas, programs to assist midcareer workers upskill and financing options to help students pay for career and technical education.

Department of Education

(in thousands of \$)

	FY 2020 Enacted	FY 2021 Request	FY 2021 House	House v. FY 2020 Enacted	House v. FY 2021 Request
Elementary and Secondary Education*					
Promise Neighborhoods	80,000	0	82,000	2,000 (2.5%)	82,000 (N/A)
Education Innovation and Research	190,000	0	195,000	5,000 (2.6%)	195,000 (N/A)
Student Financial Assistance*					
Pell Grant[†]	6,345	6,345	6,495	150 (2.4%)	150 (2.4%)
SEOG	865,000	0	880,000	15,000 (1.7%)	880,000 (N/A)
Federal Work-Study	1,180,000	500,000	1,200,000	30,000 (2.5%)	700,000 (140%)
Higher Education*					
Title V Aid for Developing HSIs	143,081	0	155,081	12,000 (8.4%)	155,000 (N/A)
Promoting Post-Baccalaureate Opportunities for Hispanic Americans	12,838	0	13,599	761 (5.9%)	13,599 (N/A)
Title VI International Education and Foreign	76,164	0	80,323	4,159 (5.5%)	80,323 (N/A)

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Language Studies					
TRIO Programs	1,090,000	950,000	1,100,000	10,000 (0.9%)	150,000 (15.8%)
GEAR UP	365,000	0	370,000	5,000 (1.4%)	370,000 (N/A)
GAANN	23,047	0	24,047	1,000 (4.3%)	24,047 (N/A)
Teacher Quality Partnerships	50,092	0	52,092	2,000 (4.0%)	52,092 (N/A)
Child Care Access Means Parents in Schools	53,000	15,134	55,000	2,000 (3.4%)	39,866 (263.4%)
Institute of Education Sciences	623,462	565,440	630,462	7,000 (1.1%)	65,022 (11.5%)
Research, Development and Dissemination	195,877	195,877	197,877	2,000 (1.0%)	2,000 (1.0%)
Research in Special Education	56,500	56,500	58,500	2,000 (3.5%)	2,000 (3.5%)
Regional Education Laboratories	56,022	0	57,022	1,000 (1.8%)	57,022 (N/A)
Statewide Data Systems	33,000	0	33,500	500 (1.5%)	33,500 (N/A)

*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.

Department of Labor (DOL)

The Department of Labor (DOL) would receive \$12.7 billion in funding, which is \$252 million more than in FY 2020. The bill would support increased investments in several programs that support workforce development efforts at institutions of higher education. The report accompanying the bill also includes several policy directives that would direct DOL to provide more reporting on the Industry Recognized Apprenticeship Program (IRAP) and encourage the Department to support apprenticeship programs that increase the number of trained workers in cybersecurity. Additionally, almost \$281 million in funding would be provided for the Dislocated Workers National Reserve, an increase of \$10 million over the fiscal year 2020 enacted level. Further, the bill would:

- Provide \$10.2 billion for the **Employment Training Administration**, an increase of \$187 million above the FY 2020 enacted level;
- Support \$2.9 billion for Workforce Innovation and Opportunity Act State Grants, an increase of \$50 million above the FY 2020 enacted level;

- Provide a \$10 million increase over the FY 2020 enacted funding for **Registered Apprenticeships (RA)**, totaling \$185 million for RAs and continues language allowing funds only to support RAs;
- Provide \$50 million to continue and expand **Strengthening Community College Training Grants** to provide training to workers in in-demand industries at community colleges and four-year partners, an increase of \$10 million over the FY 2020 enacted level.

Institute of Museum and Library Services (IMLS)

The **Institute of Museum and Library Services (IMLS)** would receive \$252 million in FY 2021, an increase of \$5 million over FY 2020 levels. As in previous years, the Committee rejects the President's budget request to eliminate this agency, which funds grants in support of museums and libraries and related professional development activities. The accompanying report notes that in addition to rebuffing the President's request, the Committee would allocate a little over \$3 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://appropriations.house.gov/sites/democrats.appropriations.house.gov/files/LHHS%207.5_xml.pdf

Committee Report accompanying the bill:

<https://appropriations.house.gov/sites/democrats.appropriations.house.gov/files/LHHS%20Report%20-%20GPO%20-%207.8.20.pdf>